

|   |                                  |  |  |                 |                                |                 |               |
|---|----------------------------------|--|--|-----------------|--------------------------------|-----------------|---------------|
| <b>Center Name:</b><br>Springstone Lrng at Paradise Hills   |                                  | <b>Address:</b><br>4598 Paradise Blvd. NW<br>Albuquerque, NM 87114 |  |                 | <b>Phone:</b><br>(505)897-8111 |                 |               |
| <b>License Number:</b><br>97763   | <b>Issue Date:</b><br>04/10/2017 | <b>Expiration Date:</b><br>04/9/2018                               | <b>Type:</b><br>5 Star FOCUS Child Care Center |                 | <b>Status:</b><br>Licensed     |                 |               |
| <b>Capacity</b>   |                                  |  |  |                 | <b>Census</b>                  |                 |               |
| Over Age 2:   | 120                              | Under Age 2:   | 59   | Night Care:     | 0                              | Playground:     | 179           |
|   |                                  | Over 2:  | 0  | Under 2:        | 0                              |                 |               |
| <b>Days and Hours of Operation</b>  |                                  |  |  |                 |                                |                 |               |
|   | <u>Monday</u>                    | <u>Tuesday</u>   | <u>Wednesday</u>                               | <u>Thursday</u> | <u>Friday</u>                  | <u>Saturday</u> | <u>Sunday</u> |
| Opening Times:  | 6:30                             | 6:30   | 6:30   | 6:30            | 6:30                           | Closed          | Closed        |
| Closing Times:  | 06:00 PM                         | 06:00 PM   | 06:00 PM                                       | 06:00 PM        | 06:00 PM                       |                 |               |
| <b># of Classrooms:</b><br>9  | <b>Purpose:</b><br>Follow-up     |  | <b>Date:</b><br>03/09/2018                     |                 | <b>Time:</b><br>08:40 AM       |                 |               |
| <b>Comments</b><br>Deficiencies cited on Annual have been corrected. Corrections submitted via fax 2/22/18. |                                  |  |  |                 |                                |                 |               |

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               | N/A           |
| 8.16.2.18 D COMPLAINTS   | N/A           |
| 8.16.2.21 A LICENSING REQUIREMENTS                             | N/A           |
| 8.16.2.21 B CAPACITY OF CENTERS                                | N/A           |
| 8.16.2.21 C INCIDENT REPORTING REQUIREMENTS                    | N/A           |
| Administrative Requirements                                    |               |
| 8.16.2.22 A ADMINISTRATION RECORDS                             | Not Inspected |
| 8.16.2.22 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT       | Not Inspected |
| 8.16.2.22 C POLICY AND PROCEDURES                              | Not Inspected |
| 8.16.2.22 D FAMILY HANDBOOK                                    | Not Inspected |
| 8.16.2.22 E CHILDREN'S RECORDS                                 | Not Inspected |
| 8.16.2.22 F PERSONNEL RECORDS                                  | Not Inspected |
| 8.16.2.22 G PERSONNEL HANDBOOK                                 | Not Inspected |
| Personnel & Staffing   |               |
| 8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS                | Not Inspected |
| 8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING                  | Compliance    |
| 8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES                 | Not Inspected |

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| <b>Services &amp; Care of Children</b>  |                                 |                            |
| 8.16.2.24 A GUIDANCE  |                                 | Not Inspected              |
| 8.16.2.24 B NAPS OR REST PERIOD   |                                 | Not Inspected              |
| 8.16.2.24 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLERS                                |                                 | Not Inspected              |
| 8.16.2.24 D DIAPERING AND TOILETING   |                                 | Not Inspected              |
| 8.16.2.24 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL NEEDS                         |                                 | Not Inspected              |
| 8.16.2.24 F ADDITIONAL REQUIREMENTS FOR NIGHT CARE  |                                 | Not Inspected              |
| 8.16.2.24 G PHYSICAL ENVIRONMENT  |                                 | Not Inspected              |
| 8.16.2.24 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT   |                                 | Not Inspected              |
| 8.16.2.24 I EQUIPMENT AND PROGRAM   |                                 | Not Inspected              |
| 8.16.2.24 J OUTDOOR PLAY AREAS  |                                 | Not Inspected              |
| 8.16.2.24 K SWIMMING, WADING AND WATER  |                                 | Not Inspected              |
| 8.16.2.24 L FIELD TRIPS   |                                 | Not Inspected              |
| <b>Food Service</b>   |                                 |                            |
| 8.16.2.25 B MEALS AND SNACKS  |                                 | Not Inspected              |
| 8.16.2.25 C MENUS   |                                 | Not Inspected              |
| 8.16.2.25 D KITCHENS  |                                 | Not Inspected              |
| 8.16.2.25 E MEAL TIMES  |                                 | Not Inspected              |
| <b>Health &amp; Safety Requirements</b>   |                                 |                            |
| 8.16.2.26 A HYGIENE   |                                 | Not Inspected              |
| 8.16.2.26 B FIRST AID REQUIREMENTS  |                                 | Not Inspected              |
| 8.16.2.26 C MEDICATION  |                                 | Not Inspected              |
| 8.16.2.27 A-D ILLNESS REQUIREMENTS FOR CENTERS  |                                 | Not Inspected              |
| 8.16.2.28 A-H TRANSPORTATION REQUIREMENTS FOR CENTERS                                       |                                 | Not Inspected              |
| <b>Buildings, Grounds &amp; Safety</b>  |                                 |                            |
| 8.16.2.29 A HOUSEKEEPING  |                                 | Not Inspected              |
| 8.16.2.29 B PEST CONTROL  |                                 | Not Inspected              |
| 8.16.2.29 C MECHANICAL SYSTEMS  |                                 | Not Inspected              |
| 8.16.2.29 D WATER AND WASTE   |                                 | Not Inspected              |
| 8.16.2.29 E LIGHTING, LIGHTING FIXTURES AND ELECTRICAL                                      |                                 | Not Inspected              |
| 8.16.2.29 F EXITS AND WINDOWS   |                                 | Not Inspected              |
| 8.16.2.29 G TOILET AND BATHING FACILITIES   |                                 | Not Inspected              |
| 8.16.2.29 H SAFETY COMPLIANCE   |                                 | Not Inspected              |
| 8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES |                                 | Not Inspected              |
| 8.16.2.29 J PETS  |                                 | Not Inspected              |


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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.**



03/09/2018



03/09/2018

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|------------------------|------|--------------------------|------|
| Surveyor:Helen Waldorf | Date | Facility Rep:Norma Cantu | Date |
|------------------------|------|--------------------------|------|