

Kim Reynolds Governor Adam Gregg Lt. Governor Kelly K. Garcia Director

10/02/2019

Lori Brockett 1422 Agency ST Burlington, IA 52601

Dear Child Care Provider:

This letter is in regards to the follow up at your Registered Child Development Home B conducted on 10/02/2019. 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 110.7	Provider Requirements
441 IAC 110.8	Standards. Conditions in the home are safe, sanitary, and free of hazards.
441 IAC 110.8(3)	Medications and Hazardous Materials
441 IAC 110.8(3)"a"	All medicines and poisonous, toxic, or otherwise unsafe materials shall be secured from access by a child
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(3)"c"	Medications shall be given only with the parent's or doctor's written authorization. Each prescribed medication shall be accompanied by a physician's or pharmacist's direction. Both nonprescription and prescription medications shall be in the original container with directions intact and labeled with the child's name. All medications shall be stored properly and when

Medications shall be given only with the parent's or doctor's written authorization. Each prescribed medication shall be accompanied by a physician's or pharmacist's direction. Both nonprescription and prescription medications shall be in the original container with directions intact and labeled with the child's name. All medications shall be stored properly and, when refrigeration is required, shall be stored in a separate, covered container so as to prevent contamination of food or other medications. All medications shall be stored so they are inaccessible to children. Any medication administered to a child shall be recorded, and the record shall indicate the name of the medication, the date and time of administration, and the amount given

441 IAC 110.8(5) Safe Sleep

441 IAC 110.8(5) "a"

The provider shall follow safe sleep practices as recommended by the American Academy of Pediatrics for infants under the age of one.

- a. Infants shall always be placed on their back for sleep.
- **b.** Infants shall be placed on a firm mattress with a tight fitted sheet that meets Consumer Product Safety Commission federal standards.



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- **c.** Infants shall not be allowed to sleep on a bed, sofa, air mattress or other soft surface. No child shall be allowed to sleep in an infant seat, car seat, swing, bouncy seat, or items not designed for sleeping.
- **d.** No toys, soft objects, stuffed animals, pillows, bumper pads, blankets, or loose bedding shall be allowed in the sleeping area with the infant.
- e. No co-sleeping shall be allowed.
- f. Sleeping infants shall be actively observed by sight and sound.
- **g.** If an alternate sleeping position is needed, a signed physician authorization with statement of medical reason is required.

441 IAC 110.9

Files

441 IAC 110.9(1)

A provider file is maintained and shall contain the following:

441 IAC 110.9(2)

An individual file is maintained for each staff assistant and contains:

- Documentation from the department confirming the record checks required under subrule 110.11(3) have been completed and authorizing or conditionally limiting the person's involvement with child care
- 2. A completed Form 470-5152, Child Care Provider Physical Examination Report. The examination shall include any necessary testing for communicable diseases; a discussion of recommended vaccinations; completed no more than six months prior to approval to assist or be a household member; completed by a licensed medical doctor, doctor of osteopathy, physician assistant or advanced registered nurse practitioner; and repeated at least every three years.
- 3. Certification of two hours of approved training related to identification and reporting of child abuse as required by Iowa Code section 232.69 within 3 months of employment.

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



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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
- **I.** 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:

Chad Reckling, SW II conducted a follow up compliance visit to the home on 10/2/19. The following were observed:

Lori needs to unplug her hair dryer and curling iron from her master bathroom. This was observed to be completed.

Lori needs to remove animal prescription medication from the countertop of the kitchen next to the refrigerator and place it in a child inaccessible area. This was observed to be completed.

Lori needs to add a bottled water to her first aid supplies. This was observed to be completed.

Lori needs to show documentation of a current physical for Payton on the Childcare Provider Physical Examination Report Form. This was observed to be completed.

Lori needs to show documentation of current course completion for Mandatory Reporter Training for Child Abuse for Payton. This was observed to be completed.

Findings after visit was completed: None

Suggestions/Recommendations:

Corrective Action Required:

No further action is required.

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) 208-5521/creckli@dhs.state.ia.us if you have any questions regarding this letter.



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Sincerely, Chad Reckling

Social Worker II

Machelle Pezley

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 563-324-3236

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).