



Facility

Name: *Sweetheart Daycare LLC* License Number: *167069*
 Address: *613 Amherst Dr NE, Albuquerque, NM 87106*
 Phone: *5052557340* Fax: E-mail: *sweetheartdaycare16@yahoo.com*

License Information

Type: *2 Star Child Care Center* Status: *Licensed* Issue Date: *05/23/2017* Expiration Date: *05/22/2018*

Capacity

Over Age 2: *33* Under Age 2: *0* Night Care: *0* Playground: *33*
 Square Footage: *0*

Census

Over 2: *29* Under 2: *0*

Classrooms

Number of Classrooms: *2*

Days and Hours of Operation

Monday <i>6:30 AM - 5:30 PM</i>	Tuesday <i>6:30 AM - 5:30 PM</i>	Wednesday <i>6:30 AM - 5:30 PM</i>	Thursday <i>6:30 AM - 5:30 PM</i>	Friday <i>6:30 AM - 5:30 PM</i>
Saturday <i>Closed</i>	Sunday <i>Closed</i>			

Inspection

Date: *03/21/2018* Time In: *9:30 AM* Time Out: *12:00 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>

Licensure (continued)**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. 2 of 8 staff are not background checked prior to employment

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.

Date to be Completed: 04/20/2018

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 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**Non-compliance**

Of the 8 children's records reviewed, 2 is/are missing the date the child first attended the center. See Children's Records 8.16.2.22 form for the child(ren) with missing information and/or authorization.

Corrective Action Plan

The first attendance date will be added and the center will review all children's records to ensure complete information is on file.

Date to be Completed: 04/20/2018

Of the 8 children's records reviewed, 1 is/are missing a copy of an up-to-date immunization record or public health division approved exemption. See Children's Records 8.16.2.22 form for the child(ren) with no immunization/exemption.

Corrective Action Plan

Parents will be advised to submit a complete and up-to-date immunization record or exemption. The center will review all children's records to ensure complete information is on file.

Date to be Completed: 04/20/2018

8.16.2.22 E Children's Records (continued)**Non-compliance**

Of the 8 children's records reviewed, 1 is/are missing information on allergies or medical conditions. See Children's Records 8.16.2.22 form for the child(ren) with missing information.

Corrective Action Plan

Parents will be advised to review and add missing information. The center will review all records to ensure information regarding allergies and medical conditions is on file.

Date to be Completed: 04/20/2018

Of the 8 children's records reviewed, 1 is/are missing the name and telephone number of two people in the local area to contact in an emergency when a parent or guardian cannot be reached. See Children's Records 8.16.2.22 form for the child(ren) with missing information.

Corrective Action Plan

Parents will be advised to review and add missing information. The center will review all children's records to ensure up-to-date emergency contact information is on file.

Date to be Completed: 04/20/2018

Of the 8 children's records reviewed, 1 is/are missing a document giving the center permission to transport the child in a medical emergency and authorization for medical treatment signed by a parent or guardian. See Children's Records 8.16.2.22 form for the child(ren) with missing information.

Corrective Action Plan

Parents will be advised to review and add missing information. The center will review all children's records to ensure emergency medical transportation and treatment authorization is on file.

Date to be Completed: 04/20/2018

8.16.2.22 F Personnel Records**Non-compliance**

The center failed to have 1 out of 8 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.

Date to be Completed: 04/20/2018

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 signed acknowledgement that the center's disaster preparedness plan and fire evacuation plan were reviewed.

Corrective Action Plan

The center will have staff complete the required acknowledgement and will retain on file.

Date to be Completed: 04/20/2018

From the review of staff records, it was determined that 2 out of 8 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.

Date to be Completed: 04/20/2018

From the review of staff records, it was determined that 2 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.

Date to be Completed: 04/20/2018

8.16.2.22 G Personnel Handbook*Compliance***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 1 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.

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: 04/20/2018

Services & Care of Children *(continued)*

8.16.2.23 C Staff/Child Ratios and Group Sizes

Compliance

Services & Care of Children

8.16.2.24 A Guidance

Non-compliance

Of the 8 staffs records reviewed, 1 is/are missing a signed staff acknowledgement that the center's guidance policy had been read and understood. See the Children's Records 8.16.2.22 form for the child(ren) who have this missing.

Corrective Action Plan

The center will review all [] records to ensure a signed [] acknowledgement is on file.

Date to be Completed: 04/20/2018

8.16.2.24 B Naps or Rest Period

Compliance

8.16.2.24 C Additional Requirements for Infants and Toddlers

Not Inspected

8.16.2.24 D Diapering and Toileting

Compliance

8.16.2.24 E Additional Requirements for Children with Special Needs

Not Inspected

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, 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

Health & Safety Requirements (continued)**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).

Date to be Completed: 04/20/2018

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

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 failed to conduct a fire drill for the month(s) of October.

Date to be Completed: 04/20/2018

The center does not have verification of an annual fire inspection from the fire authority having jurisdiction, expired 2-2018

Corrective Action Plan

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

Date to be Completed: 04/20/2018

The center failed to conduct an emergency preparedness practice drills for at least once a quarter.

Corrective Action Plan

A center will conduct emergency preparedness practice drills at least quarterly beginning January of each calendar year.

(continued)

Date to be Completed: 04/20/2018

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

Compliance

8.16.2.29 J Pets

N/A

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: Madonna J Rodriguez

