Iowa Department of Human Services
CHILD CARE CENTER EVALUATION AND RECOMMENDATION FOR LICENSE

Name of Center: Drake University Head Start-Highland Park **Enrollment:** 14 **License ID No. (Reapplications)** 28323

Street: 4260 NW 6th Dr **City:** Des Moines Iowa **Zip** 50313 **County:** Polk

Mailing Address: 3800 Merle Hay Rd Suite 323, Des Moines, IA, 50310

Director's Name: Kim Puetz **Phone Number:** 515-237-3421

On-Site Supervisor(s): Ramona Bates **E-Mail:** Kimberly.puetz@drake.edu

Date(s) of Visit: 12-12-2024

Licensing Visit X **Unannounced Visit** X **Off Year Visit** **Administrative Change**

LICENSING VISITS

New Application X **Re-Application** **NA**

Signed Application (470-0722) Received X **Yes** **No** **NA** **Date Signed:** 10-16-2023

FIRE INSPECTION X **State** **Local** **NA** **Is Fire Inspection Approved?** X **Yes** **No** **NA**

Date Inspected: 02-14-2025

Comments :

LICENSE TYPE: **Child Care** X **Preschool (ages 3-5 meets three hours or less per day)**

Financial Type: Profit X Non-Profit NA

Accredition: Accredited NAEYC NSACA Other X NA

Program Serves: Infants (0-23 mo.) 2 Years X Preschool-Age School-Age

Get-Well Evening Care Special Needs

SCHEDULE: Year-round X School-Year Summer Only

HOURS:	*Year-round*	*School-Year*	*Summer Only*

LICENSE CAPACITY	Infants	2 Years	Preschool	School-Age	Capacity
General			17		17
Summer					0

QRS Rating: 3

RECOMMENDATION FOR LICENSE:	
X	**FULL** license from 12-01-2023 to 12-01-2025
	PROVISIONAL license from
	DENIAL of initial application
	SUSPENSION of license
	REVOCATION of license

Licensing Consultant: Melinda Larson, Child Care Licensing Consultant **Date:** 12-19-2024

I. IF CURRENT LICENSE IS PROVISIONAL, IDENTIFY THE CORRECTIVE ACTIONS

II. IDENTIFY THE AREAS OBSERVED ON THE VISIT:

Drake University opened an Early Head Start classroom at this location in 2008. The preschool is located in one classroom in the lower level of Highland Park Christian Church. This site serves children ages three to five. Ramona Bates is the lead teacher. Ramona started with Head Start in 2016. Ramona has a Bachelors degree in Early Childhood Education. Ramona has several years of experience as a teacher at another preschool prior to coming to Head Start. The assistant teacher is Heather Jackson.

An unannounced visit was completed on today's date. All areas subject to HHS licensing rules were reviewed. Mandatory postings are in place. A class schedule and lesson plan are posted. The classroom has labeled learning centers. The classroom has developmentally appropriate furnishings, toys and learning supplies.

Ramona in not on work status. A sub, Tara Dake, assisted with the visit. A sub for the associate was working today. There were ten children present today. Children were observed in the classroom. Child directed play and learning time, transition times and lunch was observed today. Staff were actively involved in the children's activities. Staff supported the children and supported the children as needed.

The center serves breakfast, lunch and afternoon snack. The center gets lunches from Des Moines Schools. Menus reflect the center follows CACFP requirements. Lunch served today was crispitos, green beans, mixed fruit and milk.

The center has a playground that has fencing. There is surfacing material in place. Playground checks are completed by staff.

The center doesn't provide transportation.

III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:

Head Start classrooms have many learning centers that are well supplied with age appropriate play and learning materials. Children benefit from Head Start's ability to have other early childhood professionals participate and support children's educational and health needs. Head Start Programs do a good job maintaining administrative records.

IV. IDENTIFY THE ASPECTS OF OPERATION THAT FALL BELOW THE STANDARDS REVIEWED:

There were no licensing violations cited today.

V. SPECIAL NOTES/RECOMMENDATIONS:

The center has a full license.

*Note: If you are the Child Care Center Director and you feel something is unclear or unjustly cited, please contact me (phone 515-362-7823; email melinda.larson@hhs.iowa.gov) so that we may discuss the issue. If necessary, I can make a notation in your record. You may also send a letter that will be included in your licensing file noting any disagreement you may have with this report. If you have the need for any additional information discussed during my visit, please contact me and I will forward the information to you. Thank you.

*Note: If you are a member of the general public, there may be additional information contained in the public file. You may contact the DHS Licensing Consultant to inquire.

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