

Children, Youth and Families Department Child Care Licensing SURVEY REPORT

Center Name:			Address:				Phon	Phone:	
WORKING MOTHERS	DAY CARE		500 E. Bland (575)622- Roswell, NM 88203 Status:			22-2910			
License Number:	Issue Date:	Expiration I	Date:	Туре:			Status:		
10364	08/20/2016	08/19/2017		2 Star Child	d Care Center		Licensed		
Capacity							nsus		
Over Age 2: 85	Under Age 2:	60 Night	Care:	0 P	layground: 120	Ove	er 2:	42	Under 2: 20
Days and Hours of									
Opening Times:	Monday 06:30 AM			<u>'ednesday</u> 06:30 AM	<u>Thursday</u> 06:30 AM		<u>day</u> 0 AM	<u>Saturda</u> Closed	y <u>Sunday</u> Closed
Closing Times				05:30 PM	05:30 PM		0 PM	010000	
# of Classrooms:		Purpose:			Date:			Time:	
11		Annual			07/20/2017			10:05 AM	
Comments									
A SUR	VEY OF YOUR FAC	ILITY HAS BEEN MA	DE AND YOU	ARE NOTIFIE	D OF NON-COMPLIANCI	E OF THE	REGULATIO	ONS AS NOTE	D BELOW:
				Licer	nsure				
8.16.2.11 A TYPES	OF LICENSES								Compliance
8.16.2.11 B RENEW	AL OF LICENSE								Compliance
8.16.2.11 D NON-TR	RANSFERABLE	RESTRICTIONS		E					Compliance
8.16.2.12 A, K, M LICENSING ACTIONS AND ADMINISTRATIVE APPEALS					Compliance				
8.16.2.17 E, F SURVEYS FOR CHILD CARE FACILITIES				Compliance					
8.16.2.18 D COMPLAINTS 8.16.2.21 A LICENSING REQUIREMENTS					Compliance				
8.16.2.21 A LICENS	ING REQUIREM	IENTS							Compliance
8.16.2.21 B CAPACITY OF CENTERS					Non-compliance				
Deficiencies			v of the sele						
The center failed to post the maximum capacity of the playground on the doors to the playground. The infant playground does not have a posted capacity.									
Regulation: 8.16.2.21B(3)(b)									
Corrective Action	on Plan								
The center will p	post the maxim	um capacity of t	he playgro	ound on the	doors to the				
playground.	leted: 08/14/2017								
· · · · · ·									Compliance
8.16.2.21 C INCIDE		REQUIREMENT			D				Compliance
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					Compliance				
8.16.2.22 D FAMILY HANDBOOK 8.16.2.22 E CHILDREN'S RECORDS				Compliance					
		-							Compliance

Center Name: WORKING MOTHERS DAY CARE	License Number: 10364	Date: 07/20/2017	
Administra	tive Requirements		
8.16.2.22 F PERSONNEL RECORDS			Compliance
8.16.2.22 G PERSONNEL HANDBOOK	Compliance		
Persoi	nnel & Staffing		
8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS			Compliance
8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING			Non-compliance
Deficiencies Educators did not complete the following training within 3-months: He Regulation: 8.16.2.23B(2)(b)	alth and Safety Training		
Corrective Action Plan All educators, regardless of the number of hours per week, will completed Date to be Completed: 08/14/2017	ete the above listed training.		
8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES			Non-compliance
Deficiencies The center failed to post the capacity for each activity/interest a failed to post the capacity for each activity/interest area. Regulation: 8.16.2.23 C (2)(b)	rea. 7 out of 8 classrooms		
Corrective Action Plan Each activity/interest area will have a posted capacity, which m activity and size of the space, and will not exceed the group siz Paragraph (1) of Subsection C of 8.16.2.23 NMAC Date to be Completed: 08/14/2017			
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 TODD	ERS		Compliance
8.16.2.24 D DIAPERING AND TOILETING			Compliance
Deficiencies A staff member in the 2 yr. old room did not change gloves app change. The gloves were contaminated with bodily fluids and o throughout the entire diaper change, including redressing of the to wash hands. Regulation : 8.16.2.24D(2)	continued to be used		
<u>Corrective Action Plan</u> Diaper changing requirements will be reviewed with staff and m Date to be Completed: 08/14/2017	nonitored for compliance.		
8.16.2.24 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPE	CIAL NEEDS		Compliance
8.16.2.24 F ADDITIONAL REQUIREMENTS FOR NIGHT CARE			Compliance
8.16.2.24 G PHYSICAL ENVIRONMENT			Compliance
8.16.2.24 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT			Non-compliance

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	License Number:	Date:
WORKING MOTHERS DAY CARE	10364	07/20/2017
Services & Care o	of Children	
Deficiencies During the inspection, it was observed that the educator(s) in the 2 yr. of not calm when a stressful situation occurred when children were leaving and running in the classroom. The educator raised her voice to a yelling abrupt with the children Regulation: 8.16.2.24H(1) Corrective Action Plan Educators should remain calm in stressful situations. Date to be Completed: 08/14/2017 Deficiencies Educator(s) in the 2 yr. old room did not help children communicate their providing them with language to express themselves when a child was her and was very tired prior to lunch during diaper changes. When he refuse with her to wash his hands, the educator left him on the floor crying	the group activity level and was very ir feelings by naving a rough day	
Regulation: 8.16.2.24H(3) <u>Corrective Action Plan</u> Educators will help children communicate their feelings by providing the express themselves. Date to be Completed: 08/14/2017	m with language to	
Deficiencies Educator in the2 yr. old room failed to make appropriate physical contact support children in daily routines and interactions when children were dis following was observed: a child was left to cry on the floor when he was tired and crabby. Another child came over to comfort him and he lashed child. The two children exchanged blows with one another using books. seperated the two children and scolded the tired child and then again was him to cry, alone on the floor. Regulation: 8.16.2.24H(4)	stressed. The appearing to be very I out at the other The educator	
<u>Corrective Action Plan</u> Educators will make appropriate physical contact to comfort and support routines and interactions. When children are distressed, Educators will o Date to be Completed: 08/14/2017	-	
 8.16.2.24 I EQUIPMENT AND PROGRAM <u>Deficiencies</u> The center did not post the daily activity schedule in the older threes class Regulation: 8.16.2.24I(8) Corrective Action Plan The center will begin posting their daily activities schedules and following Date to be Completed: 08/14/2017		Non-compliance
8.16.2.24 J OUTDOOR PLAY AREAS		Non-compliance

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WORKING MOTHERS DAY CARE	10364	07/20/2017	
Services & Care o	f Children		
Deficiencies Playground equipment on the small playground is not safe as evidenced chipped or peeling paint. The small "train" with slide on the infant playgr and peeling paint. Regulation: 8.16.2.24J(1) Corrective Action Plan Equipment will be removed or made inaccessible until repairs can be made	ound has chipped		
routine inspection and maintenance will be devised. Date to be Completed: 08/14/2017			
<u>Deficiencies</u> The weekly playground equipment inspections are not documented corrections and the second se	ectly.		
The facility will document their weekly playground inspections. Date to be Completed: 08/14/2017			
8.16.2.24 K SWIMMING, WADING AND WATER		Not Inspected	
8.16.2.24 L FIELD TRIPS		Not Inspected	
Food Serv	ice		
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 Re	quirements		
 8.16.2.26 A HYGIENE <u>Deficiencies</u> The children; staff in the Toddler - (12 - 24 mo.); 2 yr. old classroom faile hands with soap and warm running water after changing a diaper. In the the educator failed to wash the child's hands after a diaper change. In the educator failed to wash both her hands and the child's hands. Regulation: 8.16.2.26A(1)(a) <u>Corrective Action Plan</u>	e two year old room,	Non-compliance	
Instruction in required hand washing will be provided to staff and children Date to be Completed: 08/14/2017	1.		
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	
Buildings, Grounds & Safety			
8.16.2.29 A HOUSEKEEPING		Non-compliance	
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WORKING MOTHERS DAY CARE	10364	07/20/2017	
Buildings, Groun	ds & Safety		
Deficiencies Material dangerous to children, Bleach solution and floor cleaner, is acceled children. Regulation: 8.16.2.29A(2) Corrective Action Plan Dangerous material will be stored in an area inaccessible to children are Date to be Completed: 08/14/2017 Deficiencies The Toys are not in good repair as evidenced by books missing covers threes, Older threes, Toddlers, and Older twos rooms all had books in Regulation: 8.16.2.29A(1) Corrective Action Plan Repairs will be completed and a system for routine inspection of the cerwill be established.	nd away from food. and pages . Early bad repair.		
Date to be Completed: 08/14/2017		1	
8.16.2.29 B PEST CONTROL		Not Ins	pected
8.16.2.29 C MECHANICAL SYSTEMS		Com	pliance
8.16.2.29 D WATER AND WASTE		Com	pliance
8.16.2.29 E LIGHTING, LIGHTING FIXTURES AND ELECTRICAL Deficiencies The center does not have emergency lighting that turns on automatical service is disrupted. The emergency lights in both three year old bathr working. Regulation: 8.16.2.29E(2) Corrective Action Plan Emergency lighting will be installed. Date to be Completed: 08/14/2017		Non-com	pilotoo
8.16.2.29 F EXITS AND WINDOWS		Com	pliance
8.16.2.29 G TOILET AND BATHING FACILITIES		Com	pliance
 8.16.2.29 H SAFETY COMPLIANCE Deficiencies The center failed to conduct a fire drill for the month(s) of January; Feb Regulation: 8.16.2.29H(2) Corrective Action Plan A monthly fire drill will be held and recorded. Date to be Completed: 08/14/2017	ruary; March; April.	Non-com	pliance

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Buildings, Ground	ls & Safety				
Deficiencies	-				
The center does not have verification of an annual fire inspection from the	ne fire authority				
having jurisdiction. The most recent fire inspection is dated 07/08/2016.	having jurisdiction. The most recent fire inspection is dated 07/08/2016.				
Regulation: 8.16.2.29H(3)(e)					
Corrective Action Plan					
An annual fire inspection will be requested from the fire authority having	jurisdiction over the				
center.			ľ		
Date to be Completed: 07/13/2017					
Deficiencies					
The center failed to conduct an emergency preparedness practice drills	for at least once a				
quarter. No drills have been done for the first two quarters of the year.					
Regulation: 8.16.2.29H(1)					
Corrective Action Plan					
A center will conduct emergency preparedness practice drills at least quarterly beginning					
January of each calendar year.					
Date to be Completed: 08/14/2017		1			
8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS	AND CONTROLLED SUBST	ANCES Complia	ance		
8.16.2.29 J PETS		Complia	ance		

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.

Nahl Gr 1.50 pm

(link)

07/20/2017

Surveyor:Nicholas Conde

07/20/2017

Date

Facility Rep:Ester Loaque

Date