

Center Name: Yolanda Macias Nieto		Address: 6600 Bluewater Rd. NW G-168 Albuquerque, NM 87121			Phone: (505)920-3832		
License Number: 149230	Issue Date: 08/26/2016	Expiration Date: 03/21/2017	Type: 2 Star Family Child Care Home		Status: Licensed		
Capacity					Census		
Over Age 2:	2	Under Age 2:	4	Night Care:	0	Playground:	0
		Over 2:	1	Under 2:	4		
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:	05:00 AM	05:00 AM	05:00 AM	05:00 AM	05:00 AM	05:00 AM	Closed
Closing Times:	05:00 AM	05:00 AM	05:00 AM	05:00 AM	05:00 AM	05:00 AM	
# of Classrooms: 1	Purpose: Annual		Date: 01/23/2017		Time: 10:00 AM		
Comments							

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

Licensure	
8.16.2.31 A LICENSING REQUIREMENTS	Compliance
8.16.2.31 B CAPACITY OF A HOME	Compliance
8.16.2.31 C INCIDENT REPORTING REQUIREMENTS	Not Inspected
Administrative Requirements	
8.16.2.32 A ADMINISTRATIVE RECORDS <u>Deficiencies</u> The licensee does not have on file the following: the current list of notifiable diseases and communicable diseases published by the office of epidemiology of the New Mexico department of health. Regulation: 8.16.2.32A(1)-(5) <u>Corrective Action Plan</u> All required items will be on file for review. Date to be Completed: 02/23/2017	Non-compliance
8.16.2.32 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT	Compliance
8.16.2.32 C PARENT HANDBOOK <u>Deficiencies</u> The child care home does not have a complete parent handbook. The following general information needs to be included: The home's policies and procedures regarding the following need to be included: policies and procedures for expulsion of children.. Regulation: 8.16.2.32C(1)(2) <u>Corrective Action Plan</u> A parent handbook with required general information and policies and procedures will be completed and distributed. Date to be Completed: 02/23/2017	Non-compliance
8.16.2.32 D CHILDREN'S RECORDS	Compliance

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Administrative Requirements		
8.16.2.32 E PERSONNEL RECORDS		Non-compliance
<p><u>Deficiencies</u> The home does not have a record of the time the second care giver(s) arrived at and left work including breaks and lunch. Regulation: 8.16.2.32E(3)</p> <p><u>Corrective Action Plan</u> A record of the second care giver(s) work schedule will be maintained for review. Date to be Completed: 02/23/2017</p> <p><u>Deficiencies</u> The home does not have a written plan for ongoing professional development for each staff member, including the director, that is based on the seven areas of competency, consistent with the career lattice, and based on the individual's goals. Regulation: 8.16.2.32E(4)</p> <p><u>Corrective Action Plan</u> A written plan for employee development will be developed. Date to be Completed: 02/23/2017</p>		
8.16.2.32 F PERSONNEL HANDBOOK		Compliance
Personnel & Staffing		
8.16.2.33 A PERSONNEL AND STAFFING REQUIREMENTS		Compliance
8.16.2.33 B STAFF QUALIFICATIONS AND TRAINING		Non-compliance
<p><u>Deficiencies</u> The home failed to keep a training log on file with employee's name; date of hire; position; date of training; clock hours; competency area; source of training; training certificate for 3 out of 3 staff. See Staff Records 8.16.2.32 form for staff who are missing a complete training log. Regulation: 8.16.2.33B(2)</p> <p><u>Corrective Action Plan</u> A training log will be completed for each staff that includes the employee 's name, date of hire, and position, date of training, clock hours, competency area, source of training, and training certificates. Date to be Completed: 02/23/2017</p> <p><u>Deficiencies</u> The home does not have on duty at all times all educators certified in first aid and cardiopulmonary resuscitation (CPR). Regulation: 8.16.2.33B(6)</p> <p><u>Corrective Action Plan</u> A home must have all educators certified in first aid and cardio-pulmonary resuscitation (CPR). Date to be Completed: 02/23/2017</p>		
Services & Care of Children		
8.16.2.34 A GUIDANCE		Compliance
8.16.2.34 B NAPS OR REST PERIOD		Compliance
8.16.2.34 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLERS		Compliance

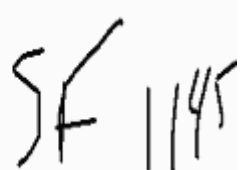

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Services & Care of Children		
8.16.2.34 D DIAPERING AND TOILETING		Compliance
8.16.2.34 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL NEEDS		Not Inspected
8.16.2.34 F NIGHT CARE		Not Inspected
8.16.2.34 G PHYSICAL ENVIRONMENT		Compliance
8.16.2.34 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT		Compliance
8.16.2.34 I EQUIPMENT AND PROGRAM		Compliance
8.16.2.34 J OUTDOOR PLAY		Compliance
8.16.2.34 K SWIMMING, WADING AND WATER		Not Inspected
8.16.2.34 L FIELD TRIPS		Not Inspected
Food Service		
8.16.2.35 B MEALS AND SNACKS		Compliance
8.16.2.35 C MENUS <u>Deficiencies</u> Weekly menus are not posted at least one week in advance. menu not followed was supposed to be hamburgers, was fish soup instead Regulation: 8.16.2.35C(1) <u>Corrective Action Plan</u> A dated weekly menu will be posted in an area visible to parents. Menus shall be posted at least one week in advance, in a conspicuous place, for review by parents, educators and children. Date to be Completed: 02/24/2017		Non-compliance
8.16.2.35 D KITCHENS		Compliance
8.16.2.35 E MEAL TIMES		Compliance
Health & Safety Requirements		
8.16.2.36 A HYGIENE		Compliance
8.16.2.36 B FIRST AID REQUIREMENTS		Compliance
8.16.2.36 C MEDICATION		Compliance
8.16.2.36 D ILLNESS AND NOTIFIABLE DISEASES		Compliance
8.16.2.37 A-G TRANSPORTATION REQUIREMENTS FOR HOMES		Not Inspected
Buildings, Grounds & Safety		
8.16.2.38 A HOUSEKEEPING		Compliance
8.16.2.38 B PEST CONTROL		Compliance
8.16.2.38 C MECHANICAL SYSTEMS		Compliance
8.16.2.38 D LIGHTING, LIGHTING FIXTURES AND ELECTRICAL		Compliance
8.16.2.38 E EXITS		Compliance
8.16.2.38 F TOILET AND BATHING FACILITIES		Compliance
8.16.2.38 G SAFETY COMPLIANCE		Compliance

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Buildings, Grounds & Safety

8.16.2.38 H SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES	Compliance
8.16.2.38 I PETS	Not Inspected

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.

		01/23/2017	01/23/2017
Surveyor: Sylvia Foster	Date	Facility Rep: Yolanda Macias	Date