



Facility

Name: *Ms. Kelli's House* **License Number:** *148498*
Address: *4615 Greene Ave. NW, Albuquerque, NM 87114*
Phone: *5058987607* **Fax:** **E-mail:** *mskellihouse@gmail.com*

License Information

Type: *3 Star FOCUS Child Care Center* **Status:** *Licensed* **Issue Date:** *12/01/2017* **Expiration Date:** *07/06/2018*

Capacity

Over Age 2: *38* **Under Age 2:** *28* **Night Care:** *0* **Playground:** *20*
Square Footage: *0*

Census

Over 2: *10* **Under 2:** *15*

Classrooms

Number of Classrooms: *3*

Days and Hours of Operation

Monday <i>7:00 AM - 5:30 PM</i>	Tuesday <i>7:00 AM - 5:30 PM</i>	Wednesday <i>7:00 AM - 5:30 PM</i>	Thursday <i>7:00 AM - 5:30 PM</i>	Friday <i>7:00 AM - 5:30 PM</i>
Saturday <i>Closed</i>	Sunday <i>Closed</i>			

Inspection

Date: *05/03/2018* **Time In:** *10:00 AM* **Time Out:** *12:15 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	Non-compliance

Of the 5 children's records reviewed, 2 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.

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: 06/02/2018

8.16.2.22 F Personnel Records	Non-compliance
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From the review of staff records, it was determined that 1 out of 5 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: 06/02/2018

From the review of staff records, it was determined that 1 out of 5 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: 06/02/2018

From the review of staff records, it was determined that 1 out of 5 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.

Date to be Completed: 06/02/2018

8.16.2.22 F Personnel Records (continued)**Non-compliance**

From the review of staff records, it was determined that 1 out of 5 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.

Corrective Action Plan

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

Date to be Completed: 06/02/2018

From the review of staff records, it was determined that 3 out of 5 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.

Date to be Completed: 06/02/2018

8.16.2.22 G Personnel Handbook**Compliance****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 5 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.

Date to be Completed: 06/02/2018

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 5 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 [] records to ensure a signed [] acknowledgement is on file.

Date to be Completed: 06/02/2018

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

N/A

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, 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

N/A

8.16.2.25 D Kitchens

Non-compliance

*The bottles of infant formula or breast milk brought from home for children in the Infant - (6 wk. - 12 mo.) in the refrigerator.
room(s) are not labeled.*

Corrective Action Plan

A staff will be assigned responsibility for ensuring all foods and bottles brought from the child's home are labeled and , if necessary, refrigerated.

Date to be Completed: 06/02/2018

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 staff lacks CPR.

Corrective Action Plan

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

Date to be Completed: 06/02/2018

The center's first aid kit does not contain Adhesive tape.

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: 06/02/2018

8.16.2.26 C Medication

N/A

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 Equipment are not in good repair as evidenced by an yellow adult sized chair is broken on the playground

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: 06/02/2018

The premises in the the infant classroom are not clean as evidenced by the refrigerator is unclean

Corrective Action Plan

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

Date to be Completed: 06/02/2018

8.16.2.29 A Housekeeping (continued)**Non-compliance**

The premises in the 2's & 3's classroom are not clean as evidenced by the diaper changing table has an accumulation of dirt .

Corrective Action Plan

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

Date to be Completed: 06/02/2018

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**Non-compliance**

The center does not have emergency lighting that turns on automatically when electrical service is disrupted. In 2's & 3's classroom and the hallway entrance to the back building.

Corrective Action Plan

Emergency lighting will be installed.

Date to be Completed: 06/02/2018

8.16.2.29 F Exits and Windows

Compliance

8.16.2.29 G Toilet and Bathing Facilities

Compliance

8.16.2.29 H Safety Compliance**Non-compliance**

An evacuation plan is not posted in the Infant - (6 wk. - 12 mo.) class room(s) used by children.

Corrective Action Plan

An evacuation plan will be posted in each room used by children.

Date to be Completed: 06/02/2018

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: *Ronnalyn Spam*

