

<b>Center Name:</b> Sunshine Kids		<b>Address:</b> 33 El Cerro Road Los Lunas, NM 87031			<b>Phone:</b> (505)565-1812		
<b>License Number:</b> 54731	<b>Issue Date:</b> 06/1/2017	<b>Expiration Date:</b> 09/12/2017	<b>Type:</b> 4 Star FOCUS Child Care Center		<b>Status:</b> Licensed		
<b>Capacity</b>					<b>Census</b>		
Over Age 2:	24	Under Age 2:	28	Night Care:	0	Playground:	52
		Over 2:	15	Under 2:	10		
<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:	06:00 AM	06:00 AM	06:00 AM	06:00 AM	06:00 AM	Closed	Closed
Closing Times:	06:00 PM	06:00 PM	06:00 PM	06:00 PM	06:00 PM		
<b># of Classrooms:</b> 4	<b>Purpose:</b> Annual		<b>Date:</b> 07/11/2017		<b>Time:</b> 09:00 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	Compliance
8.16.2.21 B CAPACITY OF CENTERS	Compliance
8.16.2.21 C INCIDENT REPORTING REQUIREMENTS	Not Inspected
Administrative Requirements	
8.16.2.22 A ADMINISTRATION RECORDS	Compliance
8.16.2.22 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT	Compliance
8.16.2.22 C POLICY AND PROCEDURES  <u><b>Deficiencies</b></u> 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)  <u><b>Corrective Action Plan</b></u> The center will complete written policies and procedures for the missing area(s).  <b>Date to be Completed:</b> 08/11/2017	Non-compliance

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**Administrative Requirements**

**Deficiencies**

- (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**

Regulation: 8.16.2.22C(8)

**Corrective Action Plan**

An emergency evacuation and disaster preparedness plan will be developed.

**Date to be Completed:** 08/11/2017

<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> <u><b>Deficiencies</b></u> From the review of staff records, it was determined that 1 out of 3 staff records does/do not include signed acknowledgement that the center's disaster preparedness plan and fire evacuation plan were reviewed. <b>Regulation:</b> 8.16.2.22F(1)(P)  <u><b>Corrective Action Plan</b></u> The center will have staff complete the required acknowledgement and will retain on file. <b>Date to be Completed:</b> 08/11/2017  <u><b>Deficiencies</b></u> 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. <b>Regulation:</b> 8.16.2.22F(1)(f)  <u><b>Corrective Action Plan</b></u> The center will put processes in place to ensure that all care giving staff sign annual statements of non-conviction. <b>Date to be Completed:</b> 08/11/2017	Non-compliance
<b>8.16.2.22 G PERSONNEL HANDBOOK</b>	Compliance

**Personnel & Staffing**

<b>8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS</b>	Compliance
<b>8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING</b>	Non-compliance

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### Personnel & Staffing

**Deficiencies**

From the review of staff records, it was determined that 1 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.

**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:** 08/11/2017

<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
<b>8.16.2.24 B NAPS OR REST PERIOD</b>	Compliance
<b>8.16.2.24 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLERS</b>	Compliance
<b>8.16.2.24 D DIAPERING AND TOILETING</b>	Compliance
<b>8.16.2.24 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL NEEDS</b>	Compliance
<b>8.16.2.24 F ADDITIONAL REQUIREMENTS FOR NIGHT CARE</b>	N/A
<b>8.16.2.24 G PHYSICAL ENVIRONMENT</b>	Compliance
<b>8.16.2.24 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT</b>	Compliance
<b>8.16.2.24 I EQUIPMENT AND PROGRAM</b>	Compliance
<b>8.16.2.24 J OUTDOOR PLAY AREAS</b>	Compliance
<b>8.16.2.24 K SWIMMING, WADING AND WATER</b>	N/A
<b>8.16.2.24 L FIELD TRIPS</b>	Not Inspected

### Food Service

<b>8.16.2.25 B MEALS AND SNACKS</b>	Compliance
<b>8.16.2.25 C MENUS</b>	Compliance
<b>8.16.2.25 D KITCHENS</b>	Compliance
<b>8.16.2.25 E MEAL TIMES</b>	Compliance

### Health & Safety Requirements

<b>8.16.2.26 A HYGIENE</b>	Compliance
<b>8.16.2.26 B FIRST AID REQUIREMENTS</b>	Compliance
<b>8.16.2.26 C MEDICATION</b>	Compliance
<b>8.16.2.27 A-D ILLNESS REQUIREMENTS FOR CENTERS</b>	Compliance
<b>8.16.2.28 A-H TRANSPORTATION REQUIREMENTS FOR CENTERS</b>	N/A

### Buildings, Grounds & Safety

<b>8.16.2.29 A HOUSEKEEPING</b>	Non-compliance
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**Buildings, Grounds & Safety**

**Deficiencies**

The Premises are not in good repair as evidenced by the vent in the women's restroom is loose.

**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:** 08/11/2017

**Deficiencies**

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

**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:** 08/11/2017

**Deficiencies**

The playground has a heavy accumulation of weeds.

**Regulation:** 8.16.2.29A(1)

**Corrective Action Plan**

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

**Date to be Completed:** 08/11/2017

<b>8.16.2.29 B PEST CONTROL</b>	Compliance
<b>8.16.2.29 C MECHANICAL SYSTEMS</b>	Compliance
<b>8.16.2.29 D WATER AND WASTE</b>	Compliance
<b>8.16.2.29 E LIGHTING, LIGHTING FIXTURES AND ELECTRICAL</b>	Compliance
<b>8.16.2.29 F EXITS AND WINDOWS</b>	Compliance
<b>8.16.2.29 G TOILET AND BATHING FACILITIES</b>  <b><u>Deficiencies</u></b> The toilet room is missing toilet paper; soap. Women's restroom need toilet paper and hoppers classroom needs soap.  <b>Regulation:</b> 8.16.2.29G(2)  <b><u>Corrective Action Plan</u></b> The toilet room will be restocked and a routine established to monitor all toilet rooms for adequate supplies.  <b>Date to be Completed:</b> 08/11/2017	Non-compliance
<b>8.16.2.29 H SAFETY COMPLIANCE</b>	Compliance
<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

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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.**

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07/11/2017



07/11/2017

Surveyor: Mark Prizzi	Date	Facility Rep: Melanie Garcia	Date
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