Center Name: PMS Headstart - Estancia			Address: 600 Tenth Street Estancia, NM 87016					Phone: (505)384-2302		
License Number:	Issue Date:	Expiration I	Date:	Type: Status:						
94715	06/1/2016	05/31/2017	5 Star FOCUS Child Care Center Licensed			Licensed				
Capacity				•		Cei	Census			
Over Age 2: 40	Under Age 2:	0 Night	Care:	0 P	layground: 40	Ove	er 2:	27	Unde	r 2: 0
Days and Hours of Operation										
	<u>Monday</u>	<u>Tuesda</u>	y W	<u>/ednesday</u>	<u>Thursday</u>	<u>Friday</u>		<u>s</u>	<u>aturday</u>	Sunday
Opening Times	07:30 AM	07:30 AI	M (	07:30 AM	07:30 AM	07:30 AM		) AM		Closed
Closing Times	: 01:30 PM	01:30 PI	M (	01:30 PM	01:30 PM	01:30 PM				
# of Classrooms:	F	urpose:			Date:			Tim	e:	
2	Α	nnual			04/05/2017			10:2	0 AM	
Comments										
In both classrooms, there was great discussion between the childen and teachers.										

# 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 Compliance Compliance 8.16.2.11 B RENEWAL OF LICENSE 8.16.2.11 D NON-TRANSFERABLE RESTRICTIONS OF LICENSE N/A N/A 8.16.2.12 A, K, M LICENSING ACTIONS AND ADMINISTRATIVE APPEALS 8.16.2.17 E, F SURVEYS FOR CHILD CARE FACILITIES Compliance N/A 8.16.2.18 D COMPLAINTS 8.16.2.21 A LICENSING REQUIREMENTS Compliance 8.16.2.21 B CAPACITY OF CENTERS Compliance N/A 8.16.2.21 C INCIDENT REPORTING REQUIREMENTS **Administrative Requirements** 8.16.2.22 A ADMINISTRATION RECORDS Compliance 8.16.2.22 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT Compliance 8.16.2.22 C POLICY AND PROCEDURES Compliance Compliance 8.16.2.22 D FAMILY HANDBOOK 8.16.2.22 E CHILDREN'S RECORDS Non-compliance

Survey Report Form Page 1 of 3

Center Name:	License Number:	Date:	
PMS Headstart - Estancia	94715	04/05/2017	

### **Administrative Requirements**

### **Deficiencies**

Of the 4 children's records reviewed, 1 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.

**Regulation:** 8.16.2.22E(1)(e)

## **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: 05/05/2017

#### **Deficiencies**

Of the 4 children's records reviewed, 1 is/are missing complete information as follows: the names of parents or guardians, parents or guardians current places of employment, addresses, pager, cellular and/or work telephone numbers. See Children's Records 8.16.2.22 form for the child(ren) with missing information. NOTE: Physical address needed.

 $\textbf{Regulation:}\ 8.16.2.22E(1)(b)$ 

### **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 is on file.

Date to be Completed: 05/05/2017

·				
8.16.2.22 F PERSONNEL RECORDS	Compliance			
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	Compliance			
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	N/A			
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	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, WADING AND WATER	N/A			
8.16.2.24 L FIELD TRIPS	N/A			

Survey Report Form Page 2 of 3

Center Name: PMS Headstart - Estancia	License Number: 94715	<b>Date:</b> 04/05/2017				
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			Compliance			
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			Compliance			
Buildings, Grounds & Safety						
8.16.2.29 A HOUSEKEEPING			Compliance			
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	Compliance					
8.16.2.29 H SAFETY COMPLIANCE	Compliance					
8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS	Compliance					
8.16.2.29 J PETS			N/A			

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.

04/05/2017

04/05/2017

Date

Surveyor:Peggy Waconda

Date

Facility Rep:Roberta Sanchez

Roberta Sanchiz

Page 3 of 3