

Center Name:  Memorable Moments			Address: 4848 Huron Dr. NE Rio Rancho, NM 87144			Phone: (505)891-1456			
License Number:	Issue Date:	Expiration [	Date:	Type:			Status:	•	
100407	11/21/2016	11/20/2017		4 Star Child	Care Center		Licensed		
Capacity	Capacity								
Over Age 2: 68	Under Age 2:	18 Night	Care:	0 PI	ayground: 25	Ove	er 2: 17	. Und	er 2: 10
Days and Hours of Operation									
	<u>Monday</u>	Tuesda	<u>w</u>	<u>ednesday</u>	<u>Thursday</u>	<u>Fri</u>	day	<u>Saturday</u>	<u>Sunday</u>
Opening Times:	06:00 AM	06:00 AM	Л	06:00 AM	06:00 AM	06:0	00 AM	Closed	Closed
Closing Times:	06:30 PM	06:30 PM	И (	06:30 PM	06:30 PM	06:3	0 PM		
# of Classrooms:	P	urpose:			Date:		Ti	me:	
6	А	nnual			09/13/2017		09	:30 AM	
Comments									

Licensure			
8.16.2.11 A TYPES OF LICENSES	Not Inspecte		
8.16.2.11 B RENEWAL OF LICENSE	Not Inspecte		
8.16.2.11 D NON-TRANSFERABLE RESTRICTIONS OF LICENSE	Not Inspecte		
8.16.2.12 A, K, M LICENSING ACTIONS AND ADMINISTRATIVE APPEALS	Not Inspecte		
8.16.2.17 E, F SURVEYS FOR CHILD CARE FACILITIES	Compliance		
8.16.2.18 D COMPLAINTS	Not Inspecte		
8.16.2.21 A LICENSING REQUIREMENTS	Not Inspect		
8.16.2.21 B CAPACITY OF CENTERS	Complian		
8.16.2.21 C INCIDENT REPORTING REQUIREMENTS	Not Inspect		
Administrative Requirements	·		
8.16.2.22 A ADMINISTRATION RECORDS	Non-complian		
Deficiencies  The center failed to display in a prominent place that is readily visible to parents, staff and visitors the current child care regulations. Corrected on site. Director printed and posted regulations.  Regulation: 8.16.2.22A			
Corrective Action Plan The center will post the missing item. Corrected on site. Director printed and posted regulations.  Date to be Completed: 09/13/2017			
8.16.2.22 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT	Not Inspect		
8.16.2.22 C POLICY AND PROCEDURES	Complian		
8.16.2.22 D FAMILY HANDBOOK	Not Inspect		

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### **Administrative Requirements**

#### 8.16.2.22 E CHILDREN'S RECORDS

Non-compliance

#### **Deficiencies**

Of the 20 children's records reviewed, 2 is/are missing the date the child first attended the center. See Children's Records 8.16.2.22 form for the child(ren) with missing information and/or authorization.

**Regulation:** 8.16.2.22E(1)(d)

#### **Corrective Action Plan**

The first attendance date will be added and the center will review all children's records to ensure complete information is on file.

Date to be Completed: 10/13/2017

#### **Deficiencies**

Of the 20 children's records reviewed, 5 is/are missing a copy of an up-to-date immunization record or public health division approved exemption. See Children's Records 8.16.2.22 form for the child(ren) with no immunization/exemption.

**Regulation:** 8.16.2.22E(1)(e)

#### **Corrective Action Plan**

Parents will be advised to submit a complete and up-to-date immunization record or exemption. The center will review all children's records to ensure complete information is on file.

Date to be Completed: 10/13/2017

#### **Deficiencies**

Of the 20 children's records reviewed, 4 is/are missing an enrollment agreement form signed by the parent or guardian with an outline of services and costs. See the Children's Records 8.16.2.22 form for the child(ren) with missing information.

 $\textbf{Regulation:} \ 8.16.2.22E(1)(k)$ 

### **Corrective Action Plan**

Parents will be advised to sign the enrollment agreement. The center will review all children's records to ensure an enrollment agreement form is on file.

Date to be Completed: 10/13/2017

#### **Deficiencies**

Of the 20 children's records reviewed, 2 is/are missing the name and telephone number of a physician or emergency medical center authorized by a parent or guardian to contact in case of illness or emergency. See Children's Records 8.16.2.22 form for the child(ren) with missing information.

**Regulation:** 8.16.2.22E(2)(c)

#### **Corrective Action Plan**

Parents will be advised to review and add missing information. The center will review all children's records to ensure contact information for a physician or medical center is on file.

Date to be Completed: 10/13/2017

8.16.2.22 F PERSONNEL RECORDS Non-compliance

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Center Name:License Number:Date:Memorable Moments10040709/13/2017

## **Administrative Requirements**

#### **Deficiencies**

From the review of staff records, it was determined that 3 out of 14 staff records does/do not include signed acknowledgement that the center's disaster preparedness plan and fire evacuation plan were reviewed.

 $\textbf{Regulation:} \ 8.16.2.22F(1)(P)$ 

### **Corrective Action Plan**

The center will have staff complete the required acknowledgement and will retain on file.

Date to be Completed: 10/13/2017

#### **Deficiencies**

From the review of staff records, it was determined that 4 out of 14 staff records does/do not include a professional development plan based on seven areas of competency. See Staff Records 8.16.2.22 form for staff who need a current plan.

**Regulation:** 8.16.2.22F(1)(n)

### **Corrective Action Plan**

The center will have staff complete a professional development plan and sign the plan . The plan will be maintained on file.

Date to be Completed: 10/13/2017

#### **Deficiencies**

From the review of staff records, it was determined that 2 out of 14 staff records does/do not include signed acknowledgement that the personnel handbook had been read and understood. See Staff Records 8.16.2.22 form for staff who need to complete the acknowledgement.

**Regulation:** 8.16.2.22F(1)(o)

#### **Corrective Action Plan**

The center will have staff complete the required acknowledgement and will retain on file.

Date to be Completed: 10/13/2017

8.16.2.22 G PERSONNEL HANDBOOK	Not Inspected			
Personnel & Staffing				
8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS	Compliance			
8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING	Non-compliance			
<u>Deficiencies</u>				
From the review of staff records, it was determined that 2 out of 14 staff does/do not have				
documentation of the 45-hour entry level course or an approved equivalent prior to or within				
six months of employment.				
<b>Regulation:</b> 8.16.2.23B(2)(c)				
Corrective Action Plan				
Training will be completed for staff as required and documentation retained on file . Director				
will submit trascript for educator and 45 hour certificate for educator.				
Date to be Completed: 10/13/2017				
8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES	Compliance			
Services & Care of Children				
8.16.2.24 A GUIDANCE	Non-compliance			

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### Services & Care of Children

#### **Deficiencies**

Of the 14 staff's records reviewed, 1 is/are missing a signed staff acknowledgement that the center's guidance policy had been read and understood. See the Children's Records 8.16.2.22 form for the child(ren) who have this missing.

**Regulation:** 8.16.2.24A(1)

### **Corrective Action Plan**

The center will review all staff's records to ensure a signed staff acknowledgement is on file.

Date to be Completed: 10/13/2017

## **Deficiencies**

Of the 20 children's records reviewed, 1 is/are missing a signed parent or guardian acknowledgement that the center's guidance policy had been read and understood. See the Children's Records 8.16.2.22 form for the child(ren) who have this missing.

**Regulation:** 8.16.2.24A(1)

### **Corrective Action Plan**

The center will review all children's records to ensure a signed parent or guardian acknowledgement is on file.

Date to be Completed: 10/13/2017

8.16.2.24 B NAPS OR REST PERIOD	Compliance		
8.16.2.24 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLERS	Compliance		
8.16.2.24 D DIAPERING AND TOILETING	Compliance		
8.16.2.24 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL NEEDS	Compliance		
8.16.2.24 F ADDITIONAL REQUIREMENTS FOR NIGHT CARE	N/A		
8.16.2.24 G PHYSICAL ENVIRONMENT	Non-compliance		
<u>Deficiencies</u>			
Unused materials were stored in a way that made them accessible to children. Infant			
equipment stored in 2 cribs.			
Regulation: 8.16.2.24G(6)			
Corrective Action Plan			
The center will store unused materials in a manner so that they are not accessible to the			
children. Infant equipment will not be stored in cribs.			
Date to be Completed: 10/13/2017			
8.16.2.24 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT	Compliance		
8.16.2.24 I EQUIPMENT AND PROGRAM	Compliance		
8.16.2.24 J OUTDOOR PLAY AREAS	Compliance		
8.16.2.24 K SWIMMING, WADING AND WATER	Not Inspected		
8.16.2.24 L FIELD TRIPS	Not Inspected		
Food Service			
8.16.2.25 B MEALS AND SNACKS	Compliance		
8.16.2.25 C MENUS	Compliance		
8.16.2.25 D KITCHENS	Non-compliance		

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#### **Food Service**

#### **Deficiencies**

A food is not properly stored; the item is not in an airtight container. Cereal in the infant room not properly sealed.

**Regulation:** 8.16.2.25D(4)

#### **Corrective Action Plan**

The person responsible for food service will be instructed in proper food storage.

Date to be Completed: 10/13/2017

### **Deficiencies**

A food is not properly stored; the item is not in an airtight container; labeled and dated.

Kashi cereal in the Frog room not dated or properly sealed.

**Regulation:** 8.16.2.25D(4)

# **Corrective Action Plan**

The person responsible for food service will be instructed in proper food storage.

Date to be Completed: 10/13/2017

### **Deficiencies**

A drink is not properly stored; the item is not labeled and dated. A red cup in the Frog room not labeled and owl cup in the Frog room not labeled.

Regulation: 8.16.2.25D(4)

Corrective Action Plan

The person responsible for food service will be instructed in proper food storage.

Date to be Completed: 10/13/2017

8.16.2.25 E MEAL TIMES	Compliance		
Health & Safety Requirements			
8.16.2.26 A HYGIENE	Compliance		
8.16.2.26 B FIRST AID REQUIREMENTS	Compliance		
8.16.2.26 C MEDICATION	Non-compliance		
<u>Deficiencies</u>			
The center does not have written instructions from the parent or guardian for a			
non-prescription medication that is being given. Equate cough medicine no authorization.			
Regulation: 8.16.2.26C(2)			
Corrective Action Plan			
Staff responsible for receiving medication will ensure parents provide complete written			
instructions.			
Date to be Completed: 10/13/2017			
<u>Deficiencies</u>			
Medication was observed in the center that does not have a label with the child's name and			
the date the medication was brought to the center. Nylands brand cold and cough was not			
labeled with child's name in the Owl room. Equate medicine no name.			
<b>Regulation:</b> 8.16.2.26C(3)			
Corrective Action Plan			
Medication will be labeled and dated as required.			
Date to be Completed: 10/13/2017			
8.16.2.27 A-D ILLNESS REQUIREMENTS FOR CENTERS	Compliance		

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Health & Safety Requirements  8.16.2.28 A H TRANSPORTATION REQUIREMENTS FOR CENTERS  Buildings, Grounds & Safety  8.16.2.29 A HOUSEKEEPING  Deficiencies  The Toys are not in good repair as evidenced by sink is missing to the play kitchen set in the owl room and monkey room.  Regulation: 8.16.2.29A(1)  Corrective Action Plan Repairs will be completed: 10/13/2017  Deficiencies The Toys are not in good repair as evidenced by the door handle to the play refrigerator in the owl room is missing.  Regulation: 8.16.2.29A(1)  Corrective Action Plan Repairs will be completed: 10/13/2017  Deficiencies The Toys are not in good repair as evidenced by the door handle to the play refrigerator in the owl room is missing.  Requisition: 8.16.2.29A(1)  Corrective Action Plan Repairs will be completed: 10/13/2017  Deficiencies The Toys are not in good repair as evidenced by cardboard blocks in the toddler room torn.  Regulation: 8.16.2.29A(1)  Corrective Action Plan  Repairs will be established.  Date to be Completed: 10/13/2017  Deficiencies The premises in the Owl room are not safe in that air conditioning cord is accessible to the children.  Regulation: 8.16.2.29A(1)  Corrective Action Plan  The safety violation will be corrected and a system for routine safety inspection developed.  Date to be Completed: 10/13/2017	N/A
Buildings, Grounds & Safety  8.16.2.29 A HOUSEKEEPING Deficiencies The Toys are not in good repair as evidenced by sink is missing to the play kitchen set in the owl room and monkey room. Regulation: 8.16.2.294(1) Corrective Action Plan Repairs will be completed and a system for routine inspection of the center and premises will be established. Date to be Completed: 10/13/2017 Deficiencies The Toys are not in good repair as evidenced by the door handle to the play refrigerator in the owl room is missing Regulation: 8.16.2.294(1) Corrective Action Plan Repairs will be completed and a system for routine inspection of the center and premises will be established. Date to be Completed: 10/13/2017 Deficiencies The Toys are not in good repair as evidenced by cardboard blocks in the toddler room torn. Regulation: 8.16.2.294(1) Corrective Action Plan Repairs will be completed and a system for routine inspection of the center and premises will be established. Date to be Completed: 10/13/2017 Deficiencies The premises in the Owl room are not safe in that air conditioning cord is accessible to the children. Regulation: 8.16.2.294(1) Corrective Action Plan Regulation: 8.16.2.294(1) Corrective Action Plan The safety violation will be corrected and a system for routine safety inspection developed.	
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Date to be completed. 10/13/2017	
8.16.2.29 B PEST CONTROL	mpliance
8.16.2.29 C MECHANICAL SYSTEMS	mpliance
8.16.2.29 D WATER AND WASTE	
8.16.2.29 E LIGHTING, LIGHTING FIXTURES AND ELECTRICAL	mpliance
8.16.2.29 F EXITS AND WINDOWS	-
8.16.2.29 G TOILET AND BATHING FACILITIES	mpliance
8.16.2.29 H SAFETY COMPLIANCE	mpliance

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Compliance

8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES

Center Name:	License Number:	Date:				
Memorable Moments	100407	09/13/2017				
Buildings, Grounds & Safety						
8.16.2.29 J PETS			N/A			

Please note: Per CYFD regulation NMAC 8.16.2, failure to comply with the corrective action plans as noted above, may result in further action taken against the licensee.

MILLI

09/13/2017

Stool

09/13/2017

Surveyor:Kia Kennedy

Date

Facility Rep:Sarah Poole

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Date