

Center Name: PMS Headstart - Moriarty		Address: 704 Union Street Moriarty, NM 87035			Phone: (505)832-2588		
License Number: 94719	Issue Date: 01/19/2017	Expiration Date: 01/18/2018	Type: 5 Star FOCUS Child Care Center		Status: Licensed		
Capacity					Census		
Over Age 2:	60	Under Age 2:	0	Night Care:	0	Playground:	60
		Over 2:	23	Under 2:	0		
Days and Hours of Operation							
	<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>	<u>Saturday</u>	<u>Sunday</u>
Opening Times:	08:30 AM	08:30 AM	08:30 AM	08:30 AM	08:30 AM	Closed	Closed
Closing Times:	03:30 PM	03:30 PM	03:30 PM	03:30 PM	03:30 PM		
# of Classrooms: 3	Purpose: Annual		Date: 11/27/2017		Time: 12:45 AM		
Comments Discussion on Emergency Drills.							

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

Center Name: PMS Headstart - Moriarty	License Number: 94719	Date: 11/27/2017
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Administrative Requirements

Deficiencies

From the review of staff records, it was determined that 4 out of 10 staff having direct contact with the children, does/do not have a complete file as required in 8.16.2.22F. See Staff Records 8.16.2.22 form for staff with an incomplete file. Note : Education coordinator had to call for background checks letters and receipts.

Regulation: 8.16.2.22F(1)

Corrective Action Plan

The program will complete a file for each staff including substitutes and volunteers .

Date to be Completed: 12/27/2017

Deficiencies

From the review of staff records, it was determined that 3 out of 10 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.

Regulation: 8.16.2.22F(1)(n)

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: 12/27/2017

8.16.2.22 G PERSONNEL HANDBOOK	Compliance
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Personnel & Staffing

8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS	Compliance
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<p>8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING</p> <p><u>Deficiencies</u></p> <p>Educators did not complete the following training within 3-months: Health and Safety Training</p> <p>Regulation: 8.16.2.23B(2)(b)</p> <p><u>Corrective Action Plan</u></p> <p>All educators, regardless of the number of hours per week, will complete the above listed training.</p> <p>The following staff members need to complete the required training:</p> <p>Date to be Completed: 12/27/2017</p> <p><u>Deficiencies</u></p> <p>Educators did not complete the following training within 3-months: first aid and cardiopulmonary resuscitation (CPR) certification</p> <p>Regulation: 8.16.2.23B(2)(b)</p> <p><u>Corrective Action Plan</u></p> <p>All educators, regardless of the number of hours per week, will complete the above listed training.</p> <p>The following staff members need to complete the required training:</p> <p>Date to be Completed: 12/27/2017</p>	Non-compliance
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Personnel & Staffing

Deficiencies

The center failed to keep a training log on file with Date of training; Training certificate for 5 out of 10 staff. See Staff Records 8.16.2.22 form for staff who are missing a complete training log.

Regulation: 8.16.2.23B(2)(l)

Corrective Action Plan

A training log will be completed for each staff that includes the employee 's name, date of hire, and position, date of training, clock hours, competency area, source of training, and training certificate.

Date to be Completed: 12/27/2017

8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES	Compliance
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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	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	Compliance

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

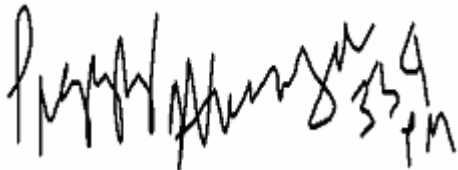
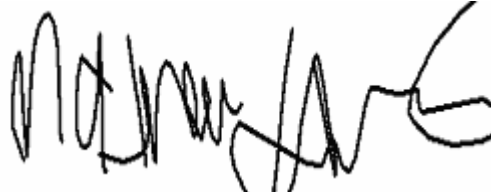
8.16.2.26 A HYGIENE	Compliance
8.16.2.26 B FIRST AID REQUIREMENTS	Compliance
8.16.2.26 C MEDICATION	N/A
8.16.2.27 A-D ILLNESS REQUIREMENTS FOR CENTERS	Compliance
8.16.2.28 A-H TRANSPORTATION REQUIREMENTS FOR CENTERS	N/A

Buildings, Grounds & Safety

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Buildings, Grounds & Safety		
8.16.2.29 A HOUSEKEEPING		Non-compliance
<u>Deficiencies</u> The equipment in the classroom are not safe in that several hanging cords. Regulation: 8.16.2.29A(1)		
<u>Corrective Action Plan</u> The safety violation will be corrected and a system for routine safety inspection developed. Date to be Completed: 12/27/2017		
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 AND CONTROLLED SUBSTANCES		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.

 11/27/2017	 11/27/2017		
Surveyor: Peggy Waconda	Date	Facility Rep: Matthew Hernandez for Jacquelin	Date