

Center Name: Teddy Bear Pre-School And		Address: 5820 2nd Street NW Albuquerque, NM 87107			Phone: (505)345-6164		
License Number: 10410	Issue Date: 02/1/2017	Expiration Date: 01/31/2018	Type: 3 Star FOCUS Child Care Center		Status: Licensed		
Capacity					Census		
Over Age 2:	70	Under Age 2:	17	Night Care:	0	Playground:	57
		Over 2:	46	Under 2:	10		
Days and Hours of Operation							
	<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>	<u>Saturday</u>	<u>Sunday</u>
Opening Times:	06:30 AM	06:30 AM	06:30 AM	06:30 AM	06:30 AM	Closed	Closed
Closing Times:	06:00 PM	06:00 PM	06:00 PM	06:00 PM	06:00 PM		
# of Classrooms: 4	Purpose: Semi-Annual		Date: 07/12/2017		Time: 09:30 AM		
Comments							

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 . 1 of 4 staff 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: 08/12/2017	Non-compliance

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Licensure		
<p><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 . 1 of 4 staff not background checked within the required time frame .</p> <p>Regulation: 8.16.2.21A(2)</p> <p><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.</p> <p>Date to be Completed: 08/12/2017</p>		
<p>8.16.2.21 B CAPACITY OF CENTERS</p> <p><u>Deficiencies</u> The center failed to post classroom capacities, and ratios and group sizes in an area of the room that is easily visible to parents, staff and visitors in the school age room and no group sizes in all classrooms</p> <p>Regulation: 8.16.2.21B(3)(c)</p> <p><u>Corrective Action Plan</u> The center will post the capacity in an area of the room that is easily visible to parents, staff and visitors.</p> <p>Date to be Completed: 08/12/2017</p>	Non-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	Not Inspected	
<p>8.16.2.22 C POLICY AND PROCEDURES</p> <p><u>Deficiencies</u> (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, <u>sheltier in place lock-down</u>, communication, reunification with parents, <u>individual plans for children with special needs and children with chronic medical conditions accommodations of infantis and tioddlers and continuity of operations</u></p> <p>Regulation: 8.16.2.22C(8)</p> <p><u>Corrective Action Plan</u> An emergency evacuation and disaster preparedness plan will be developed.</p> <p>Date to be Completed: 08/12/2017</p>	Non-compliance	
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	Compliance	
8.16.2.22 G PERSONNEL HANDBOOK	Not Inspected	

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Personnel & Staffing		
8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS	Compliance	
8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING <u>Deficiencies</u> Educators did not complete the following training within 3-months: first aid and cardiopulmonary resuscitation (CPR) certification; Health and Safety Training. 2 of 4 staff do not have 1st aid/CPR and 3 of 4 staff do not have the required health and safety training. Regulation: 8.16.2.23B(2)(b) <u>Corrective Action Plan</u> 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: 08/12/2017	Non-compliance	
8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES	Compliance	
Services & Care of Children		
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	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, WADING 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	


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Health & Safety Requirements		
<p><u>Deficiencies</u> Medication was observed in the center that does not have a label with the child's name and the date the medication was brought to the center. Sunblock in the panda room was not labeled. Regulation: 8.16.2.26C(3)</p> <p><u>Corrective Action Plan</u> Medication will be labeled and dated as required. Date to be Completed: 08/12/2017</p>		
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	
<p><u>Deficiencies</u> The Equipment are not in good repair as evidenced by water fountain near the kitchen is not working. Regulation: 8.16.2.29A(1)</p> <p><u>Corrective Action Plan</u> Repairs will be completed and a system for routine inspection of the center and premises will be established. Date to be Completed: 08/12/2017</p> <p><u>Deficiencies</u> The playground has a heavy accumulation of weeds. Regulation: 8.16.2.29A(1)</p> <p><u>Corrective Action Plan</u> A routine will be established to assess all areas of the premises for cleanliness , safety and potential hazards. Date to be Completed: 08/12/2017</p> <p><u>Deficiencies</u> The premises in the classroom are not safe in that hand sanitizer is too low and accessible to children without adult supervision. Regulation: 8.16.2.29A(1)</p> <p><u>Corrective Action Plan</u> The safety violation will be corrected and a system for routine safety inspection developed. Date to be Completed: 08/12/2017</p>		
8.16.2.29 B PEST CONTROL	Compliance	
8.16.2.29 C MECHANICAL SYSTEMS	Compliance	
8.16.2.29 D WATER AND WASTE	Non-compliance	

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Buildings, Grounds & Safety		
<p><u>Deficiencies</u> The center does not have hot and cold running water pressure at the sink in the preschool polar room. Regulation: 8.16.2.29D</p> <p><u>Corrective Action Plan</u> Hot and cold running water will be provided. Date to be Completed: 08/12/2017</p>		
8.16.2.29 E LIGHTING, LIGHTING FIXTURES AND ELECTRICAL	Compliance	
8.16.2.29 F EXITS AND WINDOWS	Compliance	
<p>8.16.2.29 G TOILET AND BATHING FACILITIES</p> <p><u>Deficiencies</u> The toilet room for preschool polar room(s) is missing disposable towels. Regulation: 8.16.2.29G(2)</p> <p><u>Corrective Action Plan</u> The toilet room will be restocked and a routine established to monitor all toilet rooms for adequate supplies. Date to be Completed: 08/12/2017</p>	Non-compliance	
<p>8.16.2.29 H SAFETY COMPLIANCE</p> <p><u>Deficiencies</u> The center failed to conduct an emergency preparedness practice drills for at least once a quarter. Regulation: 8.16.2.29H(1)</p> <p><u>Corrective Action Plan</u> A center will conduct emergency preparedness practice drills at least quarterly beginning January of each calendar year. Date to be Completed: 08/12/2017</p>	Non-compliance	
8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES	Compliance	
8.16.2.29 J PETS	Compliance	

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.



07/12/2017



07/12/2017

Surveyor: Mark Prizzi	Date	Facility Rep: Rosemary Padilla	Date
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