Health and Human Services

Iowa Department of Health And Human Services

CHILD CARE ANNUAL EVALUATION

Business Name: Sarah Blood

Provider Name: Sarah Blood

Provider No.: 50565

Address: PO BOX 846, Monroe, IA, 50170

E-Mail:

County: Jasper

Phone Number: 5154022682

- [ ] Pre-Inspection Date:
- [ ] Approval Date:
- [X] Annual Visit Date: 10/12/2026

Program Type:

- [ ] Registered Child Development Home A (guidelines for ratios on all categories)
- [ ] Registered Child Development Home B
- [ ] Registered Child Development Home C
- [X] 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

Sarah Blood has been a registered childcare provider since June of 2019. Sarah is currently a category "B" Child Development Home Provider. This allows her to have 8 preschool children with an additional 4 school aged children at one time for a total of 12 children in care for up to 2 hours. If there are more than 8 children in care for over 2 hours a DHHS approved assistant needs to be present. Sarah has approved DHHS substitutes and assistants for her program. Sarah is able to provide transportation for families in her care. There are no pets in the Child Development Home. Sarah accepts all ages of children in her care and does accept CCA funding.

2. Identify Observed Strengths Of The Program

The home has dedicated spaces which are furnished with children's furniture, toys, books, and cribs. There are toys and

objects which encourage children to develop large and small motor skills. The areas are sectioned off so the younger children can be separated from the older children. The providers follow a structured routine which children can predict their environment and activities. The children have group activities, free-play, and access to media depending on the ages of children in care. The yard is furnished with playground equipment encouraging large and small motor skill development. Sarah also accesses a nearby park for outside play when the weather allows. Sarah has completed her required trainings as reviewed by the Registration Unit. Sarah has completed Safe Sleep training; this worker reviewed the policy with her and gave her an informational flyer. Sarah will implement the practice when she has children 12 months or younger in her care. Sarah uses "separation" and redirection as her primary behavioral interventions when needed. Corporal punishment is not practiced in the Child Development Home. Children in Caitlyn's care will receive regular meals and snacks as appropriate. Sarah's provider files and individual child files are complete, organized, and easily accessible.

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 (1) a : Within six months of becoming registered, a physical exam report documented on form 470-5152, Child Care Provider Physical Examination Report, for all household members over the age of 18. Physical exams should be repeated every three years.

1. Update the Emergency Preparedness Plan and print it off so it is easily accessible.
The Emergency Preparedness Plan needs to be updated and easily accessible. Your CCR&R Worker can assist with this update if needed.
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

2. All staff need to have a current DHHS Medical Physical Form in the Provider File.

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

None.

5. Special Notes/recommendations

I encourage you to work with your Child Resource and Referral Worker (Leah Bauman (515) 202-0580) with any compliance or training efforts.

Send a copy of the updated Emergency Preparedness Plan to this worker within 30 days of receiving this letter.

The other correction needs to be completed by 12/12/2026 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.

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HHS Child Development
Home Compliance Worker: Jake Aringdale Date: 10/12/2026

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