

Center Name: Rosie Padilla		Address: 2713 Hurley Dr. NW Albuquerque, NM 87120			Phone: (505)836-2860		
License Number: 138734	Issue Date: 08/20/2016	Expiration Date: 08/19/2017	Type: 2 Star Family Child Care Home		Status: Licensed		
Capacity					Census		
Over Age 2: 2	Under Age 2: 2	Night Care: 0	Playground: 0	Over 2: 1	Under 2: 0		
Days and Hours of Operation							
	<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>	<u>Saturday</u>	<u>Sunday</u>
Opening Times:	07:00 AM	07:00 AM	07:00 AM	07:00 AM	07:00 AM	Closed	Closed
Closing Times:	05:00 PM	05:00 PM	05:00 PM	05:00 PM	05:00 PM		
# of Classrooms: 1	Purpose: Annual		Date: 06/05/2017		Time: 09:30		
Comments							

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

Licensure	
8.16.2.31 A LICENSING REQUIREMENTS	Not Inspected
8.16.2.31 B CAPACITY OF A HOME	Compliance
8.16.2.31 C INCIDENT REPORTING REQUIREMENTS	Not Inspected
Administrative Requirements	
8.16.2.32 A ADMINISTRATIVE RECORDS <u>Deficiencies</u> The licensee does not have on file the following: an up to date disaster preparedness plan approved annually by the licensing authority. Emergency plan needs to include; shelter in place and lockdown procedures. Regulation: 8.16.2.32A(1)-(5) <u>Corrective Action Plan</u> All required items will be on file for review. Date to be Completed: 07/05/2017	Non-compliance
8.16.2.32 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT	Not Inspected
8.16.2.32 C PARENT HANDBOOK <u>Deficiencies</u> The home's policies and procedures regarding the following need to be included: policies and procedures for expulsion of children. Regulation: 8.16.2.32C(1)(2) <u>Corrective Action Plan</u> A parent handbook with required general information and policies and procedures will be completed and distributed. Date to be Completed: 07/12/2017	Non-compliance
8.16.2.32 D CHILDREN'S RECORDS	Compliance
8.16.2.32 E PERSONNEL RECORDS	Non-compliance

Center Name: Rosie Padilla	License Number: 138734	Date: 06/05/2017
Administrative Requirements		
<p>Deficiencies The home does not have documentation of a background check within 5 years for care giver(s). Background check documents submitted to BACU today 6/5/17 via email. Fingerprints already completed. Corrected on site. Regulation: 8.16.2.32E(1)</p> <p>Corrective Action Plan Documentation of a background check and employment history verification for all staff members and all adults living in the home. A background check must be conducted at least once every five years on all required individuals. Background check documents submitted to BACU today 6/5/17 via email. Fingerprints already completed. Corrected on site. Date to be Completed: 06/05/2017</p>		
8.16.2.32 F PERSONNEL HANDBOOK		Not Inspected
Personnel & Staffing		
8.16.2.33 A PERSONNEL AND STAFFING REQUIREMENTS		Compliance
8.16.2.33 B STAFF QUALIFICATIONS AND TRAINING		Compliance
Services & Care of Children		
8.16.2.34 A GUIDANCE		Compliance
8.16.2.34 B NAPS OR REST PERIOD		Compliance
<p>8.16.2.34 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLERS</p> <p>Deficiencies The home does not have a crib for each infant in care that is in good repair and that meets federal standards. The home has 1 cribs that meet requirements and 1 are needed. Regulation: 8.16.2.34C(I)(2)</p> <p>Corrective Action Plan An adequate number of suitable cribs will be provided. Date to be Completed: 07/05/2017</p>		Non-compliance
8.16.2.34 D DIAPERING AND TOILETING		Compliance
8.16.2.34 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL NEEDS		Compliance
8.16.2.34 F NIGHT CARE		N/A
8.16.2.34 G PHYSICAL ENVIRONMENT		Compliance
8.16.2.34 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT		Compliance
8.16.2.34 I EQUIPMENT AND PROGRAM		Compliance
8.16.2.34 J OUTDOOR PLAY		Compliance
8.16.2.34 K SWIMMING, WADING AND WATER		Not Inspected
8.16.2.34 L FIELD TRIPS		Not Inspected
Food Service		
8.16.2.35 B MEALS AND SNACKS		Compliance
8.16.2.35 C MENUS		Non-compliance

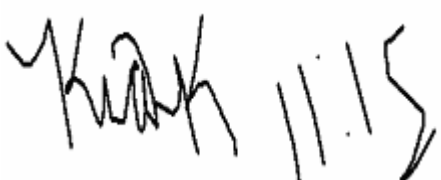
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Food Service		
<p><u>Deficiencies</u> Weekly menus are not posted at least one week in advance. Regulation: 8.16.2.35C(1)</p> <p><u>Corrective Action Plan</u> A dated weekly menu will be posted in an area visible to parents. Menus shall be posted at least one week in advance, in a conspicuous place, for review by parents, educators and children. Date to be Completed: 07/05/2017</p>		
8.16.2.35 D KITCHENS		Compliance
8.16.2.35 E MEAL TIMES		Compliance
Health & Safety Requirements		
8.16.2.36 A HYGIENE		Compliance
<p>8.16.2.36 B FIRST AID REQUIREMENTS</p> <p><u>Deficiencies</u> The home does not keep the first-aid kit and first-aid manual together in the home. Regulation: 8.16.2.36B(1)</p> <p><u>Corrective Action Plan</u> The first-aid kit and first-aid manual will be kept together. Date to be Completed: 07/05/2017</p> <p><u>Deficiencies</u> The home's first aid kit does not contain soap. Regulation: 8.16.2.36B(1)</p> <p><u>Corrective Action Plan</u> Missing items will be added to the first-aid kit and replaced as used. Date to be Completed: 07/05/2017</p>		Non-compliance
8.16.2.36 C MEDICATION		N/A
8.16.2.36 D ILLNESS AND NOTIFIABLE DISEASES		Compliance
8.16.2.37 A-G TRANSPORTATION REQUIREMENTS FOR HOMES		N/A
Buildings, Grounds & Safety		
<p>8.16.2.38 A HOUSEKEEPING</p> <p><u>Deficiencies</u> The equipment are not in good repair as evidenced by the diaper changing mat is torn. Regulation: 8.16.2.38A(1)</p> <p><u>Corrective Action Plan</u> Repairs will be completed and a system for routine inspection of the home and premises will be established. Date to be Completed: 07/05/2017</p>		Non-compliance
8.16.2.38 B PEST CONTROL		Compliance
8.16.2.38 C MECHANICAL SYSTEMS		Compliance
8.16.2.38 D LIGHTING, LIGHTING FIXTURES AND ELECTRICAL		Compliance
8.16.2.38 E EXITS		Compliance

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Buildings, Grounds & Safety

8.16.2.38 F TOILET AND BATHING FACILITIES	Compliance
8.16.2.38 G SAFETY COMPLIANCE	Compliance
8.16.2.38 H SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES	Compliance
8.16.2.38 I 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.



06/05/2017



06/05/2017

Surveyor: Kia Kennedy	Date	Facility Rep: Rosie Padilla	Date
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