



## Facility

Name: *My Little World LLC*

License Number: *168786*

Address: *515 Old Coors Dr. SW, Albuquerque, NM 87121*

Phone: *5058311441*

Fax: *na*

E-mail: *na*

## License Information

Type: *2 Star + Child Care Center*

Status: *Licensed*

Issue Date: *07/01/2018*

Expiration Date: *03/22/2019*

## Capacity

Over Age 2: *48*

Under Age 2: *24*

Night Care: *0*

Playground: *30*

Square Footage: *0*

## Census

Over 2: *20*

Under 2: *3*

## Classrooms

Number of Classrooms: *7*

## Days and Hours of Operation

Monday

*6:30 AM - 6:30 PM*

Tuesday

*6:30 AM - 6:30 PM*

Wednesday

*6:30 AM - 6:30 PM*

Thursday

*6:30 AM - 6:30 PM*

Friday

*6:30 AM - 6:30 PM*

Saturday

*Closed*

Sunday

*Closed*

## Inspection

Date: *01/25/2019*

Time In: *9:30 AM*

Time Out: *1:30 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>Not Inspected</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>

**Licensure (continued)****8.16.2.21 C Incident Reporting Requirements***Not Inspected***Administrative Requirements****8.16.2.22 A Administrative Records****Non-compliance**

*The center failed to display in a prominent place that is readily visible to parents, staff and visitors the most recent licensing survey.*

*Corrective Action Plan*

*The center will post the missing item.*

Regulation: 8.16.2.22.A.

Date to be Completed: 02/27/2019

**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 8 children's records reviewed, 1 is missing the date the child first attended the center. See Children's Records 8.16.2.22 form for the child(ren) with missing information and/or authorization.*

*Corrective Action Plan*

*The first attendance date will be added and the center will review all children's records to ensure complete information is on file.*

Regulation: 8.16.2.22.E.1.d.

Date to be Completed: 02/27/2019

**8.16.2.22 F Personnel Records****Non-compliance**

*From the review of staff records, it was determined that 3 out of 7 staff records does/do not include a background check. See Staff Records 8.16.2.22 form for staff with this missing information.*

*Corrective Action Plan*

*The center will obtain documentation of a background check.*

Regulation: 8.16.2.22.F.1.e.

Date to be Completed: 02/27/2019

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

*The center failed to have 3 out of 7 person(s) providing care to sign an annual statement that they have, or have never had, an arrest or substantiated referral to a child protective services agency. See Staff Records 8.16.2.22 form for staff with this missing information.*

**Corrective Action Plan**

*The center will put processes in place to ensure that all care giving staff sign annual statements of non-conviction.*

Regulation: 8.16.2.22.F.1.f.

Date to be Completed: 02/27/2019

*From the review of staff records, it was determined that 1 out of 7 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: 02/27/2019

*From the review of staff records, it was determined that 1 out of 7 staff records does/do not include a dated weekly work schedule that includes the time of arrival and departure and breaks and lunch. See Staff Records 8.16.2.22 form for staff who need to have a work schedule.*

**Corrective Action Plan**

*The center will add the work schedule and maintain dated weekly work schedules for the director, all staff, all care givers and volunteers.*

Regulation: 8.16.2.22.F.2.

Date to be Completed: 02/27/2019

**8.16.2.22 G Personnel Handbook****Compliance****Personnel & Staffing****8.16.2.23 A Personnel and Staffing Requirements****Compliance**

**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 7 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: 02/27/2019

*Educators did not complete the following training within 3-months: CPR Training, 1*

*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:*

Regulation: 8.16.2.23.B.2.b.

Date to be Completed: 02/27/2019

*Educators did not complete the following training within 3-months: Health and Safety Training, 3*

*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:*

Regulation: 8.16.2.23.B.2.b.

Date to be Completed: 02/27/2019

**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****Compliance****8.16.2.24 D Diapering and Toileting****Non-compliance**

*Soiled diapers in the Infant - (6 wk. - 12 mo.) infant room(s) are not stored in a secure container with a tight-fitting lid to assure proper hygiene and control of odors.*

*Corrective Action Plan*

*A container with a tight-fitting lid will be provided.*

*(continued)*

Regulation: 8.16.2.24.D.3.

Date to be Completed: 02/27/2019

8.16.2.24 E Additional Requirements for Children with Special Needs	<i>Not Inspected</i>
8.16.2.24 F Additional Requirements for Night Care	<i>Not Inspected</i>
8.16.2.24 G Physical Environment	<i>Compliance</i>
8.16.2.24 H Social-Emotional Responsive Environment	<i>Compliance</i>
8.16.2.24 I Equipment and Program	<i>Compliance</i>
8.16.2.24 J Outdoor Play Areas	<i>Compliance</i>
8.16.2.24 K Swimming, Wading and Water	<i>Not Inspected</i>
8.16.2.24 L Field Trips	<i>Not Inspected</i>

## Food Service

8.16.2.25 B Meals and Snacks	<i>Compliance</i>
8.16.2.25 C Menus	<b>Non-compliance</b>

*Menu was not posted for review by parents, caregivers and children. not dated*

### *Corrective Action Plan*

*The facility will post their menus for the next week at the beginning of the current week where it can be viewed by parents, care givers and children.*

Regulation: 8.16.2.25.C.3.

Date to be Completed: 02/27/2019

8.16.2.25 D Kitchens	<b>Non-compliance</b>
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*Food is not adequately protected from insects, rodents and other vermin; food is stored in open containers. trail mix, chips, sugar, pasta and pretzels.*

### *Corrective Action Plan*

*Containers of food will be closed.*

Regulation: 8.16.2.25.D.7.

Date to be Completed: 02/27/2019

*A drink is not properly stored; the item is not [labeled ]. baby bottles and sippy cups in infant room, leftovers in fridge, pediasure drink in 2s room,*

### *Corrective Action Plan*

*The person responsible for food service will be instructed in proper food storage.*

*(continued)*

Regulation: 8.16.2.25.D.4.

Date to be Completed: 02/27/2019

**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***Compliance***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 Centers***Compliance***Buildings, Grounds & Safety****8.16.2.29 A Housekeeping*****Non-compliance****The premises in the 3s room are not safe in that an open purse sits on the bottom cubby accessible to children**Corrective Action Plan**The safety violation will be corrected and a system for routine safety inspection developed.*

Regulation: 8.16.2.29.A.1.

Date to be Completed: 02/27/2019

*The premises in the center are not safe in that chairs are stacked.**Corrective Action Plan**The safety violation will be corrected and a system for routine safety inspection developed.*

Regulation: 8.16.2.29.A.1.

Date to be Completed: 02/27/2019

*The premises in the 2s room are not safe in that lysol spray stored on the unlocked bottom cabinet.**Corrective Action Plan**The safety violation will be corrected and a system for routine safety inspection developed.*

Regulation: 8.16.2.29.A.1.

Date to be Completed: 02/27/2019

**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*

**Buildings, Grounds & Safety (continued)**

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*

8.16.2.29 H Safety Compliance ***Non-compliance***

*The center's fire extinguishers is not inspected yearly, tagged with the date of inspection.*

*Corrective Action Plan*

*Equipment will be maintained and inspected yearly.*

Regulation: 8.16.2.29.H.3.k.

Date to be Completed: 02/27/2019

*The center does not have verification of an annual fire inspection from the fire authority having jurisdiction.*

*Corrective Action Plan*

*An annual fire inspection will be requested from the fire authority having jurisdiction over the center.*

Regulation: 8.16.2.29.H.3.e.

Date to be Completed: 02/27/2019

8.16.2.29 H3(f)(i)(k) Safety Compliance *Compliance*


8.16.2.29 J Pets *N/A*

**Additional Comments**

*this is an annual inspection*

**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: Sylvia Foster



Facility Representative: Maria A Flores Claudia Monge