



Facility

Name: *Sow N Seed* **License Number:** *114421*
Address: *323 Main St., Los Lunas, NM 87031*
Phone: *5055650653* **Fax:** **E-mail:** *n/a*

License Information

Type: *4 Star FOCUS Child Care Center* **Status:** *Licensed* **Issue Date:** *12/01/2018* **Expiration Date:** *05/04/2019*

Capacity

Over Age 2: *25* **Under Age 2:** *5* **Night Care:** **Playground:** *30*
Square Footage: *0*

Census

Over 2: *18* **Under 2:** *4*

Classrooms

Number of Classrooms: *3*

Days and Hours of Operation

Monday <i>6:30 AM - 6:00 PM</i>	Tuesday <i>6:30 AM - 6:00 PM</i>	Wednesday <i>6:30 AM - 6:00 PM</i>	Thursday <i>6:30 AM - 6:00 PM</i>	Friday <i>6:30 AM - 6:00 PM</i>
Saturday <i>Closed</i>	Sunday <i>Closed</i>			

Inspection

Date: *03/05/2019* **Time In:** *9:00 AM* **Time Out:** *12:30 PM* **Purpose:** *Annual*

Licensure

8.16.2.11 A Types of Licenses	<i>Not Inspected</i>
8.16.2.11 B Renewal of License	<i>Not Inspected</i>
8.16.2.11 D Non-transferable Restrictions of License	<i>Not Inspected</i>
8.16.2.12 A, K, M Licensing Actions and Administrative Appeals	<i>Not Inspected</i>
8.16.2.17 E, F Surveys for Child Care Facilities	<i>Not Inspected</i>
8.16.2.18 D Complaints	<i>Not Inspected</i>
8.16.2.21 A Licensing Requirements	<i>Compliance</i>

Licensure (*continued*)

8.16.2.21 B Capacity of Centers

Non-compliance

Center failed to post in an area visible to parent, staff and visitors the capacity for each classroom. Pre-K and infant/toddler room did not have capacities posted

Regulation: 8.16.2.21.B.

Date to be Completed: 04/04/2019

8.16.2.21 C Incident Reporting Requirements

Not Inspected

Administrative Requirements

8.16.2.22 A Administrative 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

Compliance

8.16.2.22 F Personnel Records

Non-compliance

From the review of staff records, it was determined that 1 out of 8 staff records do/does not include the staff's current and past duties and responsibilities. See Staff Records 8.16.2.22 form for staff with this missing information.

Corrective Action Plan

The center will add staff's current and past duties and responsibilities to the record.

Regulation: 8.16.2.22.F.1.c.

Date to be Completed: 04/04/2019

From the review of staff records, it was determined that 1 out of 8 staff records does/do not include the required Form I-9. See Staff Records 8.16.2.22 form for staff missing the form.

Corrective Action Plan

The center will obtain Form I-9s from all staff and maintain them in their personnel files.

Regulation: 8.16.2.22.F.1.q.

Date to be Completed: 04/04/2019

8.16.2.22 F Personnel Records (continued)**Non-compliance**

From the review of staff records, it was determined that 1 out of 8 staff records does/do not include a professional development plan based on seven areas of competency. See Staff Records 8.16.2.22 form for staff who need a current plan.

Corrective Action Plan

The center will have staff complete a professional development plan and sign the plan . The plan will be maintained on file.

Regulation: 8.16.2.22.F.1.n.

Date to be Completed: 04/04/2019

8.16.2.22 G Personnel Handbook**Compliance****Personnel & Staffing****8.16.2.23 A Personnel and Staffing Requirements****Non-compliance**

In the absence of the director, the center does not have a notice posted naming the person designated to be in charge. Center will posted updated chain of command.

Corrective Action Plan

In the director's absence, a person will be assigned to be in charge and a notice to that affect will be posted.

Regulation: 8.16.2.23.A.8.

Date to be Completed: 04/04/2019

8.16.2.23 B Staff Qualifications and Training**Non-compliance**

From the review of staff records, it was determined that 2 out of 8 new staff does/do not have documentation of orientation training. See Staff Records 8.16.2.22 form for staff with missing documentation. Not filled out completely.

Corrective Action Plan

Orientation will be completed and documented for staff noted; in the future, orientation will be completed prior to time staff begin working with children.

Regulation: 8.16.2.23.B.2.a.

Date to be Completed: 04/04/2019

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**

Services & Care of Children *(continued)*

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	Not Inspected

Food Service

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 Requirements

8.16.2.26 A Hygiene	Compliance
8.16.2.26 B First Aid Requirements	Non-compliance

The center does not have on duty all educators currently certified in first aid and cardiopulmonary resuscitation (CPR). 1 of 8 staff

Corrective Action Plan

All educators must be certified in first aid and cardiopulmonary resuscitation (CPR).

Regulation: 8.16.2.26.B.1.

Date to be Completed: 04/04/2019

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	Compliance

Buildings, Grounds & Safety

8.16.2.29 A Housekeeping	Compliance
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Buildings, Grounds & Safety (*continued*)

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	Non-compliance

The center does not have verification of an annual fire inspection from the fire authority having jurisdiction. Fire inspection expired on 2-2019

Corrective Action Plan

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

Regulation: 8.16.2.29.H.3.e.

Date to be Completed: 04/04/2019

8.16.2.29 H3(f)(i)(k) Safety Compliance	Compliance
8.16.2.29 J Pets	Compliance

Additional Comments

None

Signatures

Please Note: Per CYFD regulation NMAC 8.16.2, failure to comply with the corrective action plans noted above, may result in further action taken against the licensee.



Surveyor: Mark Prizzi



Facility Representative: Sandra Abeyta Ana Betancourt