

Center Name: Address: Phone: 454 Coronado (505)991-2790 Safe Site @ Raymond Gabaldon Elementary Los Lunas, NM 87031 License Number: Issue Date: **Expiration Date:** Type: Status: 161292 12/4/2016 12/3/2017 2 Star Child Care Center Licensed Capacity Census Over Age 2: 94 Under Age 2: 0 Night Care: 0 Playground: 94 Over 2: 19 Under 2: **Days and Hours of Operation Morning Monday** <u>Tuesday</u> Wednesday Thursday **Friday** Saturday Sunday Closed 06:00 AM 06:00 AM 06:00 AM 06:00 AM 06:00 AM Closed Opening Times: 07:30 AM 07:30 AM 07:30 AM 07:30 AM 07:30 AM Closing Times: <u>Afternoon</u> **Monday** <u>Tuesday</u> Wednesday Thursday <u>Friday</u> Saturday Sunday 02:30 PM 02:30 PM 02:30 PM 02:30 PM 02:30 PM Opening Times: 06:00 PM 06:00 PM 06:00 PM 06:00 PM 06:00 PM Closing Times: Date: Time: # of Classrooms: Purpose: Annual 01/05/2017 08:28 AM Comments Paper survey dated 10/5/16

A SURVEY OF YOUR FACILITY HAS BEEN MADE AND YOU ARE NOTIFIED OF NON-COMPLIANCE OF THE REGULATIONS AS NOTE	D BELOW:	
Licensure		
8.16.2.40 A LICENSING REQUIREMENTS	Non-compliance	
Deficiencies The program did not submit a new application to the licensing authority before changing director.  Regulation: 8.16.2.40A(2)  Corrective Action Plan Submit a new application to the license authority.		
Date to be Completed: 11/04/2016  8.16.2.40 B CAPACITY OF A PROGRAM	Compliance	
8.16.2.40 C, D INCIDENT REPORTING REQUIREMENTS	Not Inspected	
Administrative Requirements		
8.16.2.41 A ADMINISTRATION RECORDS	Non-compliance	
<u>Deficiencies</u> The program failed to display in a prominent place the dated weekly menus for meals and snacks; last inspection/survey.  Regulation: 8.16.2.41A		
Corrective Action Plan The program will post the missing item(s).  Date to be Completed: 11/04/2016		
8.16.2.41 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT	Compliance	
8.16.2.41 C PARENT HANDBOOK	Non-compliance	

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 01/05/2017

## **Administrative Requirements**

#### **Deficiencies**

The program did not have a parent handbook that included policies and procedures. The program's policies and procedures regarding the following need to be included: expulsion policy.

**Regulation:** 8.16.2.41C(2)(c)

#### **Corrective Action Plan**

A parent handbook with required general information and program policies and procedures will be completed and distributed.

8.16.2.41 D, 8.16.2.42 D CHILDREN'S RECORDS

Compliance

#### 8.16.2.41 E PERSONNEL RECORDS

Date to be Completed: 11/04/2016

Non-compliance

#### **Deficiencies**

From the review of staff records, it was determined that 1 out of 2 staff records does/do not include a background check on site. See Staff Records 8.16.2.41 form for staff with this missing information.

**Regulation:** 8.16.2.41E(1)(e)

## **Corrective Action Plan**

The program will obtain documentation of a background check.

Date to be Completed: 10/05/2016

#### **Deficiencies**

From the review of staff records, it was determined that 1 out of 2 staff, including substitutes and volunteers who have direct contact with the children, does/do not have a complete file as required in 8.16.2.42E. See Staff Records 8.16.2.41 form for staff with an incomplete file. File was at main location

**Regulation:** 8.16.2.41E(1)

### **Corrective Action Plan**

The program will complete a file for each staff including substitutes and volunteers .

Date to be Completed: 11/04/2016

# **Deficiencies**

From the review of staff records, it was determined that 1 out of 2 staff records does/do not include documentation of first-aid and cardiopulmonary resuscitation training onsite. See Staff Records 8.16.2.41form 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: 11/04/2016

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## **Administrative Requirements**

## **Deficiencies**

From the review of staff records, it was determined that 2 out of 2 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 8.16.2.41form 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: 11/04/2016

Date to be Completed: 11/04/2016	
8.16.2.41 F PERSONNEL HANDBOOK	Compliance
Personnel & Staffing	
8.16.2.42 A PERSONNEL AND STAFFING REQUIREMENTS	Compliance
8.16.2.42 B STAFF QUALIFICATIONS	Compliance
8.16.2.42 C TRAINING	Compliance
Services & Care of Children	
8.16.2.43 A GUIDANCE	Compliance
8.16.2.43 B PHYSICAL ENVIRONMENT	Compliance
8.16.2.43 C SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT	Compliance
8.16.2.43 D EQUIPMENT AND PROGRAM	Compliance
8.16.2.43 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL NEEDS	Compliance
8.16.2.43 G SWIMMING, WADING AND WATER	N/A
8.16.2.43 H FIELD TRIPS	Not Inspected
8.16.2.43 F OUTDOOR PLAY AREAS	Compliance
Food Service	'
8.16.2.44 B MEALS AND SNACKS	Non-compliance
<u>Deficiencies</u>	
Water was not freely available to the children.	
<b>Regulation:</b> 8.16.2.44B(6)	
Corrective Action Plan	
The program will make water freely available to the children.	
Date to be Completed: 11/04/2016	
8.16.2.44 C KITCHENS	Compliance
Health & Safety Requirements	
8.16.2.45 A HYGIENE	Compliance
8.16.2.45 B FIRST AID REQUIREMENTS	Non-compliance

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# **Health & Safety Requirements**

# **Deficiencies**

The program does not keep the first-aid kit and first-aid manual together in the program.

**Regulation:** 8.16.2.45B(2)

## **Corrective Action Plan**

The first-aid kit and first-aid manual will be kept together.

Date to be Completed: 11/04/2016	
8.16.2.45 C MEDICATION	Not Inspected
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	Non-compliance
<u>Deficiencies</u>	
The equipment are not in good repair as evidenced by girls soap dispenser broken.	
<b>Regulation:</b> 8.16.2.47A(1)	
Corrective Action Plan	
Repairs will be completed and a system for routine inspection of the premises will be	
established.	
Date to be Completed: 11/04/2016	
8.16.2.47 B PEST CONTROL	Compliance
8.16.2.47 C MECHANICAL SYSTEMS	Non-compliance
<u>Deficiencies</u>	
Water coming from a faucet is not below 110 degrees Fahrenheit.	
<b>Regulation:</b> 8.16.2.47C(5)	
Corrective Action Plan	
The program will install a tempering valve ahead of the water-heater piping to ensure water	
temperature is below 110 degrees Fahrenheit.	
Date to be Completed: 11/04/2016	
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	Non-compliance
<u>Deficiencies</u>	
The program failed to conduct a fire drill for the month(s) of August; September.	
<b>Regulation:</b> 8.16.2.47G(2)	
Corrective Action Plan	
A monthly fire drill will be held and recorded.	
Date to be Completed: 11/04/2016	

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## **Buildings, Grounds & Safety**

## **Deficiencies**

The program does not have verification of an annual fire inspection from the fire authority having jurisdiction.

**Regulation:** 8.16.2.47G(3)

## **Corrective Action Plan**

An annual fire inspection will be requested from the fire authority having jurisdiction over the program.

Date to be Completed: 11/04/2016

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.

Nρ

on file

01/05/2017 01/05/2017

Surveyor:Mark Prizzi Date Facility Rep:Marissa Candelaria Date

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