



Center Name: YDI Job Corps Head Start			Address: 1500 Indian School Rd. N.W. Albuquerque, NM 87104			Phone: (505)222-4114		
License Number: 94606	Issue Date: 06/9/2016	Expiration Date: 06/8/2017	Type: 5 Star FOCUS Child Care Center			Status: Licensed		
Capacity Over Age 2: 40 Under Age 2: 39 Night Care: 0 Playground: 79						Census Over 2: 19 Under 2: 11		
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:	07:45 AM	07:45 AM	07:45 AM	07:45 AM	07:45 AM	Closed	Closed	
Closing Times:	04:45 PM	04:45 PM	04:45 PM	04:45 PM	04:45 PM			
# of Classrooms: 3		Purpose: Annual		Date: 04/28/2017		Time: 09:15 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 <u>Deficiencies</u> The center failed to post classroom capacities, and ratios and <u>group sizes</u> in an area of the room that is easily visible to parents, staff and visitors. Regulation: 8.16.2.21B(3)(c) <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. Date to be Completed: 05/29/2017	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	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

Center Name: YDI Job Corps Head Start	License Number: 94606	Date: 04/28/2017
Administrative Requirements		
8.16.2.22 F PERSONNEL RECORDS <u>Deficiencies</u> 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. In the required every five years. Regulation: 8.16.2.22F(1)(e) <u>Corrective Action Plan</u> The center will obtain documentation of a background check. Date to be Completed: 05/29/2017 <u>Deficiencies</u> From the review of staff records, it was determined that 4 out of 5 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. Regulation: 8.16.2.22F(1)(g) <u>Corrective Action Plan</u> The center will obtain documentation of first-aid and CPR training and retain on file. Date to be Completed: 05/29/2017 <u>Deficiencies</u> From the review of staff records, it was determined that 1 out of 5 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) <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: 05/29/2017		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 <u>Deficiencies</u> Educators did not complete the following training within 3-months: 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: 05/29/2017		Non-compliance

Center Name: YDI Job Corps Head Start	License Number: 94606	Date: 04/28/2017
Personnel & Staffing		
<p><u>Deficiencies</u> From the review of staff records, it was determined that 1 out of 5 staff working more than 20 hours a week, has/have no documentation of at least 24 hours of qualified annual training, See Staff Records 8.16.2.22 form for staff with missing documentation of training. Regulation: 8.16.2.23B(2)(d)</p> <p><u>Corrective Action Plan</u> Annual training will be completed as required and documentation retained on file. Date to be Completed: 05/29/2017</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	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	Compliance	
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	Non-compliance	

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Buildings, Grounds & Safety

Deficiencies

The art shelf has a heavy accumulation of clutter in classroom JC-1.

Regulation: 8.16.2.29A(1)

Corrective Action Plan

A routine will be established to assess all areas of the premises for cleanliness, safety and potential hazards.

Date to be Completed: 05/29/2017

Deficiencies

The Fixtures are not in good repair as evidenced by water fountain in the Infant room sprays up at the ceiling.

Regulation: 8.16.2.29A(1)

Corrective Action Plan

Repairs will be completed and a system for routine inspection of the center and premises will be established.

Date to be Completed: 05/29/2017

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	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.

LM 11:00

04/28/2017

Nicole Chavez

04/28/2017

Surveyor: Lucille Mizner	Date	Facility Rep: Nicole Chavez	Date
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