

Center Name:  Ms. Kelli's House			Address: 4615 Greene Ave. NW Albuquerque, NM 87114				<b>Phone:</b> (505)898-7	<b>Phone:</b> (505)898-7607	
License Number:	Issue Date:	Expiration Date	e: T	ype: Status:					
148498	12/1/2017	07/6/2018	3	Star FOC	US Child Care Ce	nter	Licensed		
Capacity									
Over Age 2: 38	Under Age 2:	28 Night Car	re: 0	Pl	ayground: 2	20 O	ver 2:	17 Un	der 2: 0
Days and Hours of Operation									
	<u>Monday</u>	<u>Tuesday</u>	Wedr	<u>nesday</u>	<u>Thursday</u>	<u> </u>	<u>riday</u>	<u>Saturday</u>	Sunday
Opening Times:	07:00 AM	07:00 AM	07:0	MA 0	07:00 AM	07	:00 AM	Closed	Closed
Closing Times:	05:30 PM	05:30 PM	05:3	0 PM	05:30 PM	05	:30 PM		
# of Classrooms:	P	urpose:		_	Date:			Time:	
3	C	omplaint			02/12/2018			11:15 AM	
Comments									

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	Not Inspected
8.16.2.21 B CAPACITY OF CENTERS	Not Inspected
8.16.2.21 C INCIDENT REPORTING REQUIREMENTS  Deficiencies  The center failed to notify parents or guardians in writing of an incident regarding a toddler who woke up from nap time with an injury in his mouth.  Regulation: 8.16.2.21C(2)  Corrective Action Plan  Parents or guardians will be notified in writing of an incident that threatened or could have threatened the health or safety of children in the center. Parents were verbally notified  Date to be Completed: 02/28/2018	Non-compliance
Administrative Requirements	
8.16.2.22 A ADMINISTRATION RECORDS	Not Inspected
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	Not Inspected

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Center Name:	License Number:	Date:	
Ms. Kelli's House	148498	02/12/2018	
Adr	ninistrative Requirements		
8.16.2.22 F PERSONNEL RECORDS			Not Inspected
8.16.2.22 G PERSONNEL HANDBOOK			Not Inspected
	Personnel & Staffing		
8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS			Not Inspected
8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING			Not Inspected
8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES		Not Inspected	
Se	rvices & Care of Children		
8.16.2.24 A GUIDANCE			Not Inspected
8.16.2.24 B NAPS OR REST PERIOD			Not Inspected
8.16.2.24 C ADDITIONAL REQUIREMENTS FOR INFANTS AN	D TODDLERS		Not Inspected
8.16.2.24 D DIAPERING AND TOILETING			Not Inspected
8.16.2.24 E ADDITIONAL REQUIREMENTS FOR CHILDREN W		Not Inspected	
8.16.2.24 F ADDITIONAL REQUIREMENTS FOR NIGHT CARE			Not Inspected
8.16.2.24 G PHYSICAL ENVIRONMENT			Not Inspected
8.16.2.24 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONME	NT		Not Inspected
8.16.2.24 I EQUIPMENT AND PROGRAM			Not Inspected
8.16.2.24 J OUTDOOR PLAY AREAS			Not Inspected
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			Not Inspected
8.16.2.25 C MENUS			Not Inspected
8.16.2.25 D KITCHENS			Not Inspected
8.16.2.25 E MEAL TIMES			Not Inspected
Hea	Ith & Safety Requirements		
8.16.2.26 A HYGIENE			Not Inspected
8.16.2.26 B FIRST AID REQUIREMENTS			Not Inspected
8.16.2.26 C MEDICATION		Not Inspected	
8.16.2.27 A-D ILLNESS REQUIREMENTS FOR CENTERS		Not Inspected	
8.16.2.28 A-H TRANSPORTATION REQUIREMENTS FOR CEN		Not Inspected	
Bui	Idings, Grounds & Safety		
8.16.2.29 A HOUSEKEEPING			Not Inspected
8.16.2.29 B PEST CONTROL		Not Inspected	
8.16.2.29 C MECHANICAL SYSTEMS			Not Inspected

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Center Name:	License Number:	Date:				
Ms. Kelli's House	148498	02/12/2018				
Buildings, Grounds & Safety						
8.16.2.29 D WATER AND WASTE			Not Inspected			
8.16.2.29 E LIGHTING, LIGHTING FIXTURES AND ELECTRICAL	Not Inspected					
8.16.2.29 F EXITS AND WINDOWS	Not Inspected					
8.16.2.29 G TOILET AND BATHING FACILITIES	Not Inspected					
8.16.2.29 H SAFETY COMPLIANCE	Not Inspected					
8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS	Not Inspected					
8.16.2.29 J PETS			Not Inspected			

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.

02/12/2018

KMM

02/12/2018

Surveyor:Patricia Williams

Date

Facility Rep:Kelli Sheldon

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Date