

<b>Center Name:</b> Paradise Hills Community Preschool		<b>Address:</b> 5976 Avenida La Barranta N.W. Albuquerque, NM 87114			<b>Phone:</b> (505)898-3122		
<b>License Number:</b> 94674	<b>Issue Date:</b> 05/29/2016	<b>Expiration Date:</b> 05/28/2017	<b>Type:</b> 5 Star FOCUS Child Care Center		<b>Status:</b> Licensed		
<b>Capacity</b>					<b>Census</b>		
Over Age 2:	23	Under Age 2:	0	Night Care:	0	Playground:	23
		Over 2:	21	Under 2:	0		
<b>Days and Hours of Operation</b>							
	<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			
<b># of Classrooms:</b> 1	<b>Purpose:</b> Annual		<b>Date:</b> 03/29/2017		<b>Time:</b> 10:05 AM		
<b>Comments</b> Left provider updated regulations and background check regulations.							

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	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	Compliance
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 <u>Deficiencies</u> The center failed to post classroom capacities, and ratios and <b>group sizes</b> in an area of the room that is easily visible to parents, staff and visitors. <b>Regulation:</b> 8.16.2.21B(3)(c)  <u>Corrective Action Plan</u> The center will post the capacity in an area of the room that is easily visible to parents, staff and visitors. <b>Date to be Completed:</b> 04/29/2017	Non-compliance
8.16.2.21 C INCIDENT REPORTING REQUIREMENTS	Not Inspected
Administrative Requirements	
8.16.2.22 A ADMINISTRATION RECORDS	Compliance
8.16.2.22 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT	Not Inspected
8.16.2.22 C POLICY AND PROCEDURES	Non-compliance

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**Administrative Requirements**

**Deficiencies**

The center did not have available for review written policies and procedures covering expulsion of children.

**Regulation:** 8.16.2.22C(1)-(8)

**Corrective Action Plan**

The center will complete written policies and procedures for the missing area(s).

**Date to be Completed:** 04/29/2017

**Deficiencies**

The program does not have an up to date emergency evacuation and disaster preparedness plan approved by the department. Program will add continuity of operation and accommodations for children with chronic medical conditions.

**Regulation:** 8.16.2.22C(8)

**Corrective Action Plan**

An emergency evacuation and disaster preparedness plan will be developed.

**Date to be Completed:** 04/29/2017

<b>8.16.2.22 D FAMILY HANDBOOK</b>	Not Inspected
<p><b>8.16.2.22 E CHILDREN'S RECORDS</b></p> <p><b><u>Deficiencies</u></b></p> <p>Of the 20 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.</p> <p><b>Regulation:</b> 8.16.2.22E(1)(e)</p> <p><b><u>Corrective Action Plan</u></b></p> <p>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.</p> <p><b>Date to be Completed:</b> 04/29/2017</p> <p><b><u>Deficiencies</u></b></p> <p>Of the 20 children's records reviewed, 1 is/are missing a signed parent or guardian acknowledgement that the parent handbook had been read and understood. See the Children's Records 8.16.2.22 form for the child(ren) who have this missing.</p> <p><b>Regulation:</b> 8.16.2.22E(1)(l)</p> <p><b><u>Corrective Action Plan</u></b></p> <p>Parents will be advised to complete the statement. The center will review all children's records to ensure a signed acknowledgement is on file.</p> <p><b>Date to be Completed:</b> 04/29/2017</p>	Non-compliance
<b>8.16.2.22 F PERSONNEL RECORDS</b>	Non-compliance

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<b>Administrative Requirements</b>		
<p><b><u>Deficiencies</u></b> From the review of staff records, it was determined that 1 out of 5 staff records does/do not include a background check. See Staff Records 8.16.2.22 form for staff with this missing information. Clearance has exceeded 5 years. <b>Regulation:</b> 8.16.2.22F(1)(e)</p> <p><b><u>Corrective Action Plan</u></b> The center will obtain documentation of a background check. <b>Date to be Completed:</b> 04/29/2017</p>		
<b>8.16.2.22 G PERSONNEL HANDBOOK</b>	Not Inspected	
<b>Personnel &amp; Staffing</b>		
<b>8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS</b>	Compliance	
<p><b>8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING</b></p> <p><b><u>Deficiencies</u></b> Educators did not complete the following training within 3-months: first aid and cardiopulmonary resuscitation (CPR) certification; Health and Safety Training <b>Regulation:</b> 8.16.2.23B(2)(b)</p> <p><b><u>Corrective Action Plan</u></b> 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: All educator will complete Health &amp; Safety training within 30 days. 2 educators need to renew FA/CPR <b>Date to be Completed:</b> 04/29/2017</p> <p><b><u>Deficiencies</u></b> From the review of staff records, it was determined that 1 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. <b>Regulation:</b> 8.16.2.23B(2)(a)</p> <p><b><u>Corrective Action Plan</u></b> Orientation will be completed and documented for staff noted; in the future, orientation will be completed prior to time staff begin working with children. <b>Date to be Completed:</b> 04/29/2017</p> <p><b><u>Deficiencies</u></b> From the review of staff records, it was determined that 1 out of 5 staff does/do not have documentation of the 45-hour entry level course or an approved equivalent prior to or within six months of employment. <b>Regulation:</b> 8.16.2.23B(2)(c)</p> <p><b><u>Corrective Action Plan</u></b> Training will be completed for staff as required and documentation retained on file. <b>Date to be Completed:</b> 04/29/2017</p>	Non-compliance	
<b>8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES</b>	Compliance	
<b>Services &amp; Care of Children</b>		
<b>8.16.2.24 A GUIDANCE</b>	Non-compliance	

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### Services & Care of Children

**Deficiencies**

Of the 20 children's records reviewed, 1 is/are missing a signed parent or guardian 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.

**Regulation:** 8.16.2.24A(1)

**Corrective Action Plan**

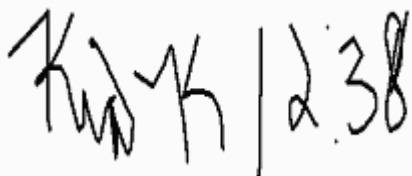
The center will review all children's records to ensure a signed parent or guardian acknowledgement is on file.

**Date to be Completed:** 04/29/2017

<b>8.16.2.24 B NAPS OR REST PERIOD</b>	N/A
<b>8.16.2.24 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLERS</b>	N/A
<b>8.16.2.24 D DIAPERING AND TOILETING</b>	Compliance
<b>8.16.2.24 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL NEEDS</b>	Compliance
<b>8.16.2.24 F ADDITIONAL REQUIREMENTS FOR NIGHT CARE</b>	N/A
<b>8.16.2.24 G PHYSICAL ENVIRONMENT</b>	Compliance
<b>8.16.2.24 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT</b>	Compliance
<b>8.16.2.24 I EQUIPMENT AND PROGRAM</b>	Compliance
<b>8.16.2.24 J OUTDOOR PLAY AREAS</b>  <b><u>Deficiencies</u></b> Playground deck equipment is not safe as evidenced by the following: protruding nail heads or screws.  <b>Regulation:</b> 8.16.2.24J(1)  <b><u>Corrective Action Plan</u></b> Equipment will be removed or made inaccessible until repairs can be made. A schedule for routine inspection and maintenance will be devised.  <b>Date to be Completed:</b> 04/29/2017	Non-compliance
<b>8.16.2.24 K SWIMMING, WADING AND WATER</b>	Not Inspected
<b>8.16.2.24 L FIELD TRIPS</b>	Not Inspected
<b>Food Service</b>	
<b>8.16.2.25 B MEALS AND SNACKS</b>	Compliance
<b>8.16.2.25 C MENUS</b>	N/A
<b>8.16.2.25 D KITCHENS</b>	Compliance
<b>8.16.2.25 E MEAL TIMES</b>	Compliance
<b>Health &amp; Safety Requirements</b>	
<b>8.16.2.26 A HYGIENE</b>	Compliance
<b>8.16.2.26 B FIRST AID REQUIREMENTS</b>	Compliance
<b>8.16.2.26 C MEDICATION</b>	Non-compliance

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<b>Health &amp; Safety Requirements</b>		
<b>Deficiencies</b> The center does not have the written permission of parents or guardians; directions from the prescribing physician to administer medication. (For Epi-pen) <b>Regulation:</b> 8.16.2.26C(2)		
<b>Corrective Action Plan</b> Written permission and instructions for administration from the prescribing physician will be obtained from parents/guardians prior to administering any prescription or non-prescription medication. <b>Date to be Completed:</b> 04/29/2017		
<b>8.16.2.27 A-D ILLNESS REQUIREMENTS FOR CENTERS</b>		Compliance
<b>8.16.2.28 A-H TRANSPORTATION REQUIREMENTS FOR CENTERS</b>		N/A
<b>Buildings, Grounds &amp; Safety</b>		
<b>8.16.2.29 A HOUSEKEEPING</b>		Compliance
<b>8.16.2.29 B PEST CONTROL</b>		Compliance
<b>8.16.2.29 C MECHANICAL SYSTEMS</b>		Compliance
<b>8.16.2.29 D WATER AND WASTE</b>		Compliance
<b>8.16.2.29 E LIGHTING, LIGHTING FIXTURES AND ELECTRICAL</b>		Compliance
<b>8.16.2.29 F EXITS AND WINDOWS</b>		Compliance
<b>8.16.2.29 G TOILET AND BATHING FACILITIES</b> <b>Deficiencies</b> The toilet room for Preschool room(s) is missing disposable towels. Corrected on site. <b>Regulation:</b> 8.16.2.29G(2) <b>Corrective Action Plan</b> The toilet room will be restocked and a routine established to monitor all toilet rooms for adequate supplies. Corrected on site. <b>Date to be Completed:</b> 03/29/2017		Non-compliance
<b>8.16.2.29 H SAFETY COMPLIANCE</b>		Compliance
<b>8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES</b>		Compliance
<b>8.16.2.29 J PETS</b>		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.



03/29/2017



03/29/2017

Surveyor: Kia Kennedy

Date

Facility Rep: Barbara Lindsey

Date