

Center Name: RGEC @ Dennis Chavez Elementary - Belen		Address: 19670 Hwy 314 Belen, NM 87002			Phone: (505)966-1824			
License Number: 159476	Issue Date: 03/5/2016	Expiration Date: 03/4/2017	Type: 2 Star Child Care Center		Status: Licensed			
Capacity					Census			
Over Age 2:	109	Under Age 2:	0	Night Care:	0	Playground:	109	
					Over 2:	13	Under 2:	0
Days and Hours of Operation								
Morning		<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>	<u>Saturday</u>	<u>Sunday</u>
Opening Times:		06:45 AM	06:45 AM	06:45 AM	06:45 AM	06:45 AM	Closed	Closed
Closing Times:		08:45 AM	08:45 AM	08:45 AM	08:45 AM	08:45 AM		
Afternoon		<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>	<u>Saturday</u>	<u>Sunday</u>
Opening Times:		03:10 PM	03:10 PM	03:10 PM	03:10 PM	03:10 PM		
Closing Times:		06:00 PM	06:00 PM	06:00 PM	06:00 PM	06:00 PM		
# of Classrooms: 1		Purpose: Annual		Date: 01/18/2017		Time: 07:50 AM		
Comments								

A SURVEY OF YOUR FACILITY HAS BEEN MADE AND YOU ARE NOTIFIED OF NON-COMPLIANCE OF THE REGULATIONS AS NOTED BELOW:

Licensure

<p>8.16.2.40 A LICENSING REQUIREMENTS</p> <p><u>Deficiencies</u></p> <p>The licensee did not obtain background checks on all staff, volunteers and prospective staff as per the requirements outlined in the department's most current version of the Background Check and Employment History Verification provisions. All requirements of the current background check and employment history verification provisions pursuant to 8.83NMAC must be met prior to the issuance of an initial license. A request for a background check must be submitted prior to a staff member's employment. A background check must be conducted in accordance with 8.8.3 NMAC at least every five years on all required individuals. Background check on staff was not done within 24 hours, employee started in the summer, not background checked till December</p> <p>Regulation: 8.16.2.40A(3)</p> <p><u>Corrective Action Plan</u></p> <p>Please ensure that the licensee obtains background checks on all staff, volunteers, and prospective staff as per the requirement outlined in the department's most current version of the Background Check and Employment History Verification provisions. All requirements of the current background check and employment history verification provisions pursuant to 8.83NMAC must be met prior to the issuance of an initial license. A request for a background check must be submitted prior to a staff member's employment. A background check must be conducted in accordance with 8.8.3 NMAC at least every five years on all required individuals.</p> <p>Date to be Completed: 02/17/2017</p>	Non-compliance
<p>8.16.2.40 B CAPACITY OF A PROGRAM</p>	Compliance
<p>8.16.2.40 C, D INCIDENT REPORTING REQUIREMENTS</p>	Not Inspected

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Administrative Requirements		
8.16.2.41 A ADMINISTRATION RECORDS <u>Deficiencies</u> The program failed to display in a prominent place the last inspection/survey. Regulation: 8.16.2.41A <u>Corrective Action Plan</u> The program will post the missing item(s). Date to be Completed: 02/17/2017	Non-compliance	
8.16.2.41 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT	Compliance	
8.16.2.41 C PARENT HANDBOOK	Compliance	
8.16.2.41 D, 8.16.2.42 D CHILDREN'S RECORDS <u>Deficiencies</u> Of the 3 children's records reviewed, 1 is/are missing the date the child first attended the program. See Children's Records 8.16.2.41form for the child(ren) with missing information. Regulation: 8.16.2.41D(1)(d) <u>Corrective Action Plan</u> The first attendance date will be added and the program will review all children's records to ensure complete information is on file. Date to be Completed: 02/17/2017	Non-compliance	
8.16.2.41 E PERSONNEL RECORDS <u>Deficiencies</u> From the review of staff records, it was determined that 2 out of 5 staff records does/do not include a background check onsite. See Staff Records 8.16.2.41form for staff with this missing information. Regulation: 8.16.2.41E(1)(e) <u>Corrective Action Plan</u> The program will obtain documentation of a background check. Date to be Completed: 02/17/2017 <u>Deficiencies</u> The center failed to have 5 out of 5 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. Regulation: 8.16.2.41E(1)(f) <u>Corrective Action Plan</u> The center will put processes in place to ensure that all care giving staff sign annual statements of non-conviction. Date to be Completed: 02/24/2017	Non-compliance	

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Administrative Requirements

Deficiencies

From the review of staff records, it was determined that 3 out of 5 staff records does/do not include documentation of first-aid and cardiopulmonary resuscitation training onsite. See Staff Records 8.16.2.41 form for staff without verification of training.

Regulation: 8.16.2.41E(1)(g)

Corrective Action Plan

The program will obtain documentation of first-aid and CPR training and retain on file.

Date to be Completed: 02/17/2017

Deficiencies

From the review of staff records, it was determined that 5 out of 5 staff records does/do not include a current work schedule and daily sign in sheet that includes the time of arrival and departure and breaks and lunch. See Staff Records 8.16.2.41 form for staff who need to have a work schedule.

Regulation: 8.16.2.41E(2)

Corrective Action Plan

The program will add the work schedule and maintain dated weekly work schedules for the director, all staff, all care givers and volunteers.

Date to be Completed: 02/17/2017

8.16.2.41 F PERSONNEL HANDBOOK	Compliance
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Personnel & Staffing

8.16.2.42 A PERSONNEL AND STAFFING REQUIREMENTS	Compliance
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8.16.2.42 B STAFF QUALIFICATIONS	Compliance
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8.16.2.42 C TRAINING	Compliance
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Services & Care of Children

8.16.2.43 A GUIDANCE	Compliance
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8.16.2.43 B PHYSICAL ENVIRONMENT	Compliance
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8.16.2.43 C SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT	Compliance
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8.16.2.43 D EQUIPMENT AND PROGRAM	Compliance
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8.16.2.43 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL NEEDS	Compliance
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8.16.2.43 G SWIMMING, WADING AND WATER	N/A
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8.16.2.43 H FIELD TRIPS	Not Inspected
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8.16.2.43 F OUTDOOR PLAY AREAS	Compliance
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Food Service

8.16.2.44 B MEALS AND SNACKS	Compliance
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8.16.2.44 C KITCHENS	Non-compliance
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Food Service		
<p>Deficiencies The kitchen refrigerator does not have a working thermometer. Regulation: 8.16.2.44C(6)</p> <p>Corrective Action Plan A working thermometer will be obtained and placed in the unit. Date to be Completed: 02/17/2017</p>		
Health & Safety Requirements		
8.16.2.45 A HYGIENE		Compliance
8.16.2.45 B FIRST AID REQUIREMENTS		Compliance
8.16.2.45 C MEDICATION		Compliance
8.16.2.45 D ILLNESSES		Compliance
8.16.2.46 A-H TRANSPORTATION REQUIREMENTS		N/A
Buildings, Grounds & Safety		
8.16.2.47 A HOUSEKEEPING		Compliance
8.16.2.47 B PEST CONTROL		Compliance
8.16.2.47 C MECHANICAL SYSTEMS		Compliance
8.16.2.47 D LIGHTING, LIGHTING FIXTURES AND ELECTRICAL		Compliance
8.16.2.47 E EXITS AND WINDOWS		Compliance
8.16.2.47 F TOILET AND BATHING FACILITIES		Compliance
8.16.2.47 G SAFETY COMPLIANCE Deficiencies The program failed to conduct a fire drill for the month(s) of November. Regulation: 8.16.2.47G(2) Corrective Action Plan A monthly fire drill will be held and recorded. Date to be Completed: 02/17/2017		Non-compliance
8.16.2.47 H SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES		Compliance
8.16.2.47 G, I PETS		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.

MP 930

Alma Witt

01/18/2017

01/18/2017

Surveyor: Mark Prizzi

Date

Facility Rep: Jennifer Biddle

Date