Facility

Name: Steps Ahead Learning Center LLC License Number: 156493

Address: 3500 Indian School NE, Albuquerque, NM 87106

Phone: 5052662290 Fax: E-mail: n/a

License Information

Type: 2 Star + Child Care Status: Licensed Issue Date: 01/18/2018 Expiration Date:

Center 01/17/2019

Capacity

Over Age 2: 48 Under Age 2: 37 Night Care: 0 Playground: 43

Square Footage: 0

Census

Over 2: 24 Under 2: 12

Classrooms

Number of Classrooms: 4

Days and Hours of Operation

Monday Tuesday Wednesday Thursday Friday

Saturday Sunday
Closed Closed

Inspection

Licensure

8.16.2.11 A Types of Licenses

8.16.2.11 B Renewal of License

8.16.2.11 D Non-transferable Restrictions of License

8.16.2.12 A, K, M Licensing Actions and Administrative Appeals

8.16.2.17 E, F Surveys for Child Care Facilities

8.16.2.18 D Complaints

Not Inspected

Not Inspected

8.16.2.21 A Licensing Requirements

Non-compliance

The licensee did not obtain background checks on all staff members, educators, volunteers, and prospective staff as per the requirements outlined in the department's most current version of the Background Check and Employment History Verification provisions. An educator who has been an employed since 5-15-18 was not fingerprinted prior to employment. Educator will be allowed to return to work until fingerprinting is complete.

Corrective Action Plan

The licensee will obtain background checks on all staff members, volunteers, and prospective staff. A request for a background check must be submitted prior to a staff member's employment. A background check must be conducted in accordance with 8.8.3 NMAC at least once every five years on all required individuals.

Regulation: 8.16.2.21.A.2.

Date to be Completed: 07/06/2018

8.16.2.21 B Capacity of Centers

Non-compliance

The center failed to post classroom group sizes in an area of the room that is easily visible to parents, staff and visitors in the school age room.

Corrective Action Plan

The center will post the capacity in an area of the room that is easily visible to parents, staff and visitors.

Regulation: 8.16.2.21.B.3.c.

Date to be Completed: 07/06/2018

8.16.2.21 C Incident Reporting Requirements

Not Inspected

Administrative Requirements

8.16.2.22 A Administrative Records

Non-compliance

The center failed to display in a prominent place that is readily visible to parents, staff and visitors the dated weekly menus for meals and snacks.

Corrective Action Plan

The center will post the missing item.

(continued)

Regulation: 8.16.2.22.A. Date to be Completed: 07/06/2018

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

Compliance

8.16.2.22 F Personnel Records

Non-compliance

From the review of staff records, it was determined that 1 out of 3 staff records do/does not include the staffs 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 staffs current and past duties and responsibilities to the record.

Regulation: 8.16.2.22.F.1.c.

Date to be Completed: 07/06/2018

The center failed to have 1 out of 3 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.

Corrective Action Plan

The center will put processes in place to ensure that all care giving staff sign annual statements of non-conviction.

Regulation: 8.16.2.22.F.1.f.

Date to be Completed: 07/06/2018

From the review of staff records, it was determined that 1 out of 3 staff records does/do not include documentation of training by date, time, hours and area of competency or a training certificate. See Staff Records 8.16.2.22 form for staff with missing documentation.

Corrective Action Plan

The center will obtain verification of all training and retain on file.

Regulation: 8.16.2.22.F.1.h.

Date to be Completed: 07/06/2018

8.16.2.22 F Personnel Records (continued)

Non-compliance

From the review of staff records, it was determined that 2 out of 3 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. Both were not dated.

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: 07/06/2018

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

From the review of staff records, it was determined that 3 out of 3 new staff does/do not have documentation of orientation training. See Staff Records 8.16.2.22 form for staff with missing documentation. Were left blank.

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: 07/06/2018

8.16.2.23 C Staff/Child Ratios and Group Sizes

Compliance

Services & Care of Children

0.16.2.24.4.6.14	C!:
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

Services & Care of Children (continued)

8.16.2.24 I Equipment and Program

Non-compliance

The center does not provide children in the 2 yr. old class room(s) sufficient materials for indoor activities so that at any one time each child can be individually involved. Sensory table empty

Corrective Action Plan

Additional [] will be obtained.

Regulation: 8.16.2.24.I.4.

Date to be Completed: 07/06/2018

8.16.2.24 J Outdoor Play Areas

Compliance

8.16.2.24 K Swimming, Wadding 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

Compliance

8.16.2.26 C Medication

Non-compliance

The center does not have the written permission of parents or guardians, directions from the prescribing physician to administer medication.

Corrective Action Plan

Written permission and instructions for administration from the prescribing physician will be obtained from parents/guardians prior to administering any prescription or non-prescription medication.

Regulation: 8.16.2.26.C.2.

Date to be Completed: 07/06/2018

8.16.2.27 A-D Illness Requirements for Centers

Compliance

8.16.2.28 A-H Transportation Requirements for Centers

Not Inspected

Buildings, Grounds & Safety

8.16.2.29 A Housekeeping

Non-compliance

The small playground has a heavy accumulation of trash, an old clothes dryer.

Corrective Action Plan

A routine will be established to assess all areas of the premises for cleanliness, safety and potential hazards.

Regulation: 8.16.2.29.A.1. Date to be Completed: 07/06/2018

The premises in the classrooms are not safe in that rugs are curled up, tripping hazard

•

Corrective Action Plan

The safety violation will be corrected and a system for routine safety inspection developed.

Regulation: 8.16.2.29.A.1.

Date to be Completed: 07/06/2018

The Equipment are not in good repair as evidenced by play sink and faucet is missing in the new room.

Corrective Action Plan

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

Regulation: 8.16.2.29.A.1.

Date to be Completed: 07/06/2018

The Equipment are not in good repair as evidenced by torn sleeping mats.

Corrective Action Plan

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

Regulation: 8.16.2.29.A.1.

Date to be Completed: 07/06/2018

The premises in the school age room are not safe in that a shelf used for dress up is not secure.

Corrective Action Plan

The safety violation will be corrected and a system for routine safety inspection developed.

Regulation: 8.16.2.29.A.1.

Date to be Completed: 07/06/2018

8.16.2.29 B Pest Control

Compliance

8.16.2.29 C Mechanical Systems

Compliance

Buildings, Grounds & Safety (continued)

8.16.2.29 D Water and Waste

Compliance

8.16.2.29 E Lighting, Lighting Fixtures and Electrical

Non-compliance

The extension cord being used does not have a label showing it is U/L approved. In the school age room used for the fish tank

Corrective Action Plan

The item will be removed from the center.

Regulation: 8.16.2.29.E.3.a.

Date to be Completed: 07/06/2018

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 failed to conduct a fire drill for the month(s) of January, February, May. Center did emergency drills instead of fire drills, Fire drills will be done monthly

Regulation: 8.16.2.29.H.2.

Date to be Completed: 07/06/2018

An evacuation plan is not posted in the 3 yr. old class room(s) used by children. Evacuation plan also missing a room, room was added a few years ago.

Corrective Action Plan

An evacuation plan will be posted in each room used by children.

Regulation: 8.16.2.29.H.3.f.

Date to be Completed: 07/06/2018

8.16.2.29 I Smoking, Firearms, Alcoholic Beverages, Illegal Drugs and Controlled Substances

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.

14

Surveyor: Mark Prizzi

Facility Representative: Barbara L Garcia