

Center Name: Western Heights Learning Center		Address: 6415 Sage Rd. SW Albuquerque, NM 871210000			Phone: (505)242-3135		
License Number: 10516	Issue Date: 02/1/2017	Expiration Date: 04/27/2017	Type: 5 Star FOCUS Child Care Center		Status: Licensed		
Capacity					Census		
Over Age 2:	80	Under Age 2:	0	Night Care:	0	Playground:	35
		Over 2:	42	Under 2:	0		
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:	06:30 PM	06:30 PM	06:30 PM	06:30 PM	06:30 PM		
# of Classrooms: 4	Purpose: Annual		Date: 03/28/2017		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	Not Inspected
8.16.2.21 B CAPACITY OF CENTERS Deficiencies 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. Regulation: 8.16.2.21B(3)(c) Corrective Action Plan The center will post the capacity in an area of the room that is easily visible to parents, staff and visitors. Date to be Completed: 04/28/2017	N/A
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

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Administrative Requirements		
<p><u>Deficiencies</u> The center did not have available for review written policies and procedures covering expulsion of children. Regulation: 8.16.2.22C(1)-(8)</p> <p><u>Corrective Action Plan</u> The center will complete written policies and procedures for the missing area(s). Date to be Completed: 04/28/2017</p> <p><u>Deficiencies</u> The program does not have an up to date emergency evacuation and disaster preparedness plan approved by the department. Regulation: 8.16.2.22C(8)</p> <p><u>Corrective Action Plan</u> An emergency evacuation and disaster preparedness plan will be developed. Date to be Completed: 04/28/2017</p>		
8.16.2.22 D FAMILY HANDBOOK		Compliance
8.16.2.22 E CHILDREN'S RECORDS		Compliance
<p>8.16.2.22 F PERSONNEL RECORDS</p> <p><u>Deficiencies</u> From the review of staff records, it was determined that 4 out of 15 staff records does/do not include a background check. See Staff Records 8.16.2.22 form for staff with this missing information. In the required every five years. Regulation: 8.16.2.22F(1)(e)</p> <p><u>Corrective Action Plan</u> The center will obtain documentation of a background check. Date to be Completed: 04/28/2017</p> <p><u>Deficiencies</u> From the review of staff records, it was determined that 2 out of 7 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. Regulation: 8.16.2.22F(1)(n)</p> <p><u>Corrective Action Plan</u> 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: 04/28/2017</p>		Non-compliance
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

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Services & Care of Children		
8.16.2.24 B NAPS OR REST PERIOD		Compliance
8.16.2.24 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLERS		N/A
8.16.2.24 D DIAPERING AND TOILETING		Compliance
8.16.2.24 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL NEEDS		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
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
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		Not Inspected
8.16.2.27 A-D ILLNESS REQUIREMENTS FOR CENTERS		Not Inspected
8.16.2.28 A-H TRANSPORTATION REQUIREMENTS FOR CENTERS		N/A
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 Deficiencies The center does not have emergency lighting that turns on automatically when electrical service is disrupted. The light does not work in the East classroom. Regulation: 8.16.2.29E(2) Corrective Action Plan Emergency lighting will be installed. Date to be Completed: 04/28/2017		Non-compliance
8.16.2.29 F EXITS AND WINDOWS		Compliance

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Buildings, Grounds & Safety		
8.16.2.29 G TOILET AND BATHING FACILITIES	Compliance	
8.16.2.29 H SAFETY COMPLIANCE <u>Deficiencies</u> The center does not have verification of an annual fire inspection from the fire authority having jurisdiction. Regulation: 8.16.2.29H(3)(e) <u>Corrective Action Plan</u> An annual fire inspection will be requested from the fire authority having jurisdiction over the center. Date to be Completed: 04/28/2017 <u>Deficiencies</u> The center is not equipped with smoke detectors. In the middle classroom. Regulation: 8.16.2.29H(3)(i) <u>Corrective Action Plan</u> Smoke detectors will be maintained in working order. Date to be Completed: 04/28/2017	Non-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.

LM 12:10

03/28/2017



03/28/2017

Surveyor: Lucille Mizner

Date

Facility Rep: Chrissy Jeter Melissa Padilla

Date