



Facility

Name: *NaNa's Daycare & Learning Center* **License Number:** *166199*
Address: *7311 Glen Rio Rd NW, Albuquerque, NM 87121*
Phone: *5058312039* **Fax:** **E-mail:** *nanasdaycarefwc@gmail.com*

License Information

Type: *2 Star Child Care Center* **Status:** *Licensed* **Issue Date:** *01/04/2018* **Expiration Date:** *01/03/2019*

Capacity

Over Age 2: *26* **Under Age 2:** *17* **Night Care:** *0* **Playground:** *29*
Square Footage: *0*

Census

Over 2: *9* **Under 2:** *11*

Classrooms

Number of Classrooms: *5*

Days and Hours of Operation

Monday <i>6:30 AM - 6:00 PM</i>	Tuesday <i>6:30 AM - 6:00 PM</i>	Wednesday <i>6:30 AM - 6:00 PM</i>	Thursday <i>6:30 AM - 6:00 PM</i>	Friday <i>6:30 AM - 6:00 PM</i>
Saturday <i>Closed</i>	Sunday <i>Closed</i>			

Inspection

Date: *11/02/2018* **Time In:** *10:15 AM* **Time Out:** *1:17 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>Compliance</i>
8.16.2.21 B Capacity of Centers	<i>Compliance</i>

Administrative Requirements (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 dated weekly menus for meals and snacks.

Corrective Action Plan

The center will post the missing item.

Regulation: 8.16.2.22.A.

Date to be Completed: 12/02/2018

8.16.2.22 B Mission, Philosophy and Curriculum Statement*Not Inspected***8.16.2.22 C Policy and Procedures***Compliance***8.16.2.22 D Family Handbook***Not Inspected***8.16.2.22 E Children's Records*****Non-compliance***

Of the 14 children's records reviewed, 1 is/are missing a list of people authorized to pick up the child and an authorization form signed by the parent or guardian. See Children's Records 8.16.2.22 form for the child(ren) with missing information and/or authorization.

Corrective Action Plan

Parents will be advised to review and add missing information. The center will review all children's records to ensure complete information and authorization is on file.

Regulation: 8.16.2.22.E.1.c.

Date to be Completed: 12/02/2018

Of the 14 children's records reviewed, 2 is/are 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: 12/02/2018

8.16.2.22 E Children's Records (continued)**Non-compliance**

Of the 14 children's records reviewed, 3 is/are missing the name and telephone number of two people in the local area to contact in an emergency when a parent or guardian cannot be reached. See Children's Records 8.16.2.22 form for the child(ren) with missing information.

Corrective Action Plan

Parents will be advised to review and add missing information. The center will review all children's records to ensure up-to-date emergency contact information is on file.

Regulation: 8.16.2.22.E.2.b.

Date to be Completed: 12/02/2018

Of the 14 children's records reviewed, 1 is/are missing the name and telephone number of a physician or emergency medical center authorized by a parent or guardian to contact in case of illness or emergency. See Children's Records 8.16.2.22 form for the child(ren) with missing information.

Corrective Action Plan

Parents will be advised to review and add missing information. The center will review all children's records to ensure contact information for a physician or medical center is on file.

Regulation: 8.16.2.22.E.2.c.

Date to be Completed: 12/02/2018

Of the 14 children's records reviewed, 2 is/are missing information on allergies or medical conditions. See Children's Records 8.16.2.22 form for the child(ren) with missing information.

Corrective Action Plan

Parents will be advised to review and add missing information. The center will review all records to ensure information regarding allergies and medical conditions is on file.

Regulation: 8.16.2.22.E.2.a.

Date to be Completed: 12/02/2018

8.16.2.22 F Personnel Records**Non-compliance**

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.

Regulation: 8.16.2.22.F.1.b.

Date to be Completed: 12/02/2018

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

From the review of staff records, it was determined that 2 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.

Regulation: 8.16.2.22.F.1.c.

Date to be Completed: 12/02/2018

From the review of staff records, it was determined that 1 out of 5 staff records does/do not include dates of hire and termination. See Staff Records 8.16.2.22 form for staff with this missing information.

Corrective Action Plan

The center will add dates of hire and termination to the record.

Regulation: 8.16.2.22.F.1.d.

Date to be Completed: 12/02/2018

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

Regulation: 8.16.2.22.F.1.n.

Date to be Completed: 12/02/2018

From the review of staff records, it was determined that 2 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.

Regulation: 8.16.2.22.F.1.p.

Date to be Completed: 12/02/2018

From the review of staff records, it was determined that 3 out of 5 staff records does/do not include documentation of training by date, time, hours and area of competency or a training certificate. See Staff Records 8.16.2.22 form for staff with missing documentation.

Corrective Action Plan

The center will obtain verification of all training and retain on file.

(continued)

Regulation: 8.16.2.22.F.1.h.

Date to be Completed: 12/02/2018

From the review of staff records, it was determined that 1 out of 5 staff records does/do not include the required Form I-9. See Staff Records 8.16.2.22 form for staff missing the form.

Corrective Action Plan

The center will obtain Form I-9s from all staff and maintain them in their personnel files.

Regulation: 8.16.2.22.F.1.q.

Date to be Completed: 12/02/2018

From the review of staff records, it was determined that 5 out of [] 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: 12/02/2018

From the review of staff records, it was determined that 1 out of 5 staff records does/do not include signed acknowledgement that the 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.

Regulation: 8.16.2.22.F.1.o.

Date to be Completed: 12/02/2018

8.16.2.22 G Personnel Handbook*Not Inspected***Personnel & Staffing****8.16.2.23 A Personnel and Staffing Requirements****Non-compliance**

In the absence of the director, the center does not have a notice posted naming the person designated to be in charge.

Corrective Action Plan

In the director's absence, a person will be assigned to be in charge and a notice to that effect will be posted.

Regulation: 8.16.2.23.A.8.

Date to be Completed: 12/02/2018

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 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.

Regulation: 8.16.2.23.B.2.a.

Date to be Completed: 12/02/2018

Educators did not complete the following training within 3-months: Health and Safety Training 2 educators need to complete Health & Safety Training.

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: 12/02/2018

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, 2 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 staffs records to ensure a signed staff acknowledgement is on file.

Regulation: 8.16.2.24.A.1.

Date to be Completed: 12/02/2018

8.16.2.24 B Naps or Rest Period**Compliance****8.16.2.24 C Additional Requirements for Infants and Toddlers****Non-compliance**

Feeding practices are inappropriate as evidenced by children sleep with a bottle in their mouth.

Corrective Action Plan

Staff will be instructed on proper feeding practices.

Regulation: 8.16.2.24.C.13.

Date to be Completed: 12/02/2018

Services & Care of Children *(continued)*

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	Non-compliance

The center does not provide children in the 4 yr. old room(s) sufficient equipment, materials, furnishings for indoor activities so that at any one time each child can be individually involved.

Corrective Action Plan

Additional equipment, materials, furnishings will be obtained.

Regulation: 8.16.2.24.I.4.

Date to be Completed: 12/02/2018

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	Compliance
8.16.2.25 D Kitchens	Non-compliance

The refrigerator in the kitchen does not have a working internal thermometer.

Corrective action Plan

The center will obtain and place a working thermometer in refrigerator.

Regulation: 8.16.2.25.D.6.

Date to be Completed: 12/02/2018

A food is not properly stored; the item is not labeled and dated, wrapped. Crackers in the toddler room.

Corrective Action Plan

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

Regulation: 8.16.2.25.D.4.

Date to be Completed: 12/02/2018

Health & Safety Requirements (continued)**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).

Corrective Action Plan

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

Regulation: 8.16.2.26.B.1.

Date to be Completed: 12/02/2018

The center's first aid kit does not contain Scissors, Soap in all classrooms except for the toddler room.

Corrective Action Plan

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

Regulation: 8.16.2.26.B.2.

Date to be Completed: 12/02/2018

The center's first aid kit does not contain Adhesive tape needed in all classrooms kits except for the two's room.

Corrective Action Plan

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

Regulation: 8.16.2.26.B.2.

Date to be Completed: 12/02/2018

The center's first aid kit does not contain A thermometer in the 3's and 4's room.

Corrective Action Plan

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

Regulation: 8.16.2.26.B.2.

Date to be Completed: 12/02/2018

The center does not keep the first-aid kit and first-aid manual together in the center. In the 2's room.

Corrective Action Plan

The first-aid kit and first-aid manual will be kept together.

(continued)

Regulation: 8.16.2.26.B.2.

Date to be Completed: 12/02/2018

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 torn diaper changing mat in the toddler room and 2's room.

*Corrective Action Plan**Repairs will be completed and a system for routine inspection of the center and premises will be established.*

Regulation: 8.16.2.29.A.1.

Date to be Completed: 12/02/2018

The Ceiling tiles are not in good repair as evidenced by stains in tiles located in the 2's room, 3's room and infant room.

*Corrective Action Plan**Repairs will be completed and a system for routine inspection of the center and premises will be established.*

Regulation: 8.16.2.29.A.1.

Date to be Completed: 12/02/2018

The Ceiling tiles are not in good repair as evidenced by one tile is missing in the infant room.

*Corrective Action Plan**Repairs will be completed and a system for routine inspection of the center and premises will be established.*

Regulation: 8.16.2.29.A.1.

Date to be Completed: 12/02/2018

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

Buildings, Grounds & Safety (continued)**8.16.2.29 E Lighting, Lighting Fixtures and Electrical****Non-compliance**

Electrical outlets within reach of children in the 3's room by the circle time wall are not safety outlets and they do not have protective covers.

Corrective Action Plan

Protective covers will be added.

Regulation: 8.16.2.29.E.3.b.

Date to be Completed: 12/02/2018

Electrical outlets within reach of children in the toddler room, 2's room and 4 & 5 room are not safety outlets and they do not have protective covers.

Corrective Action Plan

Protective covers will be added.

Regulation: 8.16.2.29.E.3.b.

Date to be Completed: 12/02/2018

8.16.2.29 F Exits and Windows**Non-compliance**

Exits are not marked with signs having letters at least six inches high and 3/4 inch wide in the Infant - (6 wk. - 12 mo.), Toddler - (12 - 24 mo.), 2 yr. old, 3 yr. old, 4 yr. old room(s).

Corrective Action Plan

Exit signs that meet requirements will be placed at all exits.

Regulation: 8.16.2.29.F.2.a.

Date to be Completed: 12/02/2018

8.16.2.29 G Toilet and Bathing Facilities**Compliance****8.16.2.29 H Safety Compliance****Compliance****8.16.2.29 H3(f)(i)(k) Safety Compliance****Compliance****8.16.2.29 J Pets****N/A****Additional Comments**

Fire extinguishers expire Nov.2018

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: *Kia Kennedy*



Facility Representative: *Reina Gonzales*