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|---|----------------------------------|--|--|----------------------------|--------------------------------|--------------------------|-----------------|---------------|
| Center Name: YMCA @ Sunset View | | Address: 6121 Paradise Blvd. NW Albuquerque, NM 87114 | | | Phone: (505)400-0573 | | | |
| License Number: 145321 | Issue Date: 10/13/2016 | Expiration Date: 10/12/2017 | Type: 2 Star Child Care Center | | Status: Licensed | | | |
| Capacity | | | | | Census | | | |
| Over Age 2: | 82 | Under Age 2: | 0 | Night Care: | 0 | Playground: | 82 | |
| | | Over 2: | 60 | | | Under 2: | 0 | |
| Days and Hours of Operation | | | | | | | | |
| Morning | | <u>Monday</u> | <u>Tuesday</u> | <u>Wednesday</u> | <u>Thursday</u> | <u>Friday</u> | <u>Saturday</u> | <u>Sunday</u> |
| Opening Times: | | 06:15 AM | 06:15 AM | 06:15 AM | 06:15 AM | 06:15 AM | Closed | Closed |
| Closing Times: | | 09:00 AM | 09:00 AM | 09:00 AM | 09:00 AM | 09:00 AM | | |
| Afternoon | | <u>Monday</u> | <u>Tuesday</u> | <u>Wednesday</u> | <u>Thursday</u> | <u>Friday</u> | <u>Saturday</u> | <u>Sunday</u> |
| Opening Times: | | 03:45 PM | 03:45 PM | 12:15 PM | 03:45 PM | 03:45 PM | | |
| Closing Times: | | 06:00 PM | 06:00 PM | 06:00 PM | 06:00 PM | 06:00 PM | | |
| # of Classrooms: 1 | | Purpose: Annual | | Date: 08/31/2017 | | Time: 02:50 PM | | |
| Comments | | | | | | | | |

A SURVEY OF YOUR FACILITY HAS BEEN MADE AND YOU ARE NOTIFIED OF NON-COMPLIANCE OF THE REGULATIONS AS NOTED BELOW:

Licensure

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| 8.16.2.40 A LICENSING REQUIREMENTS | Not Inspected |
| 8.16.2.40 B CAPACITY OF A PROGRAM | Compliance |
| 8.16.2.40 C, D INCIDENT REPORTING REQUIREMENTS | Not Inspected |

Administrative Requirements

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| 8.16.2.41 A ADMINISTRATION RECORDS | Compliance |
| 8.16.2.41 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT | Compliance |
| 8.16.2.41 C PARENT HANDBOOK | Compliance |
| 8.16.2.41 D, 8.16.2.42 D CHILDREN'S RECORDS | Compliance |

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| 8.16.2.41 E PERSONNEL RECORDS | Non-compliance |
| <p>Deficiencies</p> <p>From the review of staff records, it was determined that 2 out of 5 staff records does/do not include documentation of first-aid and cardiopulmonary resuscitation training onsite. See Staff Records 8.16.2.41 form for staff without verification of training.</p> <p>Regulation: 8.16.2.41E(1)(g)</p> <p>Corrective Action Plan</p> <p>The program will obtain documentation of first-aid and CPR training and retain on file.</p> <p>Date to be Completed: 09/29/2017</p> | |

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| Administrative Requirements | | |
| <p>Deficiencies From the review of staff records, it was determined that 2 out of 5 staff records does/do not include documentation of training by date, time, hours and area of competency or a training certificate. See Staff Records 8.16.2.41 form for staff with missing documentation. Regulation: 8.16.2.41E(1)(h)</p> <p>Corrective Action Plan The program will obtain verification of all training and retain on file. Date to be Completed: 09/29/2017</p> | | |
| 8.16.2.41 F PERSONNEL HANDBOOK | | Compliance |
| Personnel & Staffing | | |
| 8.16.2.42 A PERSONNEL AND STAFFING REQUIREMENTS | | Compliance |
| 8.16.2.42 B STAFF QUALIFICATIONS | | Compliance |
| 8.16.2.42 C TRAINING | | Compliance |
| Services & Care of Children | | |
| 8.16.2.43 A GUIDANCE | | Compliance |
| 8.16.2.43 B PHYSICAL ENVIRONMENT | | Compliance |
| 8.16.2.43 C SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT | | Compliance |
| 8.16.2.43 D EQUIPMENT AND PROGRAM | | Compliance |
| 8.16.2.43 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL NEEDS | | N/A |
| 8.16.2.43 G SWIMMING, WADING AND WATER | | N/A |
| 8.16.2.43 H FIELD TRIPS | | N/A |
| 8.16.2.43 F OUTDOOR PLAY AREAS | | Compliance |
| Food Service | | |
| 8.16.2.44 B MEALS AND SNACKS | | Compliance |
| 8.16.2.44 C KITCHENS | | Compliance |
| Health & Safety Requirements | | |
| 8.16.2.45 A HYGIENE | | Compliance |
| 8.16.2.45 B FIRST AID REQUIREMENTS | | Non-compliance |
| <p>Deficiencies The program's first aid kit does not contain adhesive tape. Regulation: 8.16.2.45B(2)</p> <p>Corrective Action Plan Missing items will be added to the first-aid kit; staff will be reminded to replace any item used. Date to be Completed: 09/29/2017</p> | | |
| 8.16.2.45 C MEDICATION | | N/A |

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| Health & Safety Requirements | | |
| 8.16.2.45 D ILLNESSES | | Not Inspected |
| 8.16.2.46 A-H TRANSPORTATION REQUIREMENTS | | N/A |
| Buildings, Grounds & Safety | | |
| 8.16.2.47 A HOUSEKEEPING | | Compliance |
| 8.16.2.47 B PEST CONTROL | | Compliance |
| 8.16.2.47 C MECHANICAL SYSTEMS | | Compliance |
| 8.16.2.47 D LIGHTING, LIGHTING FIXTURES AND ELECTRICAL | | Compliance |
| 8.16.2.47 E EXITS AND WINDOWS | | Compliance |
| 8.16.2.47 F TOILET AND BATHING FACILITIES | | Compliance |
| 8.16.2.47 G SAFETY COMPLIANCE Deficiencies The program does not have verification of an annual fire inspection from the fire authority having jurisdiction. Regulation: 8.16.2.47G(3) Corrective Action Plan An annual fire inspection will be requested from the fire authority having jurisdiction over the program. Date to be Completed: 09/29/2017 | | Non-compliance |
| 8.16.2.47 H SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES | | Compliance |
| 8.16.2.47 G, I 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 350

08/31/2017

On file

08/31/2017

Surveyor: Lucille Mizner

Date

Facility Rep: Celeste Wheat

Date