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

Name of Center: Singing Cedars **Enrollment:** 15 **License ID No. (Reapplications)** 51137

Street: 2149 N. B ST **City:** Fairfield Iowa **Zip** 52556 **County:** Jefferson

Mailing Address: 2149 N. B ST, Fairfield, IA, 52556

Director's Name: Angelina Hart **Phone Number:** 641-632-2230

On-Site Supervisor(s): **E-Mail:** info@singingcedars.com

Date(s) of Visit: 01-31-2025

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

LICENSING VISITS

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

Signed Application (470-0722) Received X **Yes** **No** **NA** **Date Signed:** 05-03-2024

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

Date Inspected: 08-22-2023

Comments : completed by State Fire Marshall Fratzke, due every 3 years

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

Financial Type: Profit X Non-Profit NA

Accredition: Accredited NAEYC NSACA X Other NA

Program Serves: Infants (0-23 mo.) X 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		9	15		24
Summer					0

QRS Rating: 1

RECOMMENDATION FOR LICENSE:	
X	**FULL** license from 12-01-2024 to 12-01-2026
	PROVISIONAL license from
	DENIAL of initial application
	SUSPENSION of license
	REVOCATION of license

Licensing Consultant: Jill Seibert **Date:** 02-17-2025

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

II. IDENTIFY THE AREAS OBSERVED ON THE VISIT:

Singing Cedars is a 501(c)3 non-profit, independent preschool, inspired by Waldorf education, located on the edge of Fairfield, IA. The childcare program is part of the school. The childcare program is housed in two single one story buildings on the school campus but not attached to the other school buildings. The program has operated in the past as a private school and became licensed in 2020. The Red building serves children ages 3-6 (14 children with two teachers). They Grey building serves children ages 2.5-4 years old. It consists of 9 children and two teachers.

The director of the program is Angelina Hart (2024). Director Hart has a BA in Human Development and Family Studies-Child Option. She directed another program for four years prior to taking this position. The preschool was under operation in the same location under a different name for many years prior to becoming licensed in 2020. On 1/31/25 I made an unannounced off year visit to Singing Cedars Preschool and met with Director Hart. The program is searching for a new OSS.

The program consists of two buildings, one for younger children and one for preschool/school age children. Each space contains a small kitchen area, a restroom and open space for the classroom. The buildings are clean, bright, open, attractive and equipped with a wide variety of child sized furniture, equipment, and Waldorf style toys and learning activities.

All program areas were observed during the visit. The visit consisted of classroom and building area review and observations of activities, ratios, nutritional practices, health and safety practices, playground observation, field trip and transportation practices, and administrative review.

Program Nutrition Practices Observed:

The program provides a mid-morning snack and children go home for lunch or bring their own. The Director prepares the snack before children arrive. Children bring pm snack. The Director documents snack records which indicate minimum nutritional requirements are met. The program supplements lunches and snacks if they do not meet CACFP requirements.

Food allergies will be posted if they arise. We discussed the Allergy Action Plan and where to access it if need be in the future.

Sufficient refrigeration and storage is available in the kitchen area to facilitate food services. I inspected the refrigerator and freezer. No opened food items were observed. Recommended temperatures for cooling are 40 degrees or lower and zero degrees and lower for freezing. The refrigerators were clean.

Other food storage (dry) was appropriate. No food was stored on the floor. No dry food had been opened which was not placed in a sealed container. No expired or outdated food items were observed. Dishes are washed by hand. Children do not have access to the oven since small barricades are in place.

Program Health and Safety:

The program does not administer daily prescription or non-prescription medication on a regular basis. They will administer emergency medication if necessary. Medication procedures were reviewed. The center has sufficient forms for getting parent authorization and documentation of medications to be given if needed or prescribed. Medications (including sunscreen) will be stored in their original containers with physician/pharmacist directions and label intact when on the premises.

Regulations regarding storage and maintenance of a first aid kit were reviewed. A labeled First Aid Kit is onsite and kept inaccessible to children. First-aid supplies were sufficient to address minor trauma. A quiet area for ill or injured children should be designated.

Environmental testing and the maintenance of any necessary detection equipment were reviewed. Radon testing is due every five years. Testing has been completed. Results from testing in October 2020 were 1.6 pci/L. An annual fuel burning appliances inspection is not required since the buildings are all electric. Carbon monoxide detectors are also required and the preschool has purchased one for each building. It must be a non-battery operated UL approved unit. The packaging on the unit should have an expiration date for the unit. The building was constructed after 1971 so a Visual Lead Based Paint Assessment is not required. The mud room was added in 2009/2010 so is exempt from a lead based paint assessment. The program is on city water, therefore a water analysis is not required.

General regulations regarding safety policies and procedures were reviewed. No employees of the center are under 18 years of age. The program team consists of the Director and four other staff. The rooms have free flowing arrangement that allows the children space and movement. An appropriate amount of program equipment, toys and activities were noted and materials are present and frequently rotated.

Staff should have children broken into care groups so supervision is easily achieved. Children shall be supervised and be observable by staff at all times. Children should not wander around the premises without adult supervision. Children should be assigned to staff for primary care.

Thorough inspections of the rooms (restroom, classroom, mudroom) were conducted. Space requirements of 35 square feet of usable floor space should be met at all times. The rooms (classroom and mudroom) are open which allows staff to supervise children from across the room. Ventilation was adequate.

Ceilings are high creating a great amount of light and space. Windows can be opened when weather is appropriate to assist in ventilation. Tornado and Fire drills were discussed observed and complete with the exception of March.

General regulations regarding sanitation policies and procedures were reviewed. Waste containers were covered. One restroom is available for the children and staff in each building. The bathroom was clean and had an adequate amount of toileting supplies. For further guidance on general sanitation issues IDPH CCNC may be consulted.

During rest after lunch children are spaced at least 2 feet apart.

Red building (ages 3-6): 15 children with two teachers
Grey building (ages 2.5-4): 9 children with two teachers
All EC staff have been informed of the ratio requirements, and it is understood that subs need to have completed all required trainings/ volunteers do not qualify to meet ratio. The Director is requesting an Exception to Policy to allow the mixing of children ages two and up.

All volunteers to the center should have the following requirements met:
Volunteers should always be under the direct observation of staff. All volunteers and substitutes shall sign a statement indicating whether or not they have one of the following:
a. (1) Conviction of any law in any state or any record of founded child abuse or dependent adult abuse in any state.
(2) A communicable disease or other health concern that could pose a threat to the health, safety, or well-being of the children.
b. (1) Complete form 595-136 DHS Criminal History Record Check, Form B
(2) Complete Form 470-0643, Request for Child Abuse Information.
(3) Sign a statement indicating the volunteer or substitute has been informed of the volunteer's or substitute's responsibilities as a mandatory reporter.
Any visitors to the Center shall complete the tasks above.

Program Playground:

The outdoor play area is naturally shaded with many trees behind the building. The area is open and grass surfaced for gross motor activities. The area is a natural play scape inviting children to explore.

No safety hazards were observed in this area, due to snow cover. The playhouse in the outdoor play area should be monitored at all times if more than one child is inside. During gross motor activity each child should have at least 75 square feet of space each.

Outdoor play inspections were observed, and HHS reminded the new Director to resume these.

Preschool Transportation Arrangements/Field Trips:

The preschool does not own a vehicle and provides no transportation. Field trips are not taken. The program ay take walks on school campus.

Preschool Administrative Records:

Required written policies are provided to parents in the form of a parent handbook. Required notices and postings were present after the visit. These were provided by CCR&R. A No Smoking sign and all other mandatory postings included Mandatory Reporting, Consultant Contact Information and the Center license are now present. Poison Control and 911 are also posted.

The regular teaching team consists of 4 staff, who are present every day. Staff files are reviewed annually including CPR/First Aid training (2 years), Mandatory Reporter training (must be updated every 3 years), physicals (every three years), signed statements of criminal conviction (only one time at beginning of employment), Fingerprints (due every 4 years) were reviewed. Professional development updated annually was present. Iowa Criminal Background checks (due every 2 years) were current. Staff are taking CPR/1st Aid this month.

Child files and all annual updates including field trip authorizations, emergency contacts and pick up authorizations were reviewed. Physicals should be updated annually. Immunizations are in the files. The CCNC with the Iowa Department of Public Health can conduct an immunization audit annually. Children with allergies have allergy action plans on file. Staff supervising the children should be trained on the plan.

Annual emergency procedures training should be held and documented annually. The Emergency Preparedness Plan is complete and specific for both buildings. The Director agreed all staff will sign and dated acknowledgement of annual training on the plan.

III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:

The class size is small and teachers are very interactive.

The Director has consulted with Child Care Resource Consultant Malia Love on a number of issues.

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

1. 109.6(5)c: Undergo record check process if: It is included in meeting the required child/staff ratio. Has direct responsibility for a child or children. Has access to child or children when no other staff is present.

109.6(6)c: Center repeats Iowa record checks at a minimum of every two years or when aware of additional child abuse or criminal history that occurs.

The Director sent in RCEs after the visit. These were sent in on two employees after the HHS visit.

2. 109.7(1): All staff(within first 3 months of employment) Two hours of approved training FOR the mandatory reporting of child abuse. At least one hour of training regarding universal precautions and infectious disease control. Certification in American Red Cross, American Heart Association, American Safety and Health institute or MEDIC First Aid infant, child, and adult cardiopulmonary resuscitation (CPR) OR equivalent certification approved by the department. A valid certificate indicating the date of training and expiration date shall be maintained. Certification in infant, child, and adult first aid that uses a nationally recognized curriculum or is received from a nationally recognized training organization including the American Red Cross, American Heart Association, American Safety and Health Institute or MEDIC First Aid or an equivalent certification approved by the department. A valid certificate indicating the date of training and expiration date shall be maintained. Minimum health and safety trainings, approved by the Department. If significant changes occur to content, the Department may require the training be renewed.

The Director agreed to ensure all staff secure all required trainings.

3. 109.11(3)d: Record of monthly inspections of outdoor recreation area and equipment shall be kept. The Director agreed to begin inspections again.

4. 109.9(2)g Any child with allergies, a written emergency plan. Copy shall accompany child if they leave the premises. The Director agreed to send the AAP home with parents. The Director will ensure all child physicals and updates are current.

5. 109.15(2) Center shall follow minimum CACFP menu patterns for meals and snacks. Menus planned one week in advance, made available to parents, and kept on file with substitutions noted. The Director agreed to begin keeping detailed menus at both buildings.

On 2/17/25 the Director gave the following update via email, "
1. Staff files have been updates with current HHS replies for the two teachers with background check issues
2. Patricia has updated SING report
3. Curriculum print out has been updated and posted in the Red Room
4. Snack menu is posted in both classrooms
5. Refrigerators have thermometers and temp logs posted.
6. Both playgrounds have laminated check lists that will continue to be updated on a monthly basis,
7. First Aid sheets are updated in backpacks
8. Allergy Action Plan is laminated and added to backpack of the two children with a plan and also posted on the inner cupboard of the classroom, in addition to their file.
9. Immunizations are in their own file
10. The Child's File Sheet is filled out completely, reflecting the forms that are in Brightwheel.
11. Heather's file has a print out of the Mandatory Reporter that she took in August.
12. Heather has CPR certificate that she took in August.
13. Heather's Essentials is now showing up in iPower, that was completed within her first 90 days, but was having an issue showing up.
14. Virginia is aware that she needs 6 hours before July and is on the lookout for classes that suit her schedule.
15. Madeline is working on uploading her paperwork to iPower so that she can be the site supervisor.

I believe that covers it and addresses everything that needed addressing.

Warm regards,
Angelina Hart
Administration"

V. SPECIAL NOTES/RECOMMENDATIONS:

Iowa Department of Public Health Child Care Nurse Consultant Mandi Lauderman performed an Injury Prevention Checklist both outside and inside last year. This is best practice and is duly noted.

The program has been working with the IJK Early Childhood Iowa Board in quality initiatives and maintaining licensing.

Based upon this review, it is recommended that this preschool remain in Full licensing status. The center is directed to continue to monitor day to day practice and adjust accordingly to continue to ensure licensing rule is met consistently. It is important to note, all HHS licensing standards and procedures must be maintained during the renewal period.

HHS encourages you to contact your local nurse consultant. Child Care Nurse Consultants work with child care and early education businesses. Businesses may call or send questions to a child care nurse consultant about health and safety policies, health programs, health of personnel, and specific child health or safety issues. Please visit the following website for more information. http://idph.iowa.gov/hcci/consultants.

HHS encourages you to contact Child Care Resource and Referral consultant. They offer centers assistance with meeting the DHS regulations, QRS, infant/toddler concerns, room arrangement and environment, developmental concerns, Best Practice information, CDA assistance, or any questions or concerns you may have. Please visit the following website for more information: http://www.iowaccrr.org Malia Love is the facility consultant.

Consultant Love provided the following the past year:

2/13/2024-Spoke and assisted staff with enrolling in training on i-Power.

2/14/2024-The director reached out with questions about staff requirements and when they could be in ratio. I replied with an email and attached a document breaking down what was needed prior to start date, within 90 days and annually there after.

2/21/2024- Spoke with director Jill Weber about her leaving at the end of the school year and what the transition plan was for the new director. She said she would let me know when they had someone hired and in place.

3/18/2024- Director Jill Weber reached out asking how the school would go about applying for and receiving CCA. I provided resources and contact information.

3/22/2024-The director called with questions about administering medication to a student and if there was documentation needed. I let her know about the medication form and that someone on staff who had taken med admin would need to be the one to administer it. I followed up our call with an email, attaching the form and explaining what and when it needed documented.

4/19/2024-Staff Erin Levi reached out asking about what would be needed to create a sub pool. I replied and let her know that subs would be recognized by the state as regular staff and would therefore be required to have all the same documentation, background checks, fingerprints, and training as staff.

5/17/2024-Spoke with the director Jill Weber who said that the new director would start in July and Jill would stay on to support the transition till Feb. I offered support and a visit to help with the transition.

7/16/2024-The director reached out via phone to discuss the transition of the new director and the support and assistance I could provider. We briefly touched base about IQ4K and both agreed having the director comfortable with HHS standards was the first step. I looked up the new directors i-Power account and let the current director know what items needed to be uploaded before making a role request. Both the current and new director will contact me to set up a visit once the new director has completed her trainings.

7/29/2024-I emailed with the new director Angelina Hart to let her know what needed to be added and updated in her iPower profile to be approved as the new director.

7/31/2024-I met with the new director Angelina Hart. We went over her director qualifications documents and discussed i-Power and where she would upload each item. We discussed trainings for her and for staff as well as child files and staff files. We put a plan in place for transitioning her into the role. We will briefly touched on IQ4K and decided to wait to look at that until she had all of her HHS pieces in place. I followed up our visit with emails attaching, staff/child file forms, training links, HHS binder template, and a copy of the directors worksheet to fill out.

8/12/2024-Gave the director Angelina Hart information about getting an exemption to the rule around mixing age groups. They had one the previous year so 2s could be with 3's and children who would turn 4 during the school year. I provided the online form.

8/14/2024-I met with the new director and we went over staff and child file requirements and I showed her how to locate the emails I sent with the master copy forms for each. We went through i-Power and I showed her how to add and remove staff. We went over the SING Guide and how to run those checks. We discussed fingerprinting and where those go. While there I contacted Amy Hayes the CCNC who does CPR/First Aid for Region 5 and connected her with Angelina to set up a test out for CPR. We agreed to meet again after the start of the school year to do a walk through of the classrooms. I followed up our visit with an email attaching links to the required HHS trainings and the documents for setting up accounts. I also sent her information for the state CACFP contact and the training contact for CCRR to look at becoming a trainer.

8/15/2024-The program reached out with questions about licensing and climbing play structure. After sending the photo to the HHS license consultant, I let the program know that they would need fall surfacing and anchoring for the structure. I recommended they speak with the CCNC Mandi Lauderman

8/25/2024-Director asked about mixing age groups and the rules around that. I sent her the copy of the ratio chart and the mixing ages information from Comm 204 and broke it down with examples in the email.

8/26/2024-The program staff reached out asking about what trainings needed to be updated and when. I followed up our call with an email attaching the staff PD record as well as the timeline and renewal periods for trainings.

8/28/2024-Staff Erin Levi reached out with questions about training hours and how often they were needed. I replied with a screenshot of the training page with a breakdown of the training requirements.

9/18/2024-Dropped off tweezer and First Aid Kit Checklists for their new First Aid Kit Bags

11/06/2024-During an IQ4K visit, I assisted the director with looking up staff i-Power profiles. I followed up with an email attaching the step by step for creating an i-Power and ISU Moodle account.

11/7/2024-Looked up staff PD information and sent it to the director.

12/2/2024-Provided director with information and contacts for requesting more fingerprint cards.

1/29/2025-I met with the director and we went over the licensing checklist in preparation of their HHS compliance visit. We went through i-Power and cleaned up staff, looked at staff files, reviewed the child file system in bright wheel I encouraged the director to take time to check all the child files for dates and correct and complete forms. I walked the director through how to access her old MCART training record in the new site. We then did a walk through of each classroom. I noted missing postings, the need for allergy action plans and where to place those and the monthly checklists. I followed up with an email, attaching fillable child forms, a list of the missing postings, blank copies of action plans, menu template and the snack components for CACFP.

2/3/2025-Met with the director and assisted her with running SING Checks, I explained the Record Check Process to her and provided her with the form she needed to have staff fill out. I went over incident reports and explained that she should be documenting ALL incidents and encouraged her to send any about staff and children to the complaint line. I encouraged her again to look through each child's file and make sure it was up to date. I reminded her that allergy plans needed to be signed by a doctor and kept on file in the child's file, the classroom and in the first aid bag in the classroom. I also encouraged her to check all the child physicals for allergy information and to make sure if it wasn't on the child physical form that the information matched up with the state form and had a dr. Signature.

*Note: If you are the Child Care Center Director and you feel something is unclear or unjustly cited, please contact your DHS Licensing Consultant to discuss the issue. The child care director may also send a response which will be placed in the licensing file.

*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.