

<b>Center Name:</b> Midwest NMCAP Jaramillo Head Start		<b>Address:</b> 900 Esperanza Belen, NM 87002			<b>Phone:</b> (505)864-1693		
<b>License Number:</b> 94705	<b>Issue Date:</b> 11/15/2016	<b>Expiration Date:</b> 11/14/2017	<b>Type:</b> 2 Star Child Care Center		<b>Status:</b> Licensed		
<b>Capacity</b>					<b>Census</b>		
Over Age 2:	19	Under Age 2:	0	Night Care:	0	Playground:	19
		Over 2:	15	Under 2:	0		
<b>Days and Hours of Operation</b>							
	<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>	<u>Saturday</u>	<u>Sunday</u>
Opening Times:	08:00 AM	08:00 AM	08:00 AM	08:00 AM	08:00 AM	Closed	Closed
Closing Times:	04:00 PM	04:00 PM	04:00 PM	04:00 PM	04:00 PM		
<b># of Classrooms:</b> 1	<b>Purpose:</b> Semi-Annual		<b>Date:</b> 03/23/2017		<b>Time:</b> 02:00 PM		
<b>Comments</b>							

A SURVEY OF YOUR FACILITY HAS BEEN MADE AND YOU ARE NOTIFIED OF NON-COMPLIANCE OF THE REGULATIONS AS NOTED BELOW:

Licensure	
8.16.2.11 A TYPES OF LICENSES	Not Inspected
8.16.2.11 B RENEWAL OF LICENSE	Not Inspected
8.16.2.11 D NON-TRANSFERABLE RESTRICTIONS OF LICENSE	Not Inspected
8.16.2.12 A, K, M LICENSING ACTIONS AND ADMINISTRATIVE APPEALS	Not Inspected
8.16.2.17 E, F SURVEYS FOR CHILD CARE FACILITIES	Not Inspected
8.16.2.18 D COMPLAINTS	Not Inspected
8.16.2.21 A LICENSING REQUIREMENTS <u>Deficiencies</u> The licensee did not obtain background checks on all staff members , educators, volunteers, and prospective staff as per the requirements outlined in the department's most current version of the Background Check and Employment History Verification provisions . 1 of 4 staff are not background checked every 5 years Regulation: 8.16.2.21A(2)  <u>Corrective Action Plan</u> The licensee will obtain background checks on all staff members , volunteers, and prospective staff. A request for a background check must be submitted prior to a staff member's employment. A background check must be conducted in accordance with 8.8.3 NMAC at least once every five years on all required individuals. Date to be Completed: 04/23/2017	Non-compliance
8.16.2.21 B CAPACITY OF CENTERS	Compliance
8.16.2.21 C INCIDENT REPORTING REQUIREMENTS	Not Inspected
Administrative Requirements	
8.16.2.22 A ADMINISTRATION RECORDS	Non-compliance

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<b>Administrative Requirements</b>		
<p><b><u>Deficiencies</u></b> The center failed to display in a prominent place that is readily visible to parents, staff and visitors the most recent licensing survey. <b>Regulation:</b> 8.16.2.22A</p> <p><b><u>Corrective Action Plan</u></b> The center will post the missing item. <b>Date to be Completed:</b> 04/23/2017</p>		
<b>8.16.2.22 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT</b>	Compliance	
<p><b>8.16.2.22 C POLICY AND PROCEDURES</b></p> <p><b><u>Deficiencies</u></b> The center did not have available for review written policies and procedures covering expulsion of children. <b>Regulation:</b> 8.16.2.22C(1)-(8)</p> <p><b><u>Corrective Action Plan</u></b> The center will complete written policies and procedures for the missing area(s). <b>Date to be Completed:</b> 04/23/2017</p> <p><b><u>Deficiencies</u></b> (1) The program does not have an up to date emergency evacuation and disaster preparedness plan approved by the department which shall include steps for evacuation, relocation, <b><u>shelter in place lock-down</u></b>, communication, reunification with parents, <b><u>individual plans for children with special needs and children with chronic medical conditions</u></b> accommodations of infants and toddlers, and <b><u>continuity of operations</u></b> <b>Regulation:</b> 8.16.2.22C(8)</p> <p><b><u>Corrective Action Plan</u></b> An emergency evacuation and disaster preparedness plan will be developed. <b>Date to be Completed:</b> 04/23/2017</p>	Non-compliance	
<b>8.16.2.22 D FAMILY HANDBOOK</b>	Compliance	
<b>8.16.2.22 E CHILDREN'S RECORDS</b>	Compliance	
<b>8.16.2.22 F PERSONNEL RECORDS</b>	Compliance	
<b>8.16.2.22 G PERSONNEL HANDBOOK</b>	Compliance	
<b>Personnel &amp; Staffing</b>		
<b>8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS</b>	Compliance	
<b>8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING</b>	Compliance	
<b>8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES</b>	Compliance	
<b>Services &amp; Care of Children</b>		
<b>8.16.2.24 A GUIDANCE</b>	Compliance	
<b>8.16.2.24 B NAPS OR REST PERIOD</b>	Not Inspected	
<b>8.16.2.24 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLERS</b>	N/A	
<b>8.16.2.24 D DIAPERING AND TOILETING</b>	Compliance	

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<b>Services &amp; Care of Children</b>		
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		Compliance
8.16.2.24 J OUTDOOR PLAY AREAS		Compliance
8.16.2.24 K SWIMMING, WADING AND WATER		N/A
8.16.2.24 L FIELD TRIPS		Not Inspected
<b>Food Service</b>		
8.16.2.25 B MEALS AND SNACKS		Compliance
8.16.2.25 C MENUS		Compliance
8.16.2.25 D KITCHENS		Compliance
8.16.2.25 E MEAL TIMES		Compliance
<b>Health &amp; Safety Requirements</b>		
8.16.2.26 A HYGIENE		Compliance
8.16.2.26 B FIRST AID REQUIREMENTS		Compliance
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		N/A
<b>Buildings, Grounds &amp; Safety</b>		
8.16.2.29 A HOUSEKEEPING		Compliance
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 <b>Deficiencies</b> The toilet in the self-contained Head-Start classroom is used by other children. Regulation: 8.16.2.29G(1) <b>Corrective Action Plan</b> The toilet will be used exclusively by children in the self-contained room. Date to be Completed: 04/23/2017		Non-compliance
8.16.2.29 H SAFETY COMPLIANCE		Non-compliance

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<b>Buildings, Grounds &amp; Safety</b>		
<p><b><u>Deficiencies</u></b>  The center does not have verification of an annual fire inspection from the fire authority having jurisdiction. Expired 8-2016  <b>Regulation:</b> 8.16.2.29H(3)(e)</p> <p><b><u>Corrective Action Plan</u></b>  An annual fire inspection will be requested from the fire authority having jurisdiction over the center.  <b>Date to be Completed:</b> 04/23/2017</p>		
<b>8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES</b>		Compliance
<b>8.16.2.29 J PETS</b>		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.**

*MP 3/18*

03/23/2017

*Krystal Montano*

03/23/2017

Surveyor: Mark Prizzi	Date	Facility Rep: Krystal Montano	Date
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