

Center Name: San Juan College CDC			Address: 4601 College Blvd. Farmington, NM 87402			Phone: (505)566-3383		
License Number: 11011	Issue Date: 04/6/2017	Expiration Date: 04/5/2018	Type: 5 Star FOCUS Child Care Center			Status: Licensed		
Capacity Over Age 2: 70 Under Age 2: 29 Night Care: 0 Playground: 83						Census Over 2: 52 Under 2: 21		
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:	08:00 AM	08:00 AM	08:00 AM	08:00 AM	08:00 AM	Closed	Closed	
Closing Times:	05:30 PM	05:30 PM	05:30 PM	05:30 PM	05:30 PM			
# of Classrooms: 7		Purpose: Semi-Annual		Date: 11/17/2017		Time: 02:05 PM		
Comments								


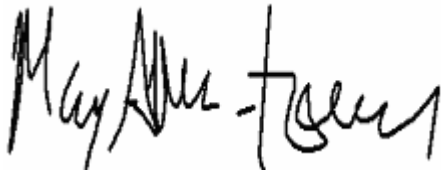
A SURVEY OF YOUR FACILITY HAS BEEN MADE AND YOU ARE NOTIFIED OF NON-COMPLIANCE OF THE REGULATIONS AS NOTED BELOW:

Licensure	
8.16.2.11 A TYPES OF LICENSES	N/A
8.16.2.11 B RENEWAL OF LICENSE	N/A
8.16.2.11 D NON-TRANSFERABLE RESTRICTIONS OF LICENSE	N/A
8.16.2.12 A, K, M LICENSING ACTIONS AND ADMINISTRATIVE APPEALS	N/A
8.16.2.17 E, F SURVEYS FOR CHILD CARE FACILITIES	Compliance
8.16.2.18 D COMPLAINTS	N/A
8.16.2.21 A LICENSING REQUIREMENTS	Compliance
8.16.2.21 B CAPACITY OF CENTERS	Compliance
8.16.2.21 C INCIDENT REPORTING REQUIREMENTS	N/A
Administrative Requirements	
8.16.2.22 A ADMINISTRATION RECORDS	Compliance
8.16.2.22 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT	Compliance
8.16.2.22 C POLICY AND PROCEDURES	Compliance
8.16.2.22 D FAMILY HANDBOOK	Compliance
8.16.2.22 E CHILDREN'S RECORDS	Non-compliance

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Administrative Requirements		
<p><u>Deficiencies</u> Of the 14 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.</p> <p>Regulation: 8.16.2.22E(1)(e)</p> <p><u>Corrective Action Plan</u> 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.</p> <p>Date to be Completed: 12/18/2017</p>		
8.16.2.22 F PERSONNEL RECORDS	Compliance	
8.16.2.22 G PERSONNEL HANDBOOK	Compliance	
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	Compliance	
8.16.2.24 B NAPS OR REST PERIOD	Compliance	
8.16.2.24 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLERS	Compliance	
8.16.2.24 D DIAPERING AND TOILETING	Compliance	
8.16.2.24 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL NEEDS	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	N/A	
8.16.2.24 L FIELD TRIPS	Compliance	
Food Service		
8.16.2.25 B MEALS AND SNACKS	Not Inspected	
8.16.2.25 C MENUS	Compliance	
8.16.2.25 D KITCHENS	Compliance	
8.16.2.25 E MEAL TIMES	Not Inspected	
Health & Safety Requirements		
8.16.2.26 A HYGIENE	Compliance	

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Health & Safety Requirements		
8.16.2.26 B FIRST AID REQUIREMENTS	Compliance	
8.16.2.26 C MEDICATION	Compliance	
8.16.2.27 A-D ILLNESS REQUIREMENTS FOR CENTERS	Compliance	
8.16.2.28 A-H TRANSPORTATION REQUIREMENTS FOR CENTERS	N/A	
Buildings, Grounds & Safety		
8.16.2.29 A HOUSEKEEPING <u>Deficiencies</u> The Fixtures are not in good repair as evidenced by water stain panels.Pre II has loose cabinet doors. Regulation: 8.16.2.29A(1) <u>Corrective Action Plan</u> Repairs will be completed and a system for routine inspection of the center and premises will be established. Date to be Completed: 12/18/2017	Non-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	Compliance	
8.16.2.29 H SAFETY COMPLIANCE <u>Deficiencies</u> The center failed to conduct a fire drill for the month(s) of June; July. Regulation: 8.16.2.29H(2) <u>Corrective Action Plan</u> A monthly fire drill will be held and recorded. Date to be Completed: 11/17/2017	Non-compliance	
8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES	Compliance	
8.16.2.29 J 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.

 11/17/2017	 11/17/2017		
Surveyor: Peggy Waconda	Date	Facility Rep: Mary Schumacher Hoerner	Date