

Center Name: Southwest Child Care Inc.			Address: 4802 Wyoming N. E. Albuquerque, NM 87111				Phone: (505)296-3121		
License Number:	License Number: Issue Date: Expiration Da		Date:	ate: Type: Status:			•		
53018	08/20/2016	08/19/2017	5 Star FOCUS Child Care Center Licensed		Licensed				
Capacity				•		Cei	nsus		
Over Age 2: 101	Under Age 2:	39 Night	Care:	0 P	layground: 88	Ove	er 2: 5	4 Und	der 2: 11
Days and Hours of	Operation								
	<u>Monday</u>	<u>Tuesda</u>	ı <u>y</u> W	/ednesday	<u>Thursday</u>	<u>Fri</u>	<u>day</u>	<u>Saturday</u>	<u>Sunday</u>
Opening Times	6:	6:		6:	6:	(3:	Closed	Closed
Closing Times	: 08:00 PM	08:00 PI	M (08:00 PM	08:00 PM	08:0	0 PM		
# of Classrooms:		urpose:			Date: 06/01/2017			' ime: 0:00 AM	
Comments Provided Resource	Materials				•		•		

Provided Resource Materials				
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	Not Inspected			
8.16.2.22 C POLICY AND PROCEDURES	Compliance			
8.16.2.22 D FAMILY HANDBOOK	Not Inspected			
8.16.2.22 E CHILDREN'S RECORDS	Non-compliance			

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Administrative Requirements

Deficiencies

Of the 15 children's records reviewed, 1 is/are missing the name and telephone number of two people in the local area to contact in an emergency when a parent or guardian cannot be reached. See Children's Records 8.16.2.22 form for the child(ren) with missing information.

Regulation: 8.16.2.22E(2)(b)

Corrective Action Plan

Parents will be advised to review and add missing information. The center will review all children's records to ensure up-to-date emergency contact information is on file.

Date to be Completed: 07/03/2017

Date to be Completed: 07/03/2017	
8.16.2.22 F PERSONNEL RECORDS	Non-compliance
<u>Deficiencies</u>	
The center failed to have 4 out of 25 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. See Staff Records 8.16.2.22 form for staff with this missing information.	
Regulation: 8.16.2.22F(1)(f)	
Corrective Action Plan	
The center will put processes in place to ensure that all care giving staff sign annual statements of non-conviction.	
Date to be Completed: 07/03/2017	
8.16.2.22 G PERSONNEL HANDBOOK	Not Inspected
Personnel & Staffing	
8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS	Compliance
8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING	Non-compliance
<u>Deficiencies</u>	
Educators did not complete the following training within 3-months: Health and Safety Training	
Regulation: 8.16.2.23B(2)(b)	
Corrective Action Plan	
All educators, regardless of the number of hours per week, will complete the above listed training.	
The following staff members need to complete the required training:	
Date to be Completed: 07/03/2017	
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

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Services & Care o	f Children			
8.16.2.24 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT			Compliance	
8.16.2.24 I EQUIPMENT AND PROGRAM Deficiencies The center does not provide children in the Preschool-Time travel room(s) sufficient materials		Non-compliance	
for indoor activities so that at any one time each child can be individually center has empty containers. Regulation: 8.16.2.24I(4)	,			
Corrective Action Plan Additional materials will be obtained. Date to be Completed: 07/03/2017				
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			N/A	
Food Servi	ice	,		
8.16.2.25 B MEALS AND SNACKS			Compliance	
8.16.2.25 C MENUS			Compliance	
8.16.2.25 D KITCHENS			Compliance	
8.16.2.25 E MEAL TIMES			Compliance	
Health & Safety Re	quirements			
8.16.2.26 A HYGIENE			Compliance	
8.16.2.26 B FIRST AID REQUIREMENTS			Non-compliance	
<u>Deficiencies</u> The center does not have on duty all educators currently certified in first cardiopulmonary resuscitation (CPR). Regulation: 8.16.2.26B(1)	aid and			
Corrective Action Plan All educators must be certified in first aid and cardiopulmonary resuscita Date to be Completed: 07/03/2017	tion (CPR).			
8.16.2.26 C MEDICATION			N/A	
8.16.2.27 A-D ILLNESS REQUIREMENTS FOR CENTERS			N/A	
8.16.2.28 A-H TRANSPORTATION REQUIREMENTS FOR CENTERS			Compliance	
Buildings, Grounds & Safety				
8.16.2.29 A HOUSEKEEPING			Non-compliance	
<u>Deficiencies</u> The premises in the boys restroom are not clean as evidenced by there Regulation: 8.16.2.29A(1)	is paper in ceiling			
Corrective Action Plan Cleaning will be completed and a schedule for routine cleaning will be es Date to be Completed: 07/03/2017	stablished.			
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Buildings, Grounds & Safety

Deficiencies

The Equipment are not in good repair as evidenced by battery operated Leap Frog is inoperable (Camilions)

Regulation: 8.16.2.29A(1)

Corrective Action Plan

Repairs will be completed and a system for routine inspection of the center and premises will be established.(

Date to be Completed: 07/03/2017

Deficiencies

The equipment in the cafeteria are not clean as evidenced by green pillow in science are is stained.

Regulation: 8.16.2.29A(1)

Corrective Action Plan

Cleaning will be completed and a schedule for routine cleaning will be established.

Date to be Completed: 07/03/2017

Deficiencies

The Equipment are not in good repair as evidenced by steering wheel is Cozy Coop is missing.(1)

Regulation: 8.16.2.29A(1)

Corrective Action Plan

Repairs will be completed and a system for routine inspection of the center and premises will be established.

Date to be Completed: 07/03/2017

Deficiencies

The Premises are not in good repair as evidenced by cement slab is chipped on edges.

Regulation: 8.16.2.29A(1)

Corrective Action Plan

Repairs will be completed and a system for routine inspection of the center and premises will be established.

Date to be Completed: 07/03/2017

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	Compliance
8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES	Compliance
8.16.2.29 J PETS	N/A

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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.

06/01/2017

06/01/2017

Date Facility Rep:Sondra Carpenter

Date

Surveyor: Helen Waldorf