

<b>Center Name:</b> Sunset Mesa-South Campus		<b>Address:</b> 2900 Morris N.E. Albuquerque, NM 87112			<b>Phone:</b> (505)298-7626		
<b>License Number:</b> 109028	<b>Issue Date:</b> 08/29/2016	<b>Expiration Date:</b> 08/28/2017	<b>Type:</b> 2 Star Child Care Center		<b>Status:</b> Licensed		
<b>Capacity</b>					<b>Census</b>		
Over Age 2:	145	Under Age 2:	0	Night Care:	0	Playground:	145
						Over 2:	52
						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:	07:30 AM	07:30 AM	07:30 AM	07:30 AM	07:30 AM	Closed	Closed
Closing Times:	03:30 PM	03:30 PM	03:30 PM	03:30 PM	03:30 PM		
<b># of Classrooms:</b> 8	<b>Purpose:</b> Annual		<b>Date:</b> 06/21/2017		<b>Time:</b> 09:30 AM		
<b>Comments</b>							

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	Not Inspected
8.16.2.11 B RENEWAL OF LICENSE	Not Inspected
8.16.2.11 D NON-TRANSFERABLE RESTRICTIONS OF LICENSE	Not Inspected
8.16.2.12 A, K, M LICENSING ACTIONS AND ADMINISTRATIVE APPEALS	Not Inspected
8.16.2.17 E, F SURVEYS FOR CHILD CARE FACILITIES	Not Inspected
8.16.2.18 D COMPLAINTS	Not Inspected
8.16.2.21 A LICENSING REQUIREMENTS <u>Deficiencies</u> 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 . 3 of 19 staff are not background checked every 5 years. Regulation: 8.16.2.21A(2)  <u>Corrective Action Plan</u> 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. Date to be Completed: 07/21/2017	Non-compliance
8.16.2.21 B CAPACITY OF CENTERS	Non-compliance

<b>Center Name:</b> Sunset Mesa-South Campus	<b>License Number:</b> 109028	<b>Date:</b> 06/21/2017
<b>Licensure</b>		
<p><b><u>Deficiencies</u></b> The center failed to post state approved classroom group sizes in an area of the room that is easily visible to parents, staff and visitors. <b>Regulation:</b> 8.16.2.21B(3)(c)</p> <p><b><u>Corrective Action Plan</u></b> The center will post the capacity in an area of the room that is easily visible to parents, staff and visitors. <b>Date to be Completed:</b> 07/21/2017</p>		
<b>8.16.2.21 C INCIDENT REPORTING REQUIREMENTS</b>	Not Inspected	
<b>Administrative Requirements</b>		
<p><b>8.16.2.22 A ADMINISTRATION RECORDS</b></p> <p><b><u>Deficiencies</u></b> The center failed to display in a prominent place that is readily visible to parents, staff and visitors the most recent environmental health inspection report, report in binder is expired. <b>Regulation:</b> 8.16.2.22A</p> <p><b><u>Corrective Action Plan</u></b> The center will post the missing item. <b>Date to be Completed:</b> 07/21/2017</p>	Non-compliance	
<b>8.16.2.22 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT</b>	Compliance	
<p><b>8.16.2.22 C POLICY AND PROCEDURES</b></p> <p><b><u>Deficiencies</u></b> The center did not have available for review written policies and procedures covering expulsion of children. <b>Regulation:</b> 8.16.2.22C(1)-(8)</p> <p><b><u>Corrective Action Plan</u></b> The center will complete written policies and procedures for the missing area(s). <b>Date to be Completed:</b> 07/21/2017</p> <p><b><u>Deficiencies</u></b> (1) The program does not have an up to date emergency evacuation and disaster preparedness plan approved by the department which shall include steps for evacuation, relocation, shelter in place lock-down, communication, reunification with parents individual plans for children with special needs and children with chronic medical conditions, accommodations of infants and toddlers and continuity of operations <b>Regulation:</b> 8.16.2.22C(8)</p> <p><b><u>Corrective Action Plan</u></b> An emergency evacuation and disaster preparedness plan will be developed. <b>Date to be Completed:</b> 07/21/2017</p>	Non-compliance	
<b>8.16.2.22 D FAMILY HANDBOOK</b>	Compliance	
<b>8.16.2.22 E CHILDREN'S RECORDS</b>	Compliance	
<b>8.16.2.22 F PERSONNEL RECORDS</b>	Non-compliance	

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**Administrative Requirements**

**Deficiencies**

From the review of staff records, it was determined that 2 out of 19 staff records does/do not include a background check. See Staff Records 8.16.2.22 form for staff with this missing information.

**Regulation:** 8.16.2.22F(1)(e)

**Corrective Action Plan**

The center will obtain documentation of a background check.

**Date to be Completed:** 07/21/2017

**Deficiencies**

The center failed to have 2 out of 19 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:** 07/21/2017

**Deficiencies**

From the review of staff records, it was determined that 5 out of 19 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.

**Regulation:** 8.16.2.22F(1)(n)

**Corrective Action Plan**

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

**Date to be Completed:** 07/21/2017

<b>8.16.2.22 G PERSONNEL HANDBOOK</b>	Compliance
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**Personnel & Staffing**

<b>8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS</b>	Compliance
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<p><b>8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING</b></p> <p><b><u>Deficiencies</u></b></p> <p>Educators did not complete the following training within 3-months: first aid and cardiopulmonary resuscitation (CPR) certification, 2 of 19 staff</p> <p><b>Regulation:</b> 8.16.2.23B(2)(b)</p> <p><b><u>Corrective Action Plan</u></b></p> <p>All educators, regardless of the number of hours per week, will complete the above listed training.</p> <p>The following staff members need to complete the required training:</p> <p><b>Date to be Completed:</b> 07/21/2017</p>	Non-compliance
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### Personnel & Staffing

**Deficiencies**

From the review of staff records, it was determined that 1 out of 19 new staff does/do not have documentation of orientation training. See Staff Records 8.16.2.22 form for staff with missing documentation.

**Regulation:** 8.16.2.23B(2)(a)

**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.

**Date to be Completed:** 07/21/2017

**Deficiencies**

Educators did not complete the following training within 3-months: Health and Safety Training, 19 of 19 staff. Training available online at [www.newmexicokids.org](http://www.newmexicokids.org), top of the screen.

**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:** 07/21/2017

<b>8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES</b>	Compliance
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### Services & Care of Children

<b>8.16.2.24 A GUIDANCE</b>	Compliance
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<b>8.16.2.24 B NAPS OR REST PERIOD</b>	Compliance
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<b>8.16.2.24 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLERS</b>	N/A
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<b>8.16.2.24 D DIAPERING AND TOILETING</b>	N/A
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<b>8.16.2.24 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL NEEDS</b>	Compliance
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<b>8.16.2.24 F ADDITIONAL REQUIREMENTS FOR NIGHT CARE</b>	N/A
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<b>8.16.2.24 G PHYSICAL ENVIRONMENT</b>	Compliance
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<b>8.16.2.24 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT</b>	Compliance
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<b>8.16.2.24 I EQUIPMENT AND PROGRAM</b>	Compliance
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<b>8.16.2.24 J OUTDOOR PLAY AREAS</b>	Non-compliance
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**Deficiencies**

The facility's outdoor play area is not adequately enclosed as evidenced by fencing has openings large enough for a child to crawl or fall through.

**Regulation:** 8.16.2.24J(2)

**Corrective Action Plan**

A center will enclose the outdoor play area with a fence at least four feet high and with at least one latched gate available for an emergency exit.

**Date to be Completed:** 07/21/2017

<b>8.16.2.24 K SWIMMING, WADING AND WATER</b>	N/A
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<b>8.16.2.24 L FIELD TRIPS</b>	Not Inspected
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### Food Service

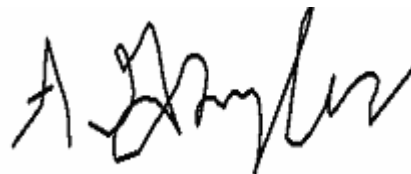
<b>Center Name:</b> Sunset Mesa-South Campus	<b>License Number:</b> 109028	<b>Date:</b> 06/21/2017
<b>Food Service</b>		
8.16.2.25 B MEALS AND SNACKS		Compliance
8.16.2.25 C MENUS		Compliance
8.16.2.25 D KITCHENS		Compliance
8.16.2.25 E MEAL TIMES		Compliance
<b>Health &amp; Safety Requirements</b>		
8.16.2.26 A HYGIENE		Compliance
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
<b>Buildings, Grounds &amp; Safety</b>		
8.16.2.29 A HOUSEKEEPING <b><u>Deficiencies</u></b> The premises in the classrooms are not safe in that mini blind cords are too low and accessible to children. <b>Regulation:</b> 8.16.2.29A(1) <b><u>Corrective Action Plan</u></b> The safety violation will be corrected and a system for routine safety inspection developed. <b>Date to be Completed:</b> 07/21/2017 <b><u>Deficiencies</u></b> The Equipment are not in good repair as evidenced by the basket ball rims screws have come loose, rim is tilting and could fall off. <b>Regulation:</b> 8.16.2.29A(1) <b><u>Corrective Action Plan</u></b> Repairs will be completed and a system for routine inspection of the center and premises will be established. <b>Date to be Completed:</b> 07/21/2017		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		Non-compliance

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<b>Buildings, Grounds &amp; Safety</b>		
<b>Deficiencies</b> The center failed to conduct an emergency preparedness practice drills for at least once a quarter. <b>Regulation:</b> 8.16.2.29H(1)		
<b>Corrective Action Plan</b> A center will conduct emergency preparedness practice drills at least quarterly beginning January of each calendar year. <b>Date to be Completed:</b> 07/21/2017		
<b>8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES</b>	Compliance	
<b>8.16.2.29 J PETS</b>	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.**



06/21/2017



06/21/2017

Surveyor: Mark Prizzi	Date	Facility Rep: Mary Helen Jordan	Date
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