

Center Name: The Wright Choice Daycare		Address: 901 West Vivian Drive Belen, NM 87002			Phone: (505)864-2530		
License Number: 13456	Issue Date: 08/22/2016	Expiration Date: 08/21/2017	Type: 4 Star FOCUS Child Care Center		Status: Licensed		
Capacity					Census		
Over Age 2:	53	Under Age 2:	17	Night Care:	0	Playground:	70
		Over 2:	3	Under 2:	28		
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:	07:00 AM	07:00 AM	07:00 AM	07:00 AM	07:00 AM	Closed	Closed
Closing Times:	05:30 PM	05:30 PM	05:30 PM	05:30 PM	05:30 PM		
# of Classrooms: 4	Purpose: Semi-Annual		Date: 01/23/2017		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 <u>Deficiencies</u> The child care facility failed to submit a new application to the licensing authority before modifying information required to be stated on the license as follows: capacity. Regulation: 8.16.2.11A(3) <u>Corrective Action Plan</u> A notarized renewal application will be completed and submitted with the required fee prior to any changes being made to the current license. Date to be Completed: 02/24/2017	Non-compliance
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	Non-compliance

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Licensure

Deficiencies

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 . Educator was not background checked when they left then returned to employment with the center

Regulation: 8.16.2.21A(2)

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: 01/24/2017

Deficiencies

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 . 6 of 11 staff are not background checked every 5 years

Regulation: 8.16.2.21A(2)

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: 02/24/2017

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	Non-compliance
<p><u>Deficiencies</u></p> <p>The center did not have available for review written policies and procedures covering expulsion of children.</p> <p>Regulation: 8.16.2.22C(1)-(8)</p> <p><u>Corrective Action Plan</u></p> <p>The center will complete written policies and procedures for the missing area(s).</p> <p>Date to be Completed: 02/24/2017</p>	

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Administrative Requirements		
Deficiencies		
<p>(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</p> <p>Regulation: 8.16.2.22C(8)</p> <p>Corrective Action Plan An emergency evacuation and disaster preparedness plan will be developed. Date to be Completed: 02/24/2017</p>		
8.16.2.22 D FAMILY HANDBOOK		Compliance
8.16.2.22 E CHILDREN'S RECORDS		Compliance
8.16.2.22 F PERSONNEL RECORDS		Non-compliance
Deficiencies		
<p>From the review of staff records, it was determined that 1 out of 11 staff records does/do not include dates of hire and termination. See Staff Records 8.16.2.22 form for staff with this missing information.</p> <p>Regulation: 8.16.2.22F(1)(d)</p> <p>Corrective Action Plan The center will add dates of hire and termination to the record. Date to be Completed: 02/24/2017</p> <p>Deficiencies</p> <p>From the review of staff records, it was determined that 1 out of 11 staff records does/do not include a background check. See Staff Records 8.16.2.22 form for staff with this missing information.</p> <p>Regulation: 8.16.2.22F(1)(e)</p> <p>Corrective Action Plan The center will obtain documentation of a background check. Date to be Completed: 02/24/2017</p> <p>Deficiencies</p> <p>From the review of staff records, it was determined that 6 out of 11 staff records does/do not include documentation of current first-aid and cardiopulmonary resuscitation training. See Staff Records 8.16.2.22 form for staff without verification of training.</p> <p>Regulation: 8.16.2.22F(1)(g)</p> <p>Corrective Action Plan The center will obtain documentation of first-aid and CPR training and retain on file. Date to be Completed: 02/24/2017</p>		
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

Center Name: The Wright Choice Daycare	License Number: 13456	Date: 01/23/2017
Personnel & Staffing		
<p><u>Deficiencies</u> From the review of staff records, it was determined that 1 out of 11 staff does/do not have documentation of the 45-hour entry level course or an approved equivalent prior to or within six months of employment. Regulation: 8.16.2.23B(2)(c)</p> <p><u>Corrective Action Plan</u> Training will be completed for staff as required and documentation retained on file . Date to be Completed: 02/24/2017</p> <p><u>Deficiencies</u> From the review of staff records, it was determined that 1 out of 11 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)</p> <p><u>Corrective Action Plan</u> 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: 02/24/2017</p>		
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	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	
8.16.2.24 I EQUIPMENT AND PROGRAM	Compliance	
<p>8.16.2.24 J OUTDOOR PLAY AREAS</p> <p><u>Deficiencies</u> The fall zone underneath the climber is not adequate as evidenced by the absence of any protective material - the surface is bare soil. Regulation: 8.16.2.24J(3)</p> <p><u>Corrective Action Plan</u> An approved resilient surface will be provided beneath the climbing structures, swings, and slides. Date to be Completed: 02/24/2017</p>	Non-compliance	
8.16.2.24 K SWIMMING, WADING AND WATER	N/A	
8.16.2.24 L FIELD TRIPS	Not Inspected	
Food Service		

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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		Compliance
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 <u>Deficiencies</u> The premises in the pre-k are not safe in that the shelf that the turtle tank is on is not stable, tipping hazard. Regulation: 8.16.2.29A(1) <u>Corrective Action Plan</u> The safety violation will be corrected and a system for routine safety inspection developed. Date to be Completed: 02/24/2017 <u>Deficiencies</u> The Premises are not in good repair as evidenced by hole in the wall, pre-k. Regulation: 8.16.2.29A(1) <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: 02/24/2017 <u>Deficiencies</u> The premises in the 2/3's are not safe in that an electrical socket is missing the faceplate. Regulation: 8.16.2.29A(1) <u>Corrective Action Plan</u> The safety violation will be corrected and a system for routine safety inspection developed. Date to be Completed: 02/24/2017		Non-compliance
8.16.2.29 B PEST CONTROL		Compliance
8.16.2.29 C MECHANICAL SYSTEMS <u>Deficiencies</u> A heating unit, a fireplace insert, in the pre-k is accessible to children. Regulation: 8.16.2.29C(3) <u>Corrective Action Plan</u> A barrier will be installed to prevent children's access to the heating unit. Date to be Completed: 02/24/2017		Compliance

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Buildings, Grounds & Safety		
8.16.2.29 D WATER AND WASTE		Compliance
8.16.2.29 E LIGHTING, LIGHTING FIXTURES AND ELECTRICAL <u>Deficiencies</u> Electrical outlets within reach of children in the 2/3's are not safety outlets and they do not have protective covers. Regulation: 8.16.2.29E(3)(b) <u>Corrective Action Plan</u> Protective covers will be added. Date to be Completed: 02/24/2017		Non-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		Compliance
8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES		Compliance
8.16.2.29 J PETS		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.

mp 145

01/23/2017



01/23/2017

Surveyor: Mark Prizzi	Date	Facility Rep: Sandra Baca	Date
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