IOWA HHS
Iowa Department of Health And Human Services

Kim Reynolds
Governor

Adam Gregg
Lt. Governor

Kelly K. Garcia
Director

01/04/2024

Martisha Martin
401 Quincy ST
Waterloo, IA 50703

Dear Child Care Provider:

This letter is in regards to the compliance visit at your Registered Child Development Home B conducted on 01/04/2024. Iowa Code Chapter 237A and 441 Iowa Administrative Code, Chapter 110, describes specific requirements that must be met by a Registered Child Development Home. You are not a participant in the voluntary Quality Rating and Improvement System. The following areas were out of compliance at the time of the visit:

441 IAC 110.8(1) **Facility Requirements**

441 IAC 110.8(1)"b" Electrical wiring shall be maintained, and all accessible electrical outlets shall be tamper-resistant outlets or shall be safely capped. Electrical cords shall be properly used. Improper use includes running cords under rugs, over hooks, through door openings, or other use that has been known to be hazardous

441 IAC 110.8(1)"h" The home shall have at least one single-station, battery-operated, UL-approved smoke detector in each child-occupied room and at the top of every stairway. Each smoke detector shall be installed according to manufacturer's recommendations. The provider shall test each smoke detector monthly and keep a record of testing for inspection purposes

441 IAC 110.8(3) **Medications and Hazardous Materials**

441 IAC 110.8(3)"b" A first-aid kit shall be available and easily accessible whenever children are in the child development home, in the outdoor play area, in vehicles used to transport children, and on field trips. The kit shall be sufficient to address first aid related to minor injury or trauma and shall be stored in an area inaccessible to children. The kit shall, at a minimum, include adhesive bandages, bottled water, disposable tweezers, and disposable plastic gloves.

441 IAC 110.8(4) **Emergency Plans**

441 IAC 110.8(4) "a" Fire and tornado drills shall be practiced monthly and the provider shall keep documentation evidencing compliance with monthly practice on file for the current year and the previous year.

441 IAC 110.8(4) "b" The provider must have procedures in place for the following:

1. evacuation to safely leave the facility
2. relocation to a common, safe location after the evacuation
3. shelter-in-place to take immediate shelter where you are when it is unsafe to leave that location due to the emergent issue
4. lock down protocol to protect children and providers from an external situation
5. communication plan and plans for reunification with families

1305 E. Walnut Street, Des Moines, IA 50319-0114

6. continuity of operations plans
7. Procedures to address the needs of individual children, including those with functional or access needs

441 IAC 110.9 Files

441 IAC 110.9(1) **A provider file is maintained and shall contain the following:**

441 IAC 110.9(1)"a" A physician's examination report for the provider and all members of the provider's household aged 18 years or older. Acceptable physical examinations shall be documented on Form 470-5152, Child Care Provider Physical Examination Report. All children residing in the household must have medical documentation outlined in 110.9(4) "d", 110.9(4) "f", and 110.9(4) "g"

441 IAC 110.9(1)"b"(2) Documentation from the department confirming the record checks required under 441 IAC 110.11(3) have been completed and authorizing or conditionally limiting the person's involvement with child care.

441 IAC 110.9(4) Children's Files. An individual file for each child shall be maintained and updated annually or when the provider becomes aware of changes. The file shall contain:

a. Identifying information including, at a minimum, the child's name, birth date, parent's name, address, telephone number, special needs of the child, and the parent's work address and telephone number.
b. Emergency information including, at a minimum, where the parent can be reached, the name, street address, city and telephone number of the child's regular source of health care, and the name, telephone number, and relationship to the child of another adult available in case of emergency.
c. A signed medical consent from the parent authorizing emergency treatment.
d. An admission physical examination report signed by a licensed physician or designee in a clinic supervised by a licensed physician
1. The date of the physical examination shall not be more than 12 months before the child's first day of attendance at the child development home.
2. The written report shall include past health history, status of present health, allergies and restrictive conditions, and recommendations for continued care when necessary.
3. For a child who is five years of age or older and enrolled in school, a statement of health status signed by the parent or legal guardian may be substituted for the physical examination report.
4. The examination report or statement of health status shall be on file before the child's first day of care
e. For children under the age of 6,a statement of health condition signed by a physician or designee submitted annually from the date of the admission physical. For a child who is enrolled in school, a statement of health status signed by the parent or legal guardian may be substituted for the physician statement.
f. For each school-age child, on the first day of attendance, documentation of a physical examination that was completed at the time of school enrollment or since.
g. A signed and dated immunization certificate provided by the state department of public health. For the school-age child, a copy of the most recent immunization record shall be acceptable.
h. For any child with allergies, a written emergency plan in the case of an allergic reaction. A copy of this information shall accompany the child if the child leaves the premises.
i. Documentation that is signed by the parent and names persons authorized to pick up the child. The authorization shall include the name, telephone number, and relationship of the authorized person to the child.
j. Written permission from the parent for the child to attend activities away from the child development home.**k.** Injury report forms documenting injuries requiring first aid or medical care
l. If the child meets the definition of homelessness as defined by section 725(2) of the

McKinney-Vento Homeless Education Assistance Act, the family shall receive a 60-day grace period to obtain medical documentation.

Findings:

An annual compliance check was completed on 1/4/24 and the following was out of compliance:

441 IAC 110.8(1)“b” Electrical wiring shall be maintained, and all accessible electrical outlets shall be tamper-resistant outlets or shall be safely capped. Electrical cords shall be properly used. Improper use includes running cords under rugs, over hooks, through door openings, or other use that has been known to be hazardous.
Martisha had 2 outlets in the porch area not covered with safety caps.

441 IAC 110.8(1)“h” The home shall have at least one single-station, battery-operated, UL-approved smoke detector in each child-occupied room and at the top of every stairway. Each smoke detector shall be installed according to manufacturer’s recommendations. The provider shall test each smoke detector monthly and keep a record of testing for inspection purposes.
Martisha had a smoke detector in her living room that was down and needed to have batteries replaced.
Martisha did not have any documentation for 2023 of monthly testing of smoke detectors.

441 IAC 110.8(3)“b” A first-aid kit shall be available and easily accessible whenever children are in the child development home, in the outdoor play area, in vehicles used to transport children, and on field trips. The kit shall be sufficient to address first aid related to minor injury or trauma and shall be stored in an area inaccessible to children. The kit shall, at a minimum, include adhesive bandages, bottled water, disposable tweezers, and disposable plastic gloves.
Martisha did not have a water bottle in her First Aid kit.

441 IAC 110.8(4) “a” Fire and tornado drills shall be practiced monthly and the provider shall keep documentation evidencing compliance with monthly practice on file for the current year and the previous year.
Martisha did not have any documentation from 2023 for monthly fire and tornado drills.

441 IAC 110.8(4) “b” The provider must have procedures in place for the following:
evacuation to safely leave the facility
relocation to a common, safe location after the evacuation
shelter-in-place to take immediate shelter where you are when it is unsafe to leave that location due to the emergent issue
lock down protocol to protect children and providers from an external situation
communication plan and plans for reunification with families
continuity of operations plans
Procedures to address the needs of individual children, including those with functional or access needs.
Martisha could not find an emergency preparedness plan.

441 IAC 110.9(1)“a” A physician’s examination report for the provider and all members of the provider’s household aged 18 years or older . Acceptable physical examinations shall be documented on Form 470-5152, Child Care Provider Physical Examination Report. All children residing in the household must have medical documentation outlined in 110.9(4) “d”, 110.9(4) “f”, and 110.9(4) “g”
One of Martisha's kids did not have a physical.

441 IAC 110.9(1)“b”(2) Documentation from the department confirming the record checks required under 441 IAC 110.11(3) have been completed and authorizing or conditionally limiting the person’s involvement with child care.
Martisha could not locate this.

441 IAC 110.9(4) Children’s Files. An individual file for each child shall be maintained and updated annually or when the provider becomes aware of changes. The file shall contain:
A signed medical consent from the parent authorizing emergency treatment.
An admission physical examination report signed by a licensed physician or designee in a clinic supervised by a licensed physician
The date of the physical examination shall not be more than 12 months before the child’s first day of attendance at the

child development home.
The written report shall include past health history, status of present health, allergies and restrictive conditions, and recommendations for continued care when necessary.
For a child who is five years of age or older and enrolled in school, a statement of health status signed by the parent or legal guardian may be substituted for the physical examination report.
The examination report or statement of health status shall be on file before the child's first day of care.
Martisha was missing an initial physical for one of preschool aged kids and one of the school aged kids.

Suggestions/Recommendations:

Martisha needs to ensure all outlets have safety caps at all times. She did cover the 2 that were missing caps while I was present.

Martisha needs to replace the batteries in the smoke detector in the living room and put it back up.
Martisha needs to ensure she is testing her smoke detectors monthly and documenting that accordingly.

Martisha needs to add a water bottle to her First Aid kit.

Martisha needs to practice fire and tornado drills monthly and the provider shall keep documentation evidencing compliance with monthly practice on file for the current year and the previous year.

Martisha needs to develop an emergency preparedness plan. She agreed to reach out to her CCR&R support worker for assistance in developing this and she needs to send pictorial verification to this worker when completed.

Martisha needs to obtain a physical for one of her children.

Martisha should try to locate the documentation from the department confirming the record checks required under 441 IAC 110.11(3) have been completed and authorizing or conditionally limiting the person's involvement with child care. If she cannot locate it she should keep the one sent to her at her next review.

Martisha needs to work with the parents to ensure she has all the required documentation for each child's files.

Corrective Action Required:

A re-check is not needed at this time. Corrections need to be made by 1/25/24 and will be reviewed at the next annual compliance check. Plese send pictorial verification of the emergency preparedness plan once developed.

I encourage you to work with Black Hawk County ChildCare Resource and Referral at 319 233-0804 with any ongoing compliance or training needs.

Thank you for your service in providing childcare in your community.

Non-compliance with any of the mandated requirements listed above may lead to the cancellation or revocation of your Child Development Home Registration. Please take whatever steps are necessary to completely address each of the violations noted above. It is essential you correct all above-mentioned violations.

Please do not hesitate to contact me at DHS at 319-429-0749 or cweber@dhs.state.ia.us if you have any questions regarding this letter.

Sincerely,

Christine Weber

Social Worker II

Sheila Aunspach

Social Work Supervisor

Always Remember:

Child Care Resource and Referral is an excellent resource for providers to access training options and support in your area. You can reach Child Care Resource and Referral at 877-216-8481

As you plan your future trainings to meet your 24 hours of training requirement, please remember that you can access the approved training by going to http://www.dhs.state.ia.us/Consumers/Child_Care/Professional_Development.html

You may also access training at: https://ccmis.dhs.state.ia.us/trainingregistry/

All providers need to maintain compliance with rules set out in Iowa Administrative Code, Chapter 110, which includes: 441 IAC 110.5(1): Check with the appropriate authorities to determine how the following local, state, or federal laws apply to you: • Zoning code • Building code • Fire code • Business license • State and federal income tax • Unemployment insurance • Worker's Compensation • Minimum wage and hour requirements • OSHA • Americans with Disabilities Act (ADA).