

Children, Youth and Families Department Child Care Licensing SURVEY REPORT

Center Name:			Addr							Phone	ə:	
PMS Headstart - Sweeney			501 Airport Rd Santa Fe, NM 87507					(505)4	(505)474-5244			
License Number:	cense Number: Issue Date:		Expiration Date: Type:			Status:						
94600	10/11/2016	10/10/	2017	4 St	ar Child	Care Center		Licensed	ł			
Capacity							Ce	nsus				
Over Age 2: 40	Under Age 2:	0	Night Care:	0	Pla	ayground: 40	Ove	er 2:	0		Under 2:	24
Days and Hours of	Operation						•					
	Monday Tuesday Wednesday Thursday Friday Saturday Opening Times: 07:30 AM 07:30 AM 07:30 AM 07:30 AM 07:30 AM Closed					L	<u>Sunday</u> Closed					
Opening Times Closing Times			4:30 PM	07:307 04:30 I		07.30 AM 04:30 PM		0 PM		Closed		Closed
# of Classrooms:		Purpose:				Date:			Tim	ne:		
2 Semi-Annual								:45 AM				
Comments												
A SUR	VEY OF YOUR FACI	LITY HAS BE	EEN MADE AND	YOU ARE N	NOTIFIE	D OF NON-COMPLIAN	ICE OF THE	EREGULAT	IONS A	AS NOTE	D BELOW:	
					Licen	isure						
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									Not Inspected			
			A	dministr	rative	Requirements						
8.16.2.22 A ADMINI	STRATION REC	ORDS										Compliance
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						N	on-compliance					

Center Name:	License Number:	Date:	
PMS Headstart - Sweeney	94600	01/31/2017	
Administrative R	equirements		
Deficiencies Of the 6 children's records reviewed, 1 is/are missing the name and terpeople in the local area to contact in an emergency when a parent or reached. See Children's Records 8.16.2.22 form for the child(ren) with Regulation: 8.16.2.22E(2)(b) Corrective Action Plan Parents will be advised to review and add missing information. The cerchildren's records to ensure up-to-date emergency contact information Date to be Completed: 02/28/2017	guardian cannot be n missing information. enter will review all		
8.16.2.22 F PERSONNEL RECORDS			Non-compliance
Deficiencies From the review of staff records, it was determined that 1 out of 4 staff include a background check. See Staff Records 8.16.2.22 form for statinformation. Regulation: 8.16.2.22F(1)(e) Corrective Action Plan The center will obtain documentation of a background check. Date to be Completed: 02/28/2017			
8.16.2.22 G PERSONNEL HANDBOOK			Not Inspected
Personnel &	Staffing		
8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS	g		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			Compliance
8.16.2.24 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLERS			Compliance
8.16.2.24 D DIAPERING AND TOILETING			Compliance
8.16.2.24 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL N	EEDS		Compliance
8.16.2.24 F ADDITIONAL REQUIREMENTS FOR NIGHT CARE			Compliance
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			Not Inspected
8.16.2.24 L FIELD TRIPS			N/A
Food Se	rvice		
8.16.2.25 B MEALS AND SNACKS			Compliance
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Center Name:	License Number:	Date:	
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	Food Service		
8.16.2.25 C MENUS			Compliance
8.16.2.25 D KITCHENS			Compliance
8.16.2.25 E MEAL TIMES			Complianc
Heal	th & Safety Requirements		
8.16.2.26 A HYGIENE			Compliance
8.16.2.26 B FIRST AID REQUIREMENTS			Complianc
8.16.2.26 C MEDICATION			Not Inspecte
8.16.2.27 A-D ILLNESS REQUIREMENTS FOR CENTERS			Not Inspecte
8.16.2.28 A-H TRANSPORTATION REQUIREMENTS FOR CEN	TERS		N/
Buil	ldings, Grounds & Safety	•	
8.16.2.29 A HOUSEKEEPING			Complianc
8.16.2.29 B PEST CONTROL			Not Inspecte
8.16.2.29 C MECHANICAL SYSTEMS			Not Inspecte
8.16.2.29 D WATER AND WASTE			Not Inspecte
8.16.2.29 E LIGHTING, LIGHTING FIXTURES AND ELECTRICA	NL		Not Inspecte
8.16.2.29 F EXITS AND WINDOWS			Complianc
8.16.2.29 G TOILET AND BATHING FACILITIES			Complianc
8.16.2.29 H SAFETY COMPLIANCE			Complianc
8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES,	ILLEGAL DRUGS AND CONTROLLED SUBST	TANCES	Not Inspecte
8.16.2.29 J PETS			N//

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.

01/31/2017

Date

Facility Rep:Patti Lope

01/31/2017

Surveyor: Aurora Martinez

Survey Report Form

Date