Health and Human Services

Iowa Department of Health And Human Services

CHILD CARE ANNUAL EVALUATION

Business Name: Agnes Gbarjolo

Provider Name: Agnes Gbarjolo

Provider No.: 52971

Address: 1112 SE 3rd St, Grimes, IA, 50111

E-Mail:

County: Polk

Phone Number: 3157486852

- [ ] Pre-Inspection Date:
- [ ] Approval Date:
- [X] Annual Visit Date: 6/2/2026

Program Type:

- [X] Registered Child Development Home A (guidelines for ratios on all categories)
- [ ] Registered Child Development Home B
- [ ] Registered Child Development Home C
- [ ] Registered Child Development Home C1
- [ ] Non Registered Child Care Homes accepting CCA

Program Population Served:

- [ ] Infant(0<24 mos)
- [ ] Toddler
- [ ] PreSchool
- [ ] School Age
- [X] All Ages

1. Basic Overview

Agnes Gbarjolo has been a registered provider since September of 2025. Agnes is currently a category "A" Child Development Home Provider. This category allows Agnes to have 6 preschool children with an additional 2 school aged children for a total of 8 children in care at one time. Agnes is available for care 24 hours a day 7 days a week. There are no pets in the home.

2. Identify Observed Strengths Of The Program

Agnes is current with her required trainings as reviewed by the Registration Unit. Agnes has completed Safe Sleep training, and this worker reviewed the policy with her. Agnes will implement the practice when she has children 12 months or younger in her care. Agnes has toys available for the children to interact with when in her care. Agnes is available to care

for families with non-traditional scheduling needs. Agnes can provide transportation for families in her care. Agnes uses redirection and Time Out as her primary behavioral interventions when needed. Corporal punishment is not practiced in the Child Development Home. Children in Agnes' care receive regular meals and snacks as appropriate.

3. Identify The Aspects That Fall Below The Standard

110.8 (4) b : Procedures are in place for:Evacuation to safely leave the facility,Relocation to a common, safe location after evacuation,Shelter-in-place to take immediate shelter where the child is when it is unsafe to leave that location due to the emergent issue,Lock down to protect children and providers from an external situation,Communication and reunification with families,Continuity of operations, andProcedures to address the needs of individual children, including those with functional or access needs.
110.9(4) : An individual file is maintained for each child and updated annually or when there are changes. Each file contains:
110.9 (4) 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.
110.9 (4) b : Emergency information including where the parent can be reached, the name, street address, city, and telephone of the child's regular doctor, and the name, telephone number, and relationship to the child of another adult available in case of emergency.
110.9 (4) c : A signed medical consent from the parent authorizing emergency treatment.
110.9 (4) d : For infants and preschoolers: An admission physical examination, on the first day of attendance, including past health history, status of present health, allergies and restrictive conditions, and recommendations for continued care when necessary. The date of the exam is not more than 12 months before the child's first day of attendance.
For school-aged children: On the first day of attendance, a statement of health status signed by the parent or legal guardian or admission physical examination that is not more than 12 months from the child's first day.
110.9 (4) e : For infants and preschoolers: A statement of health signed by a physician submitted annually.
For school aged children: An annual statement of health condition signed by the parent or legal guardian, annually from date of statement of health or admission physical.
110.9 (4) f : For each school-age child, record of a physical exam completed at the time of school enrollment or since.
110.9 (4) g : A signed and dated immunization certificate provided by the state Department of Public Health.
110.9 (4) h : Written emergency plans for children with allergies. Must accompany child if away from facility.
110.9 (4) i : Documentation signed by the parent which names persons authorized to pick up the child, their telephone number, and relationship to the child.
110.9 (4) j : Written permission from the parent(s) for their child to attend activities away from the child development home.
110.9 (4) k : Injury report forms to document injuries requiring first aid or medical care.

1. Each child in care needs to have their individual emergency numbers written on paper and easily available. I left a blank form for you to use. You currently have two private pay families who should be listed.

2. An Emergency Preparedness Plan needs to be completed and easily available. I made a referral to your Child Care Resource and Referral Worker to assist you with completing this correction.
Have procedures in place for the following:
• Evacuation to safely leave the facility
• Relocation to a common, safe location after 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
• Plans for the continuity of operations
• Procedures to address the needs of individual children, including those with functional or access needs

Please send me a copy of the plan when completed within 30 days of receiving this letter.

3. Each child in care needs to have an individual file containing specific demographic, medical, and releases. You have 2 children in care at times so there should be 2 child files. I made a referral to your Child Care Resource and Referral Worker to assist you with completing this correction.

4. Any corrective action plans, provisional license, and safety plans-steps to get into compliance

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None.

5. Special Notes/recommendations

I encourage you to work with your Child Care Resource and Referral Worker (Heather Sheesley 515-360-7308) with any training or compliance efforts.

The above corrections need to be completed by 8/4/2026 unless otherwise noted and will be reviewed on your next annual compliance check.

If you have any questions regarding this letter, please contact me at 515-601-9469 or jake.aringdale@hhs.iowa.gov.

HHS Child Development
Home Compliance Worker: Jake Aringdale Date: 6/4/2026

Non-compliance with any of the mandated regulatory 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.

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