

	Children Youth & Families Department			
Facility Name: Parkside Child De	velonment Center		Lie	ense Number: 143844
Address: 3248 A Isleta S		7105	LICE	ense Number. 145044
Phone: 5058733426	Fax:	E-mail: tamar	abaca8825@yhao ma@yahoo.com	o.com;
License Information				
Type : 4 Star FOCUS Child Care Center	d Status: Licensed	Issue Date: 0		iration Date: 14/2019
Capacity				
Over Age 2: <i>123</i> Square Footage: 0	Under Age 2:67	Night Care: C	Pla	yground: <i>103</i>
Census				
Over 2: 68	Under 2: 18			
Classrooms				
Number of Classrooms	: 11			
Days and Hours of Operati	ion			
Monday 6:30 AM - 8:00 PM	Tuesday 6:30 AM - 8:00 PM	Wednesday 6:30 AM - 8:00 PM	Thursday 6:30 AM - 8:00 PM	Friday 6:30 AM - 8:00 PM
Saturday Closed	Sunday Closed			
Inspection				
Date: 09/18/2018	Time In: 9:40 AM	Time Out: 12.	41 PM Pur	pose: Semi-Annual
Licensure				
8.16.2.11 A Types of Lic	enses			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				Complianc
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			Compliance
09/18/2018		https://cyfd.org/		1 of 7

Licensure (continued)

8.16.2.21 C Incident Reporting Requirements

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 12 children's records reviewed, 1 is/are missing a list of people authorized to pick up the child and an authorization form signed by the parent or guardian. See Children's Records 8.16.2.22 form for the child(ren) with missing information and/or authorization.

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 and authorization is on file.

Regulation: 8.16.2.22.E.1.c.

Date to be Completed: 10/18/2018

Of the 12 children's records reviewed, 1 is/are missing the date the child first attended the center. See Children's Records 8.16.2.22 form for the child(ren) with missing information and/or authorization. Corrected on site.

Corrective Action Plan The first attendance date will be added and the center will review all children's records to ensure complete information is on file. Corrected on site.

Regulation: 8.16.2.22.E.1.d.

Date to be Completed: 09/18/2018

Of the 12 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: 10/18/2018

Not Inspected

Of the 12 children's records reviewed, 1 is/are missing information on allergies or medical conditions. See Children's Records 8.16.2.22 form for the child(ren) with missing information.

Corrective Action Plan

Parents will be advised to review and add missing information. The center will review all records to ensure information regarding allergies and medical conditions is on file.

Regulation: 8.16.2.22.E.2.a.

Of the 12 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.

Corrective Action Plan Parents will be advised to complete the statement. The center will review all children's records to ensure a signed acknowledgement is on file.

Regulation: 8.16.2.22.E.1.l.

8.16.2.22 F Personnel Records

From the review of staff records, it was determined that 1 out of 15 staff records does/do not include the staff's position. See Staff Records 8.16.2.22 form for staff with this missing information.

Corrective Action Plan The center will add the position to the record.

Regulation: 8.16.2.22.F.1.b.

From the review of staff records, it was determined that [] out of [] staff records do/does not include the staff's current and past duties and responsibilities. See Staff Records 8.16.2.22 form for staff with this missing information.

Corrective Action Plan The center will add staff's current and past duties and responsibilities to the record.

Regulation: 8.16.2.22.F.1.c.

Date to be Completed: 10/18/2018

Date to be Completed: 10/18/2018

Date to be Completed: 10/18/2018

Non-compliance

Date to be Completed: 10/18/2018

8.16.2.22 F Personnel Records (continued)

From the review of staff records, it was determined that 1 out of 15 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.

From the review of staff records, it was determined that 1 out of 15 staff records does/do not include signed acknowledgement that the personnel handbook had been read and understood. See Staff Records 8.16.2.22 form for staff who need to complete the acknowledgement.

Corrective Action Plan The center will have staff complete the required acknowledgement and will retain on file.

Regulation: 8.16.2.22.F.1.o.

8.16.2.22 G Personnel Handbook

Personnel & Staffing

8.16.2.23 A Personnel and Staffing Requirements

8.16.2.23 B Staff Qualifications and Training

From the review of staff records, it was determined that 1 out of 15 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.

Educators did not complete the following training within 3-months: Health and Safety Training one educator needs to complete

Corrective Action Plan 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:

Regulation: 8.16.2.23.B.2.b.



Non-compliance

Date to be Completed: 10/18/2018

143844

Not Inspected

Personnel & Staffing (continued)

8.16.2.23 C Staff/Child Ratios and Group Sizes

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 Needs	Compliance
8.16.2.24 F Additional Requirements for Night Care	Not Inspected
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
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	Non-compliance
The center does not have on duty all educators currently certified in first resuscitation (CPR).	t aid and cardiopulmonary
Corrective Action Plan All educators must be certified in first aid and cardiopulmonary resusci	tation (CPR).
Regulation: 8.16.2.26.B.1.	Date to be Completed: 10/18/2018

Compliance

6.2.27 A-D Illness Requirements for Centers	Complic
6.2.28 A-H Transportation Requirements for Centers	Not Inspe
dings, Grounds & Safety	
6.2.29 A Housekeeping	Non-complia
The ventilation vents has a heavy accumulation of dust	in room 2 and room 4
Corrective Action Plan A routine will be established to assess all areas of the p	remises for cleanliness, safety and potential hazards.
Regulation: 8.16.2.29.A.1.	Date to be Completed: 10/18/201
The ceiling tiles in the infant room and room 4 are not	clean as evidenced by stains.
Corrective Action Plan Cleaning will be completed and a schedule for routine c	leaning will be established
Regulation: <i>8.16.2.29.A.1</i> .	Date to be Completed: 10/18/201
The premises in the room 1 are not clean as evidenced b	by spider webs on the emergency lights.
Corrective Action Plan Cleaning will be completed and a schedule for routine c	leaning will be established.
Regulation: <i>8.16.2.29.A.1</i> .	Date to be Completed: 10/18/201
The fixtures are not in good repair as evidenced by soap	dispenser is cracked in room 8, Room 9 (restroom).
Corrective Action Plan Repairs will be completed and a system for routine inspe	ection of the center and premises will be established.
Regulation: 8.16.2.29.A.1.	Date to be Completed: 10/18/201
6.2.29 B Pest Control	Complie
6.2.29 C Mechanical Systems	Complie
6.2.29 D Water and Waste	Complie
6.2.29 E Lighting, Lighting Fixtures and Electrical	Complie
6.2.29 F Exits and Windows	Complia

Buildings, Grounds & Safety (continued) Compliance 8.16.2.29 G Toilet and Bathing Facilities 8.16.2.29 H Safety Compliance Non-compliance The center does not have documentation that a request for fire inspection had been made to the fire authority whose policy does not provide for an annual inspection of the center. Last inspection dated 8/2/17 Corrective Action Plan The center will document the request date and to whom the request was made. Regulation: 8.16.2.29.H.3.e. Date to be Completed: 10/18/2018 The center does not have verification of an annual fire inspection from the fire authority having jurisdiction. Corrective Action Plan An annual fire inspection will be requested from the fire authority having jurisdiction over the center. Regulation: 8.16.2.29.H.3.e. Date to be Completed: 10/18/2018 8.16.2.29 I Smoking, Firearms, Alcoholic Beverages, Illegal Drugs and Controlled Substances Compliance Compliance 8.16.2.29 J Pets 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.

12.43

Surveyor: Kia Kennedy

Facility Representative: Tamara Baca Shayna Archuleta