



Facility

Name: *Paradise Hills Community Preschool* **License Number:** *94674*
Address: *5976 Avenida La Barranta N.W, Albuquerque, NM 87114*
Phone: *5058983122* **Fax:** **E-mail:** *phcp@msn.com*

License Information

Type: *5 Star FOCUS Child Care Center* **Status:** *Licensed* **Issue Date:** *05/29/2018* **Expiration Date:** *05/28/2019*

Capacity

Over Age 2: *23* **Under Age 2:** *0* **Night Care:** *0* **Playground:** *23*
Square Footage: *0*

Census

Over 2: *23* **Under 2:** *0*

Classrooms

Number of Classrooms: *1*

Days and Hours of Operation

Monday <i>8:30 AM - 3:30 PM</i>	Tuesday <i>8:30 AM - 3:30 PM</i>	Wednesday <i>8:30 AM - 3:30 PM</i>	Thursday <i>8:30 AM - 3:30 PM</i>	Friday <i>8:30 AM - 3:30 PM</i>
Saturday <i>Closed</i>	Sunday <i>Closed</i>			

Inspection

Date: *09/10/2018* **Time In:** *9:33 AM* **Time Out:** *11:00 AM* **Purpose:** *Semi-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>Not Inspected</i>

Licensure (continued)**8.16.2.21 B Capacity of Centers****Non-compliance**

The center failed to post classroom capacities, and ratios and group sizes in an area of the room that is easily visible to parents, staff and visitors. Group size was not posted.

Corrective Action Plan

The center will post the capacity in an area of the room that is easily visible to parents, staff and visitors.

Regulation: 8.16.2.21.B.3.c.

Date to be Completed: 10/10/2018

8.16.2.21 C Incident Reporting Requirements*Not Inspected***Administrative Requirements****8.16.2.22 A Administrative Records***Compliance***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 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.

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.

Regulation: 8.16.2.22.E.1.e.

Date to be Completed: 10/10/2018

8.16.2.22 F Personnel Records**Non-compliance**

From the review of staff records, it was determined that 1 out of 4 staff records does/do not include an emergency contact number. See Staff Records 8.16.2.22 form for staff with this missing information.

Corrective Action Plan

The center will have staff complete required information.

Regulation: 8.16.2.22.F.1.i.

Date to be Completed: 10/10/2018

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

From the review of staff records, it was determined that 1 out of 4 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: 10/10/2018

The center failed to have 3 out of 4 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: 10/10/2018

8.16.2.22 G Personnel Handbook*Not Inspected***Personnel & Staffing****8.16.2.23 A Personnel and Staffing Requirements***Compliance***8.16.2.23 B Staff Qualifications and Training****Non-compliance**

From the review of staff records, it was determined that 1 out of 4 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: 10/10/2018

8.16.2.23 B Staff Qualifications and Training (continued)**Non-compliance**

The center failed to keep a training log on file with Clock hours, Date of training, Competency area, Source of training, Training certificate for 3 out of 4 staff. See Staff Records 8.16.2.22 form for staff who are missing a complete training log.

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.

Regulation: 8.16.2.23.B.2.I.

Date to be Completed: 10/10/2018

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 4 staffs records reviewed, 1 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: 10/10/2018

8.16.2.24 B Naps or Rest Period*Not Inspected***8.16.2.24 C Additional Requirements for Infants and Toddlers***Not Inspected***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***Not Inspected***8.16.2.24 H Social-Emotional Responsive Environment***Compliance***8.16.2.24 I Equipment and Program***Not Inspected***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**

Food Service (continued)8.16.2.25 C Menus Compliance8.16.2.25 D Kitchens **Non-compliance***The freezer in the kitchen does not have a working internal thermometer.**Corrective action Plan**The center will obtain and place a working thermometer in freezer.*

Regulation: 8.16.2.25.D.6.

Date to be Completed: 10/10/2018

8.16.2.25 E Meal Times Compliance**Health & Safety Requirements**8.16.2.26 A Hygiene Compliance8.16.2.26 B First Aid Requirements Not Inspected8.16.2.26 C Medication Not Inspected8.16.2.27 A-D Illness Requirements for Centers Compliance8.16.2.28 A-H Transportation Requirements for Centers Not Inspected**Buildings, Grounds & Safety**8.16.2.29 A Housekeeping Compliance8.16.2.29 B Pest Control Compliance8.16.2.29 C Mechanical Systems Compliance8.16.2.29 D Water and Waste Compliance8.16.2.29 E Lighting, Lighting Fixtures and Electrical Compliance8.16.2.29 F Exits and Windows Compliance8.16.2.29 G Toilet and Bathing Facilities Compliance8.16.2.29 H Safety Compliance **Non-compliance***The center failed to conduct a fire drill for the month(s) of May 2018.*

Regulation: 8.16.2.29.H.2.

Date to be Completed: 10/10/2018

8.16.2.29 I Smoking, Firearms, Alcoholic Beverages, Illegal Drugs and Controlled Substances Compliance8.16.2.29 J Pets Compliance

Additional Comments

None

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.

Kia Kennedy 10:51

Surveyor: *Kia Kennedy*

Barbara J Lindsey

Facility Representative: *Barbara J Lindsey*