

Center Name:			Address: 501 Jefferson NE					Phone:		
Peppermint Stick Pre-Scho			Albuquerque, NM 87108					(505)266-2300		
License Number:	Issue Date:	Expiration	Date:	Туре:			Status:			
10398	05/6/2016	05/5/2017		2 Star Child	Care Center		Licensed			
Capacity				-		С	ensus			
Over Age 2: 51	Under Age 2:	0 Night	Care:	0 PI	ayground: 4	8 0	ver 2:	26	Unde	er 2: 0
Days and Hours of Operation										
	<u>Monday</u>	Tuesda	<u>w</u>	<u>/ednesday</u>	<u>Thursday</u>	<u> </u>	riday	9	<u>Saturday</u>	<u>Sunday</u>
Opening Times	: 06:30 AM	06:30 AI	М (06:30 AM	06:30 AM	06	:30 AM		Closed	Closed
Closing Times	: 06:00 PM	06:00 PI	М (06:00 PM	06:00 PM	06	:00 PM			
# of Classrooms:	F	urpose:			Date:			Tim	ne:	
2	Α	nnual			03/03/2017			10:0	00 AM	
Comments										
Left provider updated licensing and background check regulations as well an updated notifiable diseases list										

Zeit provider apaated neemoning and background check regulations do well an apaated nothinable discussed not				
A SURVEY OF YOUR FACILITY HAS BEEN MADE AND YOU ARE NOTIFIED OF NON-COMPLIANCE OF THE REGULATIONS AS N	OTED 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	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			
<u>Deficiencies</u> The program does not have an up to date emergency evacuation and disaster preparedness				
plan approved by the department. Provider will add the following to the parent/personnel				
handbook; continuity of operation, lockdown procedure, shelter in place, 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: 04/03/2017				
8.16.2.22 D FAMILY HANDBOOK	Not Inspected			

Survey Report Form Page 1 of 5

 Center Name:
 License Number:
 Date:

 Peppermint Stick Pre-Scho
 10398
 03/03/2017

Administrative Requirements

8.16.2.22 E CHILDREN'S RECORDS

Non-compliance

Deficiencies

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.

Regulation: 8.16.2.22E(1)(e)

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

Date to be Completed: 04/03/2017

Deficiencies

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.

Regulation: 8.16.2.22E(1)(d)

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.

Date to be Completed: 04/03/2017

Deficiencies

There was no record of each child's arrival and/or departure time and dates of attendance initialed by a parent, guardian, or person authorized to pick up the child. Of the 26 children present 1 were signed in. See Children's Records 8.16.2.22 form for the child(ren) with missing information and/or authorization.

Regulation: 8.16.2.22E(1)(j)

Corrective Action Plan

Parents will be advised to sign in and out each child daily and staff will monitor for completion.

Date to be Completed: 04/03/2017

8.16.2.22 F PERSONNEL RECORDS

Non-compliance

Deficiencies

From the review of staff records, it was determined that 1 out of 8 staff records does/do not include signed acknowledgement that the center's disaster preparedness plan and fire evacuation plan were reviewed.

Regulation: 8.16.2.22F(1)(P)

Corrective Action Plan

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

Date to be Completed: 04/03/2017

Survey Report Form Page 2 of 5

Center Name:	License Number:	Date:	
Peppermint Stick Pre-Scho	10398	03/03/2017	

Administrative Requirements

Deficiencies

From the review of staff records, it was determined that 1 out of 8 staff records does/do not include a background check. See Staff Records 8.16.2.22 form for staff with this missing information. Educators background check exceeded 5 years.

Regulation: 8.16.2.22F(1)(e)

Corrective Action Plan

The center will obtain documentation of a background check.

Date to be Completed: 04/03/2017

Deficiencies

From the review of staff records, it was determined that 1 out of 8 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: 04/03/2017

Deficiencies

From the review of staff records, it was determined that 1 out of 8 staff records does/do not include the required Form I-9. See Staff Records 8.16.2.22 form for staff missing the form.

Regulation: 8.16.2.22F(1)(q)

Corrective Action Plan

The center will obtain Form I-9s from all staff and maintain them in their personnel files.

Date to be Completed: 04/03/2017

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	Compliance		
8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES	Compliance		
Services & Care of Children	·		
8.16.2.24 A GUIDANCE Deficiencies Of the 8 staff's 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. Regulation: 8.16.2.24A(1) Corrective Action Plan The center will review all staff's records to ensure a signed staff acknowledgement is on file. Date to be Completed: 04/03/2017	Non-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		

Survey Report Form Page 3 of 5

Center Name: Peppermint Stick Pre-Scho	License Number:	Date: 03/03/2017	
		03/03/2017	
Services & Care	of Children		
8.16.2.24 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL N	EEDS		Compliance
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			Not Inspected
8.16.2.24 L FIELD TRIPS			Not Inspected
Food Se	rvice		
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 F	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, Grou	nds & Safety		
8.16.2.29 A HOUSEKEEPING			Compliance
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			Non-compliance
<u>Deficiencies</u> The toilet room for Preschool girls restroom(s) is missing disposable to site. <u>Regulation:</u> 8.16.2.29G(2)	owels. Corrected on		
Corrective Action Plan The toilet room will be restocked and a routine established to monitor adequate supplies. Corrected on site. Date to be Completed: 03/03/2017	all toilet rooms for		
8.16.2.29 H SAFETY COMPLIANCE			Compliance

Survey Report Form Page 4 of 5

Center Name:	License Number:	Date:			
Peppermint Stick Pre-Scho	10398	03/03/2017			
Buildings, Grounds & Safety					
8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS		ES	Compliance		
8.16.2.29 J PETS			Compliance		

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.

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03/03/2017

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03/03/2017

Surveyor:Kia Kennedy

Date

Facility Rep:Dermot Newman

Page 5 of 5

Date