

Children, Youth and Families Department Child Care Licensing SURVEY REPORT

Center Name:				Address:						Phone:			
Wesley Kids Childcare & Preschool				314 Lead SW Albuquerque, NM 87102					(505)247-2404				
License Number:	Issue Date:	Expiration	n Date	e:	Туре:				Status:				
10361	12/15/2016	12/14/201	7		5 Star F	OCUS Chil	d Care Center		Licensed				
Capacity									nsus				
Over Age 2: 93	Under Age 2:	49 N	ht Car	e:	0	Playgrour	d: 79	Ove	er 2:	46		Under 2:	20
Days and Hours of	Operation												
Opening Times	Monday 07:00 AN				<u>ednesday</u> 07:00 AM	-	<u>hursday</u> 7:00 AM		<u>day</u> 10 AM	2	Saturday Closed	L	<u>Sunday</u> Closed
Closing Times					06:00 PM		6:00 PM		0 PM				Clobba
# of Classrooms:		Purpose:				Date:				Tin	ne:		
6		Annual				10/25/	2017			09:2	20 AM		
Comments													
A SUR	VEY OF YOUR FAC	LITY HAS BEEN	MADE	AND YOU	ARE NOTI	IFIED OF NO	N-COMPLIANC	E OF THE	EREGULATI	ONS	AS NOTE	D BELOW:	
					Lic	censure							
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-TF	RANSFERABLE	RESTRICTION	S OF I	LICENSI	E								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								Not Inspected					
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 ADMINI	STRATION REC	ORDS											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							Compliance						
8.16.2.22 F PERSONNEL RECORDS						N	lon-compliance						

Center Name:	License Number:	Date:			
Wesley Kids Childcare & Preschool	10361	10/25/2017			
Administrative Re	equirements				
Deficiencies The center failed to have 1 out of 10 person(s) providing care to sign at that they have, or have never had, an arrest or substantiated referral to services agency. See Staff Records 8.16.2.22 form for staff with this m Regulation: 8.16.2.22F(1)(f)	a child protective				
<u>Corrective Action Plan</u> The center will put processes in place to ensure that all care giving stat statements of non-conviction. Date to be Completed: 11/25/2017	ff sign annual				
Deficiencies From the review of staff records, it was determined that 1 out of 10 statistical include documentation of current first-aid and cardiopulmonary resuscing Staff Records 8.16.2.22 form for staff without verification of training. Regulation: 8.16.2.22F(1)(g)					
Corrective Action Plan The center will obtain documentation of first-aid and CPR training and i Date to be Completed: 11/25/2017	retain on file.				
Deficiencies From the review of staff records, it was determined that 1 out of 10 stat include a professional development plan based on seven areas of com Records 8.16.2.22 form for staff who need a current plan. Regulation: 8.16.2.22F(1)(n)					
Corrective Action Plan The center will have staff complete a professional development plan ar plan will be maintained on file. Date to be Completed: 11/25/2017	nd sign the plan.The				
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		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 NE	EDS	N/A			
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			
Survey Report Form		Page 2 of 4			

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Wesley Kids Childcare & Preschool	10361	10/25/2017	
Se	ervices & Care of Children		
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			N/A
	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
Hea	alth & 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	N/A		
8.16.2.28 A-H TRANSPORTATION REQUIREMENTS FOR CE		N/A	
Bu	ildings, 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 ELECTRIC	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
Deficiencies			
The center's fire extinguishers is not inspected yearly.	The one in the kitchen.		
<b>Regulation:</b> 8.16.2.29H(3)(k)			
Corrective Action Plan			
Equipment will be maintained and inspected yearly. Date to be Completed: 11/25/2017			
		CES	Compliance
8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES	, ILLEGAL DRUGS AND CONTROLLED SUBSTAN	65	Compliance
8.16.2.29 J PETS			N/A

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Please note: Per CYFD regulation NMAC 8.1 above, may result in further action taken aga	-	y with the corrective action plans as noted	
LM 12:15	10/25/2017	Onfile	10/25/2017
Surveyor:Lucille Mizner	Date	Facility Rep:Rana Cordova	Date
Survey Report Form		•	Page 4 of 4