



Facility

Name: *Miss Kelly's Academy* License Number: *164738*
 Address: *2329 Wisconsin St. NE Suite A, Albuquerque, NM 87110*
 Phone: *5052358883* Fax: E-mail: *misskellysoffice@gmail.com*

License Information

Type: *2 Star Child Care Center* Status: *Licensed* Issue Date: *06/05/2017* Expiration Date: *06/04/2018*

Capacity

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

Census

Over 2: *23* Under 2: *0*

Classrooms

Number of Classrooms: *2*

Days and Hours of Operation

Monday <i>7:30 AM - 5:30 PM</i>	Tuesday <i>7:30 AM - 5:30 PM</i>	Wednesday <i>7:30 AM - 5:30 PM</i>	Thursday <i>7:30 AM - 5:30 PM</i>	Friday <i>7:30 AM - 5:30 PM</i>
Saturday <i>Closed</i>	Sunday <i>Closed</i>			

Inspection

Date: *04/04/2018* Time In: *10:30 AM* Time Out: *12:10 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>
8.16.2.21 C Incident Reporting Requirements	<i>Not Inspected</i>

Administrative Requirements

8.16.2.22 A Administrative Records	Compliance
8.16.2.22 B Mission, Philosophy and Curriculum Statement	Compliance
8.16.2.22 C Policy and Procedures	Compliance
8.16.2.22 D Family Handbook	Compliance
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 4 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.

Date to be Completed: 05/04/2018

From the review of staff records, it was determined that 1 out of 4 staff records do/does not include the staff's current and past duties and responsibilities. See Staff Records 8.16.2.22 form for staff with this missing information.

Corrective Action Plan

The center will add staff's current and past duties and responsibilities to the record.

Date to be Completed: 05/04/2018

From the review of staff records, it was determined that 1 out of 1 staff records does/do not include a background check. See Staff Records 8.16.2.22 form for staff with this missing information. Therapist doing on site therapy was left alone with a child without having a CYFD background check.

Corrective Action Plan

The center will obtain documentation of a background check. Corrected on site. The child was taken outside on the playground with the rest of the educators and children and the Director was informed that children could not be left alone with anyone that does not possess a CYFD background check.

Date to be Completed: 05/04/2018

8.16.2.22 G Personnel Handbook	Compliance
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Personnel & Staffing

8.16.2.23 A Personnel and Staffing Requirements	Compliance
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Personnel & Staffing (continued)**8.16.2.23 B Staff Qualifications and Training****Non-compliance**

From the review of staff records, it was determined that 2 out of 4 staff working more than 20 hours a week, has/have no documentation of at least 24 hours of qualified annual training, See Staff Records 8.16.2.22 form for staff with missing documentation of training.

Corrective Action Plan

Annual training will be completed as required and documentation retained on file.

Date to be Completed: 05/04/2018

Educators did not complete the following training within 3-months: Health and Safety Training2 educators lack certificates

Corrective Action Plan

All educators, regardless of the number of hours per week, will complete the above listed training. The following staff members need to complete the required training:

Date to be Completed: 05/04/2018

8.16.2.23 C Staff/Child Ratios and Group Sizes**Compliance****Services & Care of Children****8.16.2.24 A Guidance****Compliance****8.16.2.24 B Naps or Rest Period****Compliance****8.16.2.24 C Additional Requirements for Infants and Toddlers****N/A****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****Compliance****8.16.2.24 J Outdoor Play Areas****Non-compliance**

The weekly playground equipment inspections are not documented correctly.

Corrective Action Plan

The facility will document their weekly playground inspections.

Date to be Completed: 05/04/2018

8.16.2.24 K Swimming, Wadding and Water**Not Inspected**

Services & Care of Children *(continued)*

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

Compliance

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's first aid kit does not contain Soap.

Corrective Action Plan

Missing items will be added to the first-aid kit; staff will be reminded to replace any item used.

Date to be Completed: 05/04/2018

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

N/A

Buildings, Grounds & Safety

8.16.2.29 A Housekeeping

Non-compliance

*The premises in the kitchen
are not clean as evidenced by the refrigerator and freezer are not clean*

Corrective Action Plan

Cleaning will be completed and a schedule for routine cleaning will be established.

Date to be Completed: 05/04/2018

*The premises in the puzzle room
are not safe in that there is a cup of coffee on the couch used by children*

Corrective Action Plan

The safety violation will be corrected and a system for routine safety inspection developed.

(continued)

Date to be Completed: 05/04/2018

The [] Toys are not in good repair as evidenced by a pink bike lacks a pedal

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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: 05/04/2018

The premises in the dramatic play classroom are not safe in that a teachers purse is accessible to children

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Corrective Action Plan

The safety violation will be corrected and a system for routine safety inspection developed.

Date to be Completed: 05/04/2018

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	Non-compliance

The toilet room for restroom] Preschool does not have toilet paper at a height accessible to children.

Corrective Action Plan

Supplies/dispensers will be relocated so they are accessible to children.

Date to be Completed: 05/04/2018

8.16.2.29 H Safety Compliance	Compliance
8.16.2.29 I Smoking, Firearms, Alcoholic Beverages, Illegal Drugs and Controlled Substances	Compliance
8.16.2.29 J Pets	Compliance

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: *Darlene Montoya*



Facility Representative: *Kelly S Watson Owner and Director*

