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

Name of Center: Kidstop Childcare Center **Enrollment:** 35 **License ID No. (Reapplications)** 35155

Street: 304 S Summit AVE **City:** Bancroft Iowa **Zip** 50517 **County:** Kossuth

Mailing Address: PO Box 132, Bancroft, IA, 50517

Director's Name: Bobie Blocker **Phone Number:** 515-885-2379

On-Site Supervisor(s): **E-Mail:** kidstopdaycare@hotmail.com

Date(s) of Visit: 02-15-2023

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

LICENSING VISITS

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

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

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

Date Inspected: 02-23-2021

Comments :

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 Other X NA

Program Serves: X Infants (0-23 mo.) X 2 Years X Preschool-Age X School-Age

Get-Well Evening Care Special Needs

SCHEDULE: X Year-round School-Year Summer Only

HOURS:	*Year-round*	*School-Year*	*Summer Only*

LICENSE CAPACITY	Infants	2 Years	Preschool	School-Age	Capacity
General	14	13	17	18	62
Summer					0

QRS Rating: 4

RECOMMENDATION FOR LICENSE:	
X	**FULL** license from 03-01-2023 to 03-01-2025
	PROVISIONAL license from
	DENIAL of initial application
	SUSPENSION of license
	REVOCATION of license

Licensing Consultant: Raymond Salsbury **Date:** 02-18-2023

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

NA

II. IDENTIFY THE AREAS OBSERVED ON THE VISIT:

An unannounced annual visit was made the Kidstop Childcare Center on 02-15-23 where I met with center director Bobie Blocker. Bobie took over as the director of the program in 2018 and is well qualified for the position with a BA in Education/Psychology and many years of experience in early childhood education and care. The center is located in several classrooms of the old St. John Catholic School in Bancroft which now also serves as a community center on the other side of the building. The owners of the building are also seeking to renovate the second floor above the daycare for use as residential apartments, or other commercial space but these are not in use at this time. The program is overseen by an independent board of directors and is operated as a non-profit center. There are currently 35 children enrolled in the program served by 10 staff. The center provides services for infants through school age children, and also provides a formal preschool class that participates in the 4 year old preschool grant program. All aspects of the program subject to licensing standards were reviewed.

They general layout of the facilities and classrooms remains the same as in prior visits. The center is currently using 4 classrooms with three for child care and one for the formal preschool class. Each classroom has an open floor plan typical of school classrooms with a large bank of windows along the exterior walls. The windows also serve as secondary emergency egress for the children in the school age and preschool classrooms. The infant and toddler classrooms have doors that provide secondary direct egress to the outdoors. It was noted that the door of the toddler room was difficult to open and this has been identified in prior reports. Bobbie stated that the center has arranged for maintenance to be completed to repair this door, and better weather seal the emergency exit in the infant room. Sinks are present in the infant room and toddler room to facilitate hand washing for diaper changes. Diaper changing stations are present in both rooms, and in the main restroom. Restrooms are located down the hallway from the classrooms for the older children and children are escorted to the bathroom as needed. Each room has the space divided by shelving and furniture to create activity centers which are arranged so that they provide the children with room to play and move while not creating any blind areas.

The activity centers present in each room vary by age with more options being presented that are appropriate for the children in the room. Examples include large and small manipulatives, reading, art/crafts in each room but classrooms for the older children also include dramatic play, sand/water/experience tables, light tables, math, and science. Each activity center was stocked with toys and materials that were observed to be age appropriate and in good repair. Good interactions were observed in each classroom with the staff being actively engaged with the children implementing the planned curriculum or otherwise attending to their needs. Bobbie stated that the center has made an effort to focus on curriculum development and this was observed in each classroom. Examples include the infant room where the teachers were using flash cards to identify shapes with the children, and then later getting out repurposed toys that used a coffee container and milk caps for the children to develop fine motor skills and eye/hand coordination. In the 3-4 year old classroom the center removed the TV that had previously been present when the staff noted that the children had no real interest in it and replaced it with more engaging dramatic play options. The center has also developed a Lending Library as part of grant where children can check out a book and related toy/game/activity that they can take home to do with their families. The staff do use positive behavior management techniques such as transition activities, redirection, and helping the children identify positive choices.

Good health and safety practices were generally observed. During the visit I was able to observe a diaper change and the teacher did follow the established procedures regarding the diaper change. Good cleaning practices are in place with the center using a 3 step process of soapy water, clear water rinse, but it was identified that a sanitizing agent rather than disinfectant was being used for surfaces such as the changing stations. Bobby stated that she would speak to the vendor for their cleaning products and obtain an appropriate product for those surfaces that require a disinfectant. Chemical cleaners, purses, diaper bags, medications, and other items that could present a safety risk to children are generally stored in areas where they were not readily accessible to children. On the day of my visit a purse was observed to be out on the teacher desk on the day of my visit where it was accessible to the children. The teacher did note that she normally stores it in a locker but had to retrieve something from it just prior to the visit and did move it to a secure file cabinet immediately when it was pointed out. The center does maintain first aid kits in the classrooms which contain a limited supply and larger stores are maintained in the center office. The center did not have any children that were currently taking any medications or had identified allergies but policies are in place should these concerns be present in the future. Safe Sleep practices were followed in the center for children under 12 months of age. It was noted that blankets were stored on the railings of several cribs and it was reported that these were for children over 12 months of age. While Safe Sleep practices does allow for children over 12 months to have a blanket in the crib it was reviewed that the best time to introduce blankets, pillow, or plush toys is when children transition to a cot where the items would not bind against the crib rails.

The center has a full kitchen and meals are prepared on site. The center does participate in the Child and Adult Care Food program. The kitchen was observed to be clean with no indications of insect or rodent infestation. Good food storage, handling, and preparation practices were observed. A copy of the menu is posted and a good variety of nutritious meals were planned. Meals are served in the classrooms with the teachers providing supervision at the tables.

The center has a playground area located in an inner courtyard that is surrounded by the building on three sides and fenced on the fourth. The playground has a small paved riding track, a grassy area, and an area with some small climbing structures. Pea gravel is used for cushioning ground cover. Shade is provided by the building. Bobbie did identify that they have not been using the playground due to concerns about some of the facia bricks of the building coming loose and falling into the playground area. Bobbie also identified that the center has received some grants and does plan to move the outdoor play area to another location at the front of the building. The program also has the use of a large indoor gymnasium that is primarily used for large motor skill activities and play. The gym has a variety of toys and material for the children to choose from such as balls, riding toys, and a pop-up activity center.

All required notices were posted in areas that were readily visible to parents and visitors. A random selection of staff and children's files were reviewed and compared to the self-audits maintained by the center which were found to be accurate. Based on the review and self-audit all child files contained all required documentation. Staff files were generally found to be in compliance with all required documentation with the exception of one employee that needed current 1st Aid/CPR training. The center handbooks have been previously reviewed and found to contain all required written policies. All required inspections logs and certificates were available and current.

III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:

The center seeks to implement best practice recommendations with participating in the QRS program in the past and working toward completing the IQ4K program.

As noted the center has received grants to improve the program with having acquired new changing stations, the Positive Behavior Supports program, and funding to renovate the emergency exits, and outdoor playground.

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

109.9(1)e: 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.
-- Number not in compliance: 1

109.10(15)d: Daily checks to ensure all exits are unobstructed.
-- The emergency exit of the 2 year old classroom sticks and is difficult to open.

V. SPECIAL NOTES/RECOMMENDATIONS:

A full license is recommended at this time. Please provide a written response to the licensing consultant identifying a plan of action 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.

*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.