

<b>Center Name:</b> CABQ Tres Manos Child Development Center		<b>Address:</b> 823 Buena Vista S.E. Albuquerque, NM 87106			<b>Phone:</b> (505)848-1310		
<b>License Number:</b> 53298	<b>Issue Date:</b> 04/4/2017	<b>Expiration Date:</b> 04/3/2018	<b>Type:</b> 5 Star FOCUS Child Care Center		<b>Status:</b> Licensed		
<b>Capacity</b>					<b>Census</b>		
Over Age 2:	38	Under Age 2:	0	Night Care:	0	Playground:	38
		Over 2:	25	Under 2:	0		
<b>Days and Hours of Operation</b>							
	<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>	<u>Saturday</u>	<u>Sunday</u>
Opening Times:	07:00 AM	07:00 AM	07:00 AM	07:00 AM	07:00 AM	Closed	Closed
Closing Times:	05:30 PM	05:30 PM	05:30 PM	05:30 PM	05:30 PM		
<b># of Classrooms:</b> 2	<b>Purpose:</b> Annual		<b>Date:</b> 02/05/2018		<b>Time:</b> 10:00 AM		
<b>Comments</b>							

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	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	Non-compliance

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<b>Administrative Requirements</b>		
<p><b><u>Deficiencies</u></b> Of the 6 children's records reviewed, 1 is/are missing a copy of an up-to-date immunization record or public health division approved exemption. See Children's Records 8.16.2.22 form for the child(ren) with no immunization/exemption. <b>Regulation:</b> 8.16.2.22E(1)(e)</p> <p><b><u>Corrective Action Plan</u></b> Parents will be advised to submit a complete and up-to-date immunization record or exemption. The center will review all children's records to ensure complete information is on file. <b>Date to be Completed:</b> 03/05/2018</p>		
<p><b>8.16.2.22 F PERSONNEL RECORDS</b></p> <p><b><u>Deficiencies</u></b> 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. <b>Regulation:</b> 8.16.2.22F(1)(n)</p> <p><b><u>Corrective Action Plan</u></b> The center will have staff complete a professional development plan and sign the plan. The plan will be maintained on file. <b>Date to be Completed:</b> 03/06/2018</p>	Non-compliance	
<b>8.16.2.22 G PERSONNEL HANDBOOK</b>	Compliance	
<b>Personnel &amp; Staffing</b>		
<b>8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS</b>	Compliance	
<b>8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING</b>	Compliance	
<b>8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES</b>	Compliance	
<b>Services &amp; Care of Children</b>		
<b>8.16.2.24 A GUIDANCE</b>	Compliance	
<b>8.16.2.24 B NAPS OR REST PERIOD</b>	Compliance	
<b>8.16.2.24 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLERS</b>	N/A	
<b>8.16.2.24 D DIAPERING AND TOILETING</b>	N/A	
<b>8.16.2.24 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL NEEDS</b>	Not Inspected	
<b>8.16.2.24 F ADDITIONAL REQUIREMENTS FOR NIGHT CARE</b>	N/A	
<b>8.16.2.24 G PHYSICAL ENVIRONMENT</b>	Compliance	
<b>8.16.2.24 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT</b>	Compliance	
<b>8.16.2.24 I EQUIPMENT AND PROGRAM</b>	Non-compliance	

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<b>Services &amp; Care of Children</b>		
<p><b><u>Deficiencies</u></b> Children in the Preschool South side room(s) were allowed to view or listen to music that contained adult content. Country Western <b>Regulation:</b> 8.16.2.24E(9)</p> <p><b><u>Corrective Action Plan</u></b> The facility will remove any adult content and refrain from making any available to the children in the future. turned off while surveyor was still present <b>Date to be Completed:</b> 03/06/2018</p>		
<b>8.16.2.24 J OUTDOOR PLAY AREAS</b>	Compliance	
<b>8.16.2.24 K SWIMMING, WADING AND WATER</b>	Not Inspected	
<b>8.16.2.24 L FIELD TRIPS</b>	Not Inspected	
<b>Food Service</b>		
<b>8.16.2.25 B MEALS AND SNACKS</b>	Compliance	
<b>8.16.2.25 C MENUS</b>	Compliance	
<b>8.16.2.25 D KITCHENS</b>	Compliance	
<b>8.16.2.25 E MEAL TIMES</b>	Compliance	
<b>Health &amp; Safety Requirements</b>		
<b>8.16.2.26 A HYGIENE</b>	Compliance	
<p><b>8.16.2.26 B FIRST AID REQUIREMENTS</b></p> <p><b><u>Deficiencies</u></b> The center does not have on duty all educators currently certified in first aid and cardiopulmonary resuscitation (CPR). <b>Regulation:</b> 8.16.2.26B(1)</p> <p><b><u>Corrective Action Plan</u></b> All educators must be certified in first aid and cardiopulmonary resuscitation (CPR). 3 <b>Date to be Completed:</b> 03/05/2018</p>	Non-compliance	
<b>8.16.2.26 C MEDICATION</b>	Compliance	
<b>8.16.2.27 A-D ILLNESS REQUIREMENTS FOR CENTERS</b>	Not Inspected	
<b>8.16.2.28 A-H TRANSPORTATION REQUIREMENTS FOR CENTERS</b>	N/A	
<b>Buildings, Grounds &amp; Safety</b>		
<b>8.16.2.29 A HOUSEKEEPING</b>	Compliance	
<b>8.16.2.29 B PEST CONTROL</b>	Compliance	
<b>8.16.2.29 C MECHANICAL SYSTEMS</b>	Non-compliance	

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<b>Buildings, Grounds &amp; Safety</b>		
<b>Deficiencies</b> The center uses a portable fan in the center that is accessible to children. <b>Regulation:</b> 8.16.2.29C(1)		
<b>Corrective Action Plan</b> The portable fan will be moved to a location that is not accessible to children; secured. <b>Date to be Completed:</b> 02/05/2018		
<b>8.16.2.29 D WATER AND WASTE</b>		Compliance
<b>8.16.2.29 E LIGHTING, LIGHTING FIXTURES AND ELECTRICAL</b>		Compliance
<b>8.16.2.29 F EXITS AND WINDOWS</b>		Compliance
<b>8.16.2.29 G TOILET AND BATHING FACILITIES</b>		Compliance
<b>8.16.2.29 H SAFETY COMPLIANCE</b> <b>Deficiencies</b> The center failed to conduct an emergency preparedness practice drills for at least once a quarter. <b>Regulation:</b> 8.16.2.29H(1) <b>Corrective Action Plan</b> A center will conduct emergency preparedness practice drills at least quarterly beginning January of each calendar year. <b>Date to be Completed:</b> 03/06/2018 <b>Deficiencies</b> The center's fire extinguishers is not tagged with the date of inspection . 1 <b>Regulation:</b> 8.16.2.29H(3)(k) <b>Corrective Action Plan</b> Equipment will be maintained and inspected yearly. <b>Date to be Completed:</b> 03/05/2018		Non-compliance
<b>8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES</b>		Compliance
<b>8.16.2.29 J PETS</b>		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.

SF 12/5

02/05/2018

M. Duran

02/05/2018

Surveyor: Sylvia Foster	Date	Facility Rep: Marybeth Duran	Date
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