Health and Human Services

Iowa Department of Health And Human Services

CHILD CARE CENTER ANNUAL EVALUATION

Name of Center: Calvary Family Center Day Care

Provider No.: 48658

Address: 1318 10th AVE SW, Fort Dodge, IA, 50501

County: Webster

Director's Name: Vickie Zimmer

On-Site Supervisor: Shantell Ayala

Phone Number: 5155735866

E-Mail: Cfcdaycare123@outlook.com

HHS Visit Date: 05/11/2026

Licensing Period: 08/01/2025 to 08/01/2027

Fire Inspection:

Date Inspected: 10/14/2021

Comments:

Report Visit Type:

- [ ] PTO
- [X] Licensing Visit
- [ ] Drop In
- [ ] Administrative Change

License Type:

- [X] Full
- [ ] Provisional

Quality initiative:

- [ ] Accrediation

Program Duration:

- [X] Year-Round
- [ ] School Year
- [ ] Summer Only

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HOURS:	*Year-round*	*School-Year*	*Summer Only*
Sunday			
Monday	6:30 AM to 5:00 PM		
Tuesday	6:30 AM to 5:00 PM		
Wednesday	6:30 AM to 5:00 PM		
Thursday	6:30 AM to 5:00 PM		
Friday	6:30 AM to 5:00 PM		
Saturday			

Program Population Served:

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

LICENSE CAPACITY	Infants	2 Years	Preschool	School-Aged	Capacity
General	19		20		39
Summer					0

1. Basic Overview

An unannounced annual visit was made to the Calvary Family Center Daycare in Fort Dodge on on 05-11-26 where I met with center director Vickie Zimmer. Vickie took over the director role in 2022 and is qualified for the position based on her experience, and on-going professional development. The program is located in the Community Center building of the Calvary Memorial Church in Fort Dodge and is operated as a non-profit program overseen by a board of directors from the church. The program provides care to infants through school age children. There are currently 27 children enrolled in the program served by 7 staff. All areas of the program subject to licensing standards were reviewed during the visit.

The general layout of the building and classrooms remains much the same as in prior visits. The program operates on two levels of the facility with infants on the upper level, and toddlers through school age children on the lower level. The toddlers, preschool, and school age children make use of space on the lower level. Each classroom has direct exits to the outdoors which were observed be clear of obstruction and opened easily. Each classroom has windows along the exterior walls that provide natural light, ventilation, and a view of the outdoors. Restrooms are located in hallways just off the main programming rooms. An additional sink is present in the infant area to facilitate hand washing. Each room is divided into activity centers through the placement of play structures, and furniture which were arranged so as not to create any blind areas. It was noted that the school age room was not in use and the equipment was stacked in preparation of removal to allow staff the ability to clean and reorganize the space prior to the start of summer programming.

2. Identify Observed Strengths of the program

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The program follows a center wide curriculum plan with an identified general focus theme, and specific learning concepts for a number, letter, color, and shape. Each classroom implements these in different activities as appropriate to the developmental levels of the children. Good interactions were observed on the day of the visit with the staff being actively engaged with the children, and attending to their needs. The visit was made during the initial hours of the program so much of the interactions were with the children in a combined age group, and later the preschool age children separating off into a separate classroom. The focus during those times was more self-directed center play as children continued to arrive for the morning. The interactions then shifted to more guided activities such as the teachers reading to the children. The program continues to maintain a focus on positive programming both with the teachers presenting a positive attitude, and how they respond to child behavior. Ratio was maintained in the center as required by age.

Health and safety practices were mixed with some being very effective and others that need to be reviewed. I was able to observe a diaper change during the visit and the teacher did follow the required procedures. One issue that was observed was with regard to the restroom used by the preschool age children. The restroom was observed prior to the children making use of that area so the conditions were such that they would have been left from the prior week and suggests that staff do need to provide additional supervision and assistance to the children. This was evidenced by the toilet not having been flushed, extra clothing on the floor, paper towel debris on the floor, and dried feces both on the floor and the sink and soap dispenser. Items such as purses, medications, and chemical cleaners were stored in areas where they were not accessible to children. A first aid kit was present in the center and contained materials necessary to address most common first aid needs. Safe sleep practices were observed for children under 1 year of age. Older children make use of cots which were observed to have appropriate bedding.

The center playground has a climbing structure, spring rockers, and other equipment which were observed to be in good repair. Wood mulch is used for fall surfacing and the issue identified in the prior report of the mulch having compacted, composted, and been infiltrated by grass such that it was insufficient continued to be present. The damaged planter boxes identified in the prior report have been removed. A paved sidewalk and patio area is also present where children can use riding toys, sidewalk chalk, and other outdoor play items. The playground is fully enclosed by fencing with a combination of chain link, and wooden panels. Shade is provided by large mature trees. The steps leading from the building to the playground space are deteriorating and need to be repaired or replaced.

The center does have a full kitchen present and meals are prepared onsite. A copy of the menu was posted and identified a good variety of nutritious meal options. Good food storage practices were observed for both refrigerated and dry pantry storage items. The kitchen was observed to be clean with no evidence of insect or rodent infestation. Meals are served in the classrooms with the teachers providing supervision.

In reviewing administrative records all required postings for No Smoking, License Certificate, Consultant Contact, and Mandatory Abuse Reporting were present and in an area readily accessible to parents and visitors. Other required postings for emergency evacuation, emergency numbers, diapering, handwashing, daily schedule, curriculum, and menu were also present though some individual postings had fallen or were missing and need to be reposted. Approximately half of the child files were reviewed and those files 50% needed an updated physical. All staff files were reviewed contained all required information with the exception Mandatory Child Abuse Reporter training, and 1st Aid/CPR which had expired for all staff. All inspection logs and certificates were current and available though Vickie noted that she had just conducted and submitted a renewed Radon test and was waiting for results. The center does have a Radon mitigation system. It was noted that the manometer of the mitigation system appeared to indicate that the system was functioning. The center handbook was reviewed and the center had included several of the previously identified missing policies, but was found to still be missing several other required written policies.

3. Identify the aspects that fall below the standard

109.4(1): Written policies on: Enrollment and discharge. Field trips and non-center activities. Discipline/Behavior/Biting. Nutrition. Health and safety policies. Transportation if applicable. Assurance people do not have unauthorized access to children at the center. Protecting children's confidentiality.
-- Policies were missing or need to be expanded to include all elements for Field Trips, Health & Safety (responding to major/minor injury, response plans, handwashing, immunization exemptions), Incident Reporting, Biting, Access, Confidentiality.

109.9(1)c: All files contain documentation to indicate that ongoing staff training requirements are met, including current

certifications in first aid/CPR and mandatory child abuse training.
-- 1st Aid/CPR, and Mandatory Abuse Reporting training had expired for all staff.

109.9(2)i: Preschool (for children five years and younger not enrolled in school): Physical exam report submitted within 30 days of admission, was obtained no more than 12 months prior to admission, is signed by a licensed MD, DO, Chiropractor, PA, or ARNP, and contains health history; present health status including allergies, medications, and acute/chronic conditions; and recommendations for continued care if necessary.
-- Documentation of a current physical was missing from approximately 50% of files reviewed.

109.10(6): Children's hand washing: Center shall ensure staff assist children in personal hygiene.
-- The condition of the preschool restroom indicated that additional assistance is needed with the toilet not having been flushed, extra clothing on the floor, paper towel debris on the floor, and dried feces both on the floor and the sink and soap dispenser.

109.11(4)a: Center must have safe outdoor program area adjacent to the center, with sufficient square footage to accommodate at least 30 percent of the enrollment capacity at any one time at 75 spear feet per child. Outdoor space must:Be free from litter and unsafe materials and free from contamination by the drainage or ponding of sewage or storm water.Include safe play equipment and an area of shade.Include fencing to protect from bodies of water or vehicular traffic.
-- The steps leading to the outdoor playground space from the building are deteriorating and need to be repaired or replaced. The fall surfacing beneath climbing structures is insufficient.

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

A list of required written policies was provided to the center along with suggestions for implementation. Additional sample forms for response plans were also sent.

Vickie stated that she was working to look for and apply for grants for fall surfacing for the playground, and materials had already been purchased for the steps with a plan for work to be completed later in the month. Vickie stated that the climbing structures would be fenced off and not used until sufficient fall surfacing was added.

Vickie stated that 1st Aid/CPR training has been scheduled for June 10th, and she would also have staff renew Mandatory Child Abuse Reporter training. Vickie stated she would also review expectations regarding care and cleaning in the restrooms.

5. Special Notes/Recommendations

A full license will remain in effect at this time. Please provide a written response to the licensing consultant identifying a plan of action by 07-15-24 to correct and maintain those aspects cited as not meeting licensing standards and identifying an anticipated date of compliance. At least one visit will be made to the center during the next year.

Date: 05/11/2026

HHS Licensing Consultant: Ray Salsbury

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Non-compliance with any of the mandated regulatory requirements listed above may lead to the cancellation or revocation of your Child Care License. Please take steps necessary to completely address each of the violations noted above.

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 **https://iowaccrr.org**.