

<b>Center Name:</b> Midwest NMCAP Adelino Head Start		<b>Address:</b> 2747 Highway 47 Los Lunas, NM 87031			<b>Phone:</b> (505)866-0466		
<b>License Number:</b> 94704	<b>Issue Date:</b> 08/13/2016	<b>Expiration Date:</b> 08/12/2017	<b>Type:</b> 2 Star Child Care Center		<b>Status:</b> Licensed		
<b>Capacity</b>					<b>Census</b>		
Over Age 2:	82	Under Age 2:	0	Night Care:	0	Playground:	82
		Over 2:	68	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:	07:30 AM	07:30 AM	07:30 AM	07:30 AM	07:30 AM	Closed	Closed
Closing Times:	04:30 PM	04:30 PM	04:30 PM	04:30 PM	04:30 PM		
<b># of Classrooms:</b> 5	<b>Purpose:</b> Semi-Annual		<b>Date:</b> 01/05/2017		<b>Time:</b> 11:27 AM		
<b>Comments</b> Paper surveys dated 10/25/16							

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 <u>Deficiencies</u> The licensee did not obtain background checks on all staff members , educators, volunteers, and prospective staff as per the requirements outlined in the department's most current version of the Background Check and Employment History Verification provisions . 3 of 8 staff not background check every 5 years Regulation: 8.16.2.21A(2)  <u>Corrective Action Plan</u> The licensee will obtain background checks on all staff members , volunteers, and prospective staff. A request for a background check must be submitted prior to a staff member's employment. A background check must be conducted in accordance with 8.8.3 NMAC at least once every five years on all required individuals. Date to be Completed: 11/24/2016	Compliance
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

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<b>Administrative Requirements</b>		
<b>8.16.2.22 C POLICY AND PROCEDURES</b> <u>Deficiencies</u> The center did not have available for review written policies and procedures covering emergency evacuation and disaster preparedness; expulsion of children. <b>Regulation:</b> 8.16.2.22C(1)-(8) <u>Corrective Action Plan</u> The center will complete written policies and procedures for the missing area(s). <b>Date to be Completed:</b> 11/24/2016	Non-compliance	
<b>8.16.2.22 D FAMILY HANDBOOK</b>	Compliance	
<b>8.16.2.22 E CHILDREN'S RECORDS</b>	Compliance	
<b>8.16.2.22 F PERSONNEL RECORDS</b>	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> <u>Deficiencies</u> Educators did not complete the following training within 3-months: Health and Safety Training; CPR Training <b>Regulation:</b> 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: <b>Date to be Completed:</b> 11/24/2016	Non-compliance	
<b>8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES</b> <u>Deficiencies</u> The center failed to post the capacity for each activity/interest area. 5 out of 5 classrooms failed to post the capacity for each activity/interest area. <b>Regulation:</b> 8.16.2.23 C (2)(b) <u>Corrective Action Plan</u> Each activity/interest area will have a posted capacity, which may vary according to the activity and size of the space, and will not exceed the group size requirement as specified in Paragraph (1) of Subsection C of 8.16.2.23 NMAC <b>Date to be Completed:</b> 11/24/2016	Non-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>	Not Inspected	
<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>	Compliance	
<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	

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<b>Services &amp; Care of Children</b>		
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		Not Inspected
<b>Food Service</b>		
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
<b>Health &amp; Safety Requirements</b>		
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		Compliance
8.16.2.28 A-H TRANSPORTATION REQUIREMENTS FOR CENTERS		Not Inspected
<b>Buildings, Grounds &amp; Safety</b>		
8.16.2.29 A HOUSEKEEPING <b>Deficiencies</b> The Equipment are not in good repair as evidenced by torn window screen in room 5. <b>Regulation:</b> 8.16.2.29A(1) <b>Corrective Action Plan</b> Repairs will be completed and a system for routine inspection of the center and premises will be established. <b>Date to be Completed:</b> 11/24/2016		Non-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 <b>Deficiencies</b> The center does not have emergency lighting that turns on automatically when electrical service is disrupted. Room 1 <b>Regulation:</b> 8.16.2.29E(2) <b>Corrective Action Plan</b> Emergency lighting will be installed. <b>Date to be Completed:</b> 11/24/2016		Non-compliance

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**Buildings, Grounds & Safety**

<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>	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>	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.**

*mp*

01/05/2017

*on file*

01/05/2017

Surveyor: Mark Prizzi	Date	Facility Rep: Michelle Santillanes	Date
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