

Center Name:			Address:				Phone:	Phone:	
Rosie Padilla			2713 Hurley Dr. NW Albuquerque, NM 87120				(505)836-2	2860	
License Number:	Issue Date:	Expiration I	Date:	Type:		Status:			
138734	08/20/2017	08/19/2018	2 Star Family Child Care Home		Licensed				
Capacity				•		Cei	nsus		
Over Age 2: 2	Under Age 2:	2 Night	Care:	0 P	layground: 0	Ove	er 2:	0 Un	der 2: 1
Days and Hours of	Operation								
	Monday	Tuesda	<u>y</u> <u>W</u>	<u>/ednesday</u>	<u>Thursday</u>	<u>Fri</u>	<u>day</u>	<u>Saturday</u>	<u>Sunday</u>
Opening Times:	07:00 AM	07:00 A	M (07:00 AM	07:00 AM	07:0	0 AM	Closed	Closed
Closing Times	06:00 PM	06:00 PI	M (06:00 PM	06:00 PM	06:00 PM			
# of Classrooms:	ı	Purpose:			Date:			Time:	
1	5	Semi-Annual			12/15/2017			11:05 AM	
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	Compliance			
8.16.2.32 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT	Not Inspected			
8.16.2.32 C PARENT HANDBOOK	Not Inspected			
8.16.2.32 D CHILDREN'S RECORDS	Compliance			
8.16.2.32 E PERSONNEL RECORDS	Compliance			
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			
8.16.2.34 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLERS	Non-compliance			

Survey Report Form Page 1 of 3

Center Name:	License Number:	Date:
Rosie Padilla	138734	12/15/2017

Services & Care of Children

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 0 cribs that meet requirements and 1 are needed.

Regulation: 8.16.2.34C(I)(2)

Corrective Action Plan

An adequate number of suitable cribs will be provided.

Date to be Completed: 01/15/2018	
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	Not Inspected
8.16.2.34 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT	Not Inspected
8.16.2.34 I EQUIPMENT AND PROGRAM	Compliance
8.16.2.34 J OUTDOOR PLAY Deficiencies The fall zone underneath the slide is not adequate as evidenced by the resilient material is not deep enough. Regulation: 8.16.2.34J(3) Corrective Action Plan A resilient surface will be provided beneath the play equipment and a schedule will be devised to provide routine checks. Date to be Completed: 01/15/2018	Non-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	Compliance
8.16.2.35 D KITCHENS Deficiencies The home's freezer does not have a working internal thermometer. Regulation: 8.16.2.35D(7) Corrective Action Plan A working internal thermometer will be obtained. Date to be Completed: 01/15/2018	Non-compliance
8.16.2.35 E MEAL TIMES	Compliance
Health & Safety Requirements	
8.16.2.36 A HYGIENE	Compliance
8.16.2.36 B FIRST AID REQUIREMENTS	Not Inspected
8.16.2.36 C MEDICATION	Not Inspected
	Page 2 of 6

Survey Report Form Page 2 of 3

Center Name: Rosie Padilla	License Number:	Date: 12/15/2017			
Health & Safety Re		1 1 1 1 1 1 1			
8.16.2.36 D ILLNESS AND NOTIFIABLE DISEASES	quirements		Compliance		
8.16.2.37 A-G TRANSPORTATION REQUIREMENTS FOR HOMES			Not Inspected		
Buildings, Grounds & Safety					
8.16.2.38 A HOUSEKEEPING	•		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		
8.16.2.38 F TOILET AND BATHING FACILITIES			Compliance		
8.16.2.38 G SAFETY COMPLIANCE			Non-compliance		
Deficiencies The home's fire extinguisher does not have a tag with a date verifying ye extinguishers tagged Nov.2016 Regulation: 8.16.2.38G(2) Corrective Action Plan The fire extinguisher will be inspected and have an official tag noting the Date to be Completed: 01/15/2018 Deficiencies The home failed to conduct a fire drill for the month(s) of July; August 20 Regulation: 8.16.2.38G(3) Corrective Action Plan A monthly fire drill will be held and recorded. Date to be Completed: 01/15/2018	date of inspection .				
8.16.2.38 H SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS	S AND CONTROLLED SUBSTAI	NCES	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.

2

12/15/2017

Date

Facility Rep:Rosie Padilla

12/15/2017

Date

Page 3 of 3

Survey Report Form