Health and Human Services

Iowa Department of Health And Human Services

CHILD CARE ANNUAL EVALUATION

Business Name: Cassie King-Wander

Provider Name: Cassie King-Wander

Provider No.: 45830

Address: PO Box 161, Clermont, IA, 52135

E-Mail:

County: Fayette

Phone Number: 5634228303

☐ Pre-Inspection Date:

☐ Approval Date:

☒ Annual Visit Date: 4/28/2026

Program Type:

☐ 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

☒ All Ages

1. Basic Overview

Cassie became Registered in 20015. She did report having about 3 years of childcare experience in a center prior to that. She does not participate in the IQ4K quality rating system. She does participate in the Food Program. Cassie shared that she is willing to care for children from the ages of infant through school-age. She provides first shift childcare. Currently Cassie is only using the main level of her home for childcare. She did note that she might use the lower level if she is able to get it organized. We did discuss the expectations if she would utilize that level for childcare. She does have an appropriate secondary exit. Cassie does have three dogs. Cassie shared that the dogs are kept separate from the childcare children. Cassie's son is approved as an assistant, and she has another individual approved as both an assistant and substitute.

2. Identify Observed Strengths Of The Program

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Cassie had 4 children present on this date. One was her own young child that does count towards the number of children she is allowed. This worker did observe the children in free play. Cassie did provide the children a snack while I was present.

Cassie described that she offers free play, and items like blocks and will also read to the children and work on colors and numbers.

3. Identify The Aspects That Fall Below The Standard

110.8(1)a. Number for each child's parent, a person who can be reached when the parent cannot and child's physician is written on paper and readily accessible by the working telephone.
Cassie had a written list but it did not include all of the children enrolled.
*Cassie needs to update her written list of children, emergency contact and physician to include all of the children currently enrolled in care.

110.8 (1) p : The provider has written policies about caring for mildly ill children and the exclusion of children due to illness, and informs parents of policies.
110.8 (1) q : The provider has written policies about responding to health-related emergencies.
Cassie could not locate either of these written policies. (She did state she thought she had them in each child's file, but there were none to be located on this date)
*Cassie needs to locate the written policies noted above and she needs to send pictorial verification to this HHS worker.

110.8 (3) a : All medicines and poisonous, toxic, or otherwise unsafe materials are secured from access by a child.
Cassie did have chemicals/cleaners under her kitchen sink, and this cabinet was not secured upon this workers arrival.
Cassie did locate the latch, and she did secure the cabinet while this worker was present.

110.8(3)b. The first-aid kit shall, at a minimum, include adhesive bandages, bottled water, disposable tweezers, and disposable plastic gloves.
Cassie did not have the required water bottle with her First aid kit.
*Cassie needs to obtain a water bottle for her First Aid kit.

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, and
Procedures to address the needs of individual children, including those with functional or access needs.
Cassie did have an Emergency Preparedness Plan, but it referenced only one exit from the main level and she has two exits. It also needed some additional modifications/corrections.
*Cassie needs to update her Emergency preparedness Plan and send pictorial verification of compliance to this HHS worker.

110.9 (2) b : Assistant: Within six months of approval, a Physical exam report documented on form 470-5152, Child Care Provider Physical Examination Report, which is repeated at least every three years.
*Cassie needs to obtain an updated/current physical for Sebastian on the approved HHS form.

110.9 (3) b : Substitute: Within six months of approval, a Physical exam report documented on form 470-5152, Child Care Provider Physical Examination Report, which is repeated at least every three years.
*Cassie needs to obtain an updated/current physical for Samantha (assistant and substitute) on the approved HHS form.

Cassie also had difficulty locating the current Mandatory Child Abuse Reporter training for both Sebastian and Samantha so she should obtain a file for each of them and keep all of their required documentation in one location.

110.9(4) : An individual file is maintained for each child and updated annually or when there are changes.
Cassie could not locate a file for 2 of the children in care on this date.
*Cassie needs to ensure she maintains a file for each child and it needs to be updated/reviewed annually by parents and signed and dated accordingly.

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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.
110.9 (4) l : If a child meets definition of homelessness, required medical documentation is obtained within 60 days of enrollment.

Cassie was missing 2 complete files for 2 of the children present on this dated and a physical and immunization record for a 3rd child.

*Cassie needs to ensure that she has a file for each child and work with the parents to obtain all of the required documentation for each child.

A re-check is not needed at this time. The above corrections should be made within 3 weeks (by 5/19/26) and will be reviewed at the next annual compliance check.
Please send pictorial verification of the items where specifically noted above to christy.weber@hhs.iowa.gov or text to 319-429-0749.

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

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

NA

5. Special Notes/recommendations

Notes:
Cassie shared that she does not transport the childcare children.
Cassie does not have a fenced in yard and her neighbors have an above ground pool. There yard is also not fenced. We did discuss close supervision and pool safety.
We did discuss safe sleep policies.
We did discuss the number of children she is allowed to care for at one time as a Category B provider.

As part of the 2026 Targeted compliance the Emergency Preparedness Plan was thoroughly reviewed. As noted above, Cassie does need to make some modifications to her Emergency Preparedness Plan. Cassie needs to send pictorial verification of those changes to HHS.
She was encouraged to review it at least yearly to ensure that no changes need to be made.

Recommendations:

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Cassie did not yet have anything written in regard to notifying parents in writing that the state does allow parents to submit an exemption for immunizations (either religious or medical) in lieu of the immunization record for each child. This is a new expectation for providers effective 7/1/25 so we did discuss this, and she agreed to get that documented accordingly.

Cassie did have some folders and some binders with a variety of documentation. However, while this worker was present, she could not locate files for 2 of the children and struggled to locate various other items for documentation. After some time and checking her phone and rechecking files from the basement, she was able to locate some of the required documentation but still not all. Cassie was encouraged to take some time to organize the documentation and better utilize the binders she does have for organization.

6. ADDENDUMS:

- Addendum1: As of 5/6/26 Cassie has sent pictorial verification of the compliance items that were requested.

This Addendum is approved by supervisor on 5/6/2026

HHS Child Development
Home Compliance Worker: Christine Weber Date: 4/29/2026

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 I encourage you to work with Lisa Wood with Child Care Resource and Referral if you have any ongoing compliance or training needs. Lisa Wood can be reached at 319-334-5900