



## Facility

**Name:** *Memorable Moments Inc* **License Number:** *100407*  
**Address:** *4848 Huron Dr. NE, Rio Rancho, NM 87144*  
**Phone:** *5058911456* **Fax:**  **E-mail:** *memorablemoments2016@gmail.com*

## License Information

**Type:** *4 Star FOCUS Child Care Center* **Status:** *Licensed* **Issue Date:** *12/01/2017* **Expiration Date:** *11/20/2018*

## Capacity

**Over Age 2:** *68* **Under Age 2:** *18* **Night Care:** *0* **Playground:** *25*  
**Square Footage:** *0*

## Census

**Over 2:** *28* **Under 2:** *13*

## Classrooms

**Number of Classrooms:** *6*

## Days and Hours of Operation

<b>Monday</b> <i>6:00 AM - 6:30 PM</i>	<b>Tuesday</b> <i>6:00 AM - 6:30 PM</i>	<b>Wednesday</b> <i>6:00 AM - 6:30 PM</i>	<b>Thursday</b> <i>6:00 AM - 6:30 PM</i>	<b>Friday</b> <i>6:00 AM - 6:30 PM</i>
<b>Saturday</b> <i>Closed</i>	<b>Sunday</b> <i>Closed</i>			

## Inspection

**Date:** *09/05/2018* **Time In:** *10:00 AM* **Time Out:** *12:39 PM* **Purpose:** *Annual*

## Licensure

8.16.2.11 A Types of Licenses	<i>Not Inspected</i>
8.16.2.11 B Renewal of License	<i>Not Inspected</i>
8.16.2.11 D Non-transferable Restrictions of License	<i>Not Inspected</i>
8.16.2.12 A, K, M Licensing Actions and Administrative Appeals	<i>Not Inspected</i>
8.16.2.17 E, F Surveys for Child Care Facilities	<i>Compliance</i>
8.16.2.18 D Complaints	<i>Not Inspected</i>
8.16.2.21 A Licensing Requirements	<i>Not Inspected</i>
8.16.2.21 B Capacity of Centers	<i>Compliance</i>

## Administrative Requirements *(continued)*

### 8.16.2.21 C Incident Reporting Requirements

*Not Inspected*

## Administrative Requirements

### 8.16.2.22 A Administrative Records

*Compliance*

### 8.16.2.22 B Mission, Philosophy and Curriculum Statement

*Not Inspected*

### 8.16.2.22 C Policy and Procedures

*Not Inspected*

### 8.16.2.22 D Family Handbook

*Not Inspected*

### 8.16.2.22 E Children's Records

*Compliance*

### 8.16.2.22 F Personnel Records

**Non-compliance**

*From the review of staff records, it was determined that 1 out of 17 staff records does/do not include the staff's position. See Staff Records 8.16.2.22 form for staff with this missing information.*

#### *Corrective Action Plan*

*The center will add the position to the record.*

Regulation: 8.16.2.22.F.1.b.

Date to be Completed: 10/05/2018

*From the review of staff records, it was determined that 1 out of 17 staff records does/do not include signed acknowledgement that the center's disaster preparedness plan and fire evacuation plan were reviewed.*

#### *Corrective Action Plan*

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

Regulation: 8.16.2.22.F.1.p.

Date to be Completed: 10/05/2018

*From the review of staff records, it was determined that 2 out of 17 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.*

#### *Corrective Action Plan*

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

Regulation: 8.16.2.22.F.1.n.

Date to be Completed: 10/05/2018

### 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**

*From the review of staff records, it was determined that 1 out of 17 new staff does/do not have documentation of orientation training. See Staff Records 8.16.2.22 form for staff with missing documentation.*

#### *Corrective Action Plan*

*Orientation will be completed and documented for staff noted; in the future, orientation will be completed prior to time staff begin working with children.*

Regulation: 8.16.2.23.B.2.a.

Date to be Completed: 10/05/2018

### 8.16.2.23 C Staff/Child Ratios and Group Sizes

Compliance

## Services & Care of Children

### 8.16.2.24 A Guidance

**Non-compliance**

*Of the 17 staffs 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.*

#### *Corrective Action Plan*

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

Regulation: 8.16.2.24.A.1.

Date to be Completed: 10/05/2018

### 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

Compliance

### 8.16.2.24 H Social-Emotional Responsive Environment

Compliance

### 8.16.2.24 I Equipment and Program

**Non-compliance**

*The center did not post the daily activity schedule. Daily schedule not posted in the Monkey and Duck room.*

#### *Corrective Action Plan*

*The center will begin posting their daily activities schedules and following them.*

*(continued)*

Regulation: 8.16.2.24.I.8.

Date to be Completed: 10/05/2018

**8.16.2.24 J Outdoor Play Areas****Non-compliance***The playground equipment isn't inspected weekly.**Corrective Action Plan**The facility will hold weekly inspections of their playground equipment.*

Regulation: 8.16.2.24.J.4.

Date to be Completed: 10/05/2018

**8.16.2.24 K Swimming, Wadding 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***The refrigerator in the Duck (2 & 3) room does not have a working internal thermometer.**Corrective action Plan**The center will obtain and place a working thermometer in refrigerator.*

Regulation: 8.16.2.25.D.6.

Date to be Completed: 10/05/2018

*The refrigerator in the in Owl room does not maintain a temperature of 41 degrees (Fahrenheit) or below. Temp. reading was 44 degrees.**Corrective Action Plan**The center will have the refrigerator serviced.*

Regulation: 8.16.2.25.D.6.

Date to be Completed: 10/05/2018

*The refrigerator in the infant room does not maintain a temperature of 41 degrees (Fahrenheit) or below. Temp. reading was 48 degrees.**Corrective Action Plan**The center will have the refrigerator serviced, obtain a working thermometer.*

Regulation: 8.16.2.25.D.6.

Date to be Completed: 10/05/2018

**Food Service (continued)**

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

**Non-compliance**

*The center does not have on duty all educators currently certified in first aid and cardiopulmonary resuscitation (CPR). One educator needs to re-certify.*

*Corrective Action Plan*

*All educators must be certified in first aid and cardiopulmonary resuscitation (CPR).*

Regulation: 8.16.2.26.B.1.

Date to be Completed: 10/05/2018

8.16.2.26 C Medication

Compliance

8.16.2.27 A-D Illness Requirements for Centers

Compliance

8.16.2.28 A-H Transportation Requirements for Centers

Not Inspected

**Buildings, Grounds & Safety**

8.16.2.29 A Housekeeping

**Non-compliance**

*The Fixtures are not in good repair as evidenced by one ballast is out in the Owl room.*

*Corrective Action Plan*

*Repairs will be completed and a system for routine inspection of the center and premises will be established.*

Regulation: 8.16.2.29.A.1.

Date to be Completed: 10/05/2018

8.16.2.29 B Pest Control

Compliance

8.16.2.29 C Mechanical Systems

Compliance

8.16.2.29 D Water and Waste

Compliance

8.16.2.29 E Lighting, Lighting Fixtures and Electrical

Compliance

8.16.2.29 F Exits and Windows

Compliance

8.16.2.29 G Toilet and Bathing Facilities

Compliance

**Buildings, Grounds & Safety (continued)****8.16.2.29 H Safety Compliance****Non-compliance**

*The center failed to conduct an emergency preparedness practice drills for at least once a quarter.*

*Corrective Action Plan*

*A center will conduct emergency preparedness practice drills at least quarterly beginning January of each calendar year.*

Regulation: 8.16.2.29.H.1.

Date to be Completed: 10/05/2018

**8.16.2.29 I Smoking, Firearms, Alcoholic Beverages, Illegal Drugs and Controlled Substances****Compliance****8.16.2.29 J Pets****N/A****Additional Comments**

*None*

**Signatures**

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



Surveyor: Kia Kennedy



Facility Representative: Sarah Poole