02/21/2025

Chenia Harriman
804 Oswego ST
Tama, IA 52339

Dear Child Care Provider:

This letter is in regards to the follow up at your Registered Child Development Home A conducted on 02/20/2025. Iowa Code Chapter 237A and 441 Iowa Administrative Code, Chapter 110, describes specific requirements that must be met by a Registered Child Development Home. You are not a participant in the voluntary Quality Rating and Improvement System. The following areas were out of compliance at the time of the visit:

441 IAC 110.8(1)	**Facility Requirements**
441 IAC 110.8(1)"g"	The home shall have at least one 2A 10BC rated fire extinguisher located in a visible and readily accessible place on each child-occupied floor.
441 IAC 110.8(1)"h"	The home shall have at least one single-station, battery-operated, UL-approved smoke detector in each child-occupied room and at the top of every stairway. Each smoke detector shall be installed according to manufacturer's recommendations. The provider shall test each smoke detector monthly and keep a record of testing for inspection purposes
441 IAC 110.8(1)"i"	Smoking and the use of tobacco products shall be prohibited at all times in the home and in every vehicle in which children receiving care in the home are transported. Smoking and the use of tobacco products shall be prohibited in the outdoor play area during the home's hours of operation. Nonsmoking signs shall be posted at every entrance of the child care home and in every vehicle used to transport children. All signs shall include: **1.** The telephone number for reporting complaints, and **2.** The Internet address of the department of public health (www.iowasmokefreeair.gov)
441 IAC 110.8(1)"n"	Providers shall inform parents of the presence of any pet in the home. **1.** Each dog or cat in the household shall undergo an annual health examination by a licensed veterinarian. Acceptable veterinary examinations shall be documented on Form 470-5153, Veterinary Health Certificate. This examination shall verify that the animal's routine immunizations, particularly rabies, are current and that the animal shows no evidence of endoparasites (roundworms, hookworms, whipworms) and ectoparasites (fleas, mites, ticks, lice). **2.** Each pet bird in the household shall be purchased from a dealer licensed by the Iowa department of agriculture and land stewardship and shall be examined by a veterinarian to verify that it is free of infectious diseases. Acceptable veterinary examinations shall be documented on Form 470-5153, Veterinary Health Certificate. Children shall not handle pet birds.

3. Aquariums shall be well maintained and installed in a manner that prevents children from accessing the water or pulling over a tank.
4. All animal waste shall be immediately removed from the children's areas and properly disposed of. Children shall not perform any feeding or care of pets or cleanup of pet waste.
5. No animals shall be allowed in the food preparation, food storage, or serving areas during food preparation and serving times

441 IAC 110.8(3) **Medications and Hazardous Materials**

441 IAC 110.8(3)"a" All medicines and poisonous, toxic, or otherwise unsafe materials shall be secured from access by a child

441 IAC 110.8(4) **Emergency Plans**

441 IAC 110.8(4) "a" Fire and tornado drills shall be practiced monthly and the provider shall keep documentation evidencing compliance with monthly practice on file for the current year and the previous year.

441 IAC 110.8(4) "b" The provider must have procedures in place for the following:
1. evacuation to safely leave the facility
2. relocation to a common, safe location after the evacuation
3. shelter-in-place to take immediate shelter where you are when it is unsafe to leave that location due to the emergent issue
4. lock down protocol to protect children and providers from an external situation
5. communication plan and plans for reunification with families
6. continuity of operations plans
7. Procedures to address the needs of individual children, including those with functional or access needs

441 IAC 110.9 Files

441 IAC 110.9(1) **A provider file is maintained and shall contain the following:**

441 IAC 110.9(1)"a" A physician's examination report for the provider and all members of the provider's household aged 18 years or older. Acceptable physical examinations shall be documented on Form 470-5152, Child Care Provider Physical Examination Report. All children residing in the household must have medical documentation outlined in 110.9(4) "d", 110.9(4) "f", and 110.9(4) "g"

441 IAC 110.9(2) An individual file is maintained for each staff assistant and contains:
1. Documentation from the department confirming the record checks required under subrule 110.11(3) have been completed and authorizing or conditionally limiting the person's involvement with child care
2. A completed Form 470-5152, Child Care Provider Physical Examination Report. The examination shall include any necessary testing for communicable diseases; a discussion of recommended vaccinations; completed no more than six months prior to approval to assist or be a household member; completed by a licensed medical doctor, doctor of osteopathy, physician assistant or advanced registered nurse practitioner; and repeated at least every three years.
3. Certification of two hours of approved training related to identification and reporting of child abuse as required by Iowa Code section 232.69 within 3 months of employment.

441 IAC 110.9(4) Children's Files. An individual file for each child shall be maintained and updated annually or when the provider becomes aware of changes. The file shall contain:
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.

b. Emergency information including, at a minimum, where the parent can be reached, the name, street address, city and telephone number of the child's regular source of health care, and the name, telephone number, and relationship to the child of another adult available in case of emergency.
c. A signed medical consent from the parent authorizing emergency treatment.
d. An admission physical examination report signed by a licensed physician or designee in a clinic supervised by a licensed physician

1. The date of the physical examination shall not be more than 12 months before the child's first day of attendance at the child development home.
2. The written report shall include past health history, status of present health, allergies and restrictive conditions, and recommendations for continued care when necessary.
3. For a child who is five years of age or older and enrolled in school, a statement of health status signed by the parent or legal guardian may be substituted for the physical examination report.
4. The examination report or statement of health status shall be on file before the child's first day of care

e. For children under the age of 6,a statement of health condition signed by a physician or designee submitted annually from the date of the admission physical. For a child who is enrolled in school, a statement of health status signed by the parent or legal guardian may be substituted for the physician statement.
f. For each school-age child, on the first day of attendance, documentation of a physical examination that was completed at the time of school enrollment or since.
g. A signed and dated immunization certificate provided by the state department of public health. For the school-age child, a copy of the most recent immunization record shall be acceptable.
h. For any child with allergies, a written emergency plan in the case of an allergic reaction. A copy of this information shall accompany the child if the child leaves the premises.
i. Documentation that is signed by the parent and names persons authorized to pick up the child. The authorization shall include the name, telephone number, and relationship of the authorized person to the child.
j. Written permission from the parent for the child to attend activities away from the child development home.**k.** Injury report forms documenting injuries requiring first aid or medical care
l. If the child meets the definition of homelessness as defined by section 725(2) of the McKinney-Vento Homeless Education Assistance Act, the family shall receive a 60-day grace period to obtain medical documentation.

Findings:

An annual compliance check was completed on 2/20/25 and the following was out of compliance:

441 IAC 110.8(1)"g" The home shall have at least one 2A 10BC rated fire extinguisher located in a visible and readily accessible place on each child-occupied floor.
Chenia did have a fire extinguisher, but it was not visible, so she needs to have a sign indicating its location.

441 IAC 110.8(1)"h" The provider shall test each smoke detector monthly and keep a record of testing for inspection purposes. This was also an area out of compliance at last year's annual check. This worker did provide her a form for documentation purposes.

441 IAC 110.8(1)"i" Nonsmoking signs shall be posted at every entrance of the childcare home and in every vehicle used to transport children.
All signs shall include:
The telephone number for reporting complaints, and
The Internet address of the department of public health (www.iowasmokefreeair.gov)
Chenia did not have a no-smoking sign at her secondary exit.

441 IAC 110.8(1)“n” Providers shall inform parents of the presence of any pet in the home.
All animal waste shall be immediately removed from the children’s areas and properly disposed of.
There was animal feces in the child's designated playroom. Chenia did note that they have not been using that space for a while as it is not heated and has been cold. On this date the children were playing in the living room and dining room areas. She did pick up the animal waste while this worker was present.

441 IAC 110.8(3)“a” All medicines and poisonous, toxic, or otherwise unsafe materials shall be secured from access by a child.
Chenia did have some cleaners under her bathroom sink that were in access to the children. She did move those while this worker was present.

441 IAC 110.8(4) “a” Fire and tornado drills shall be practiced monthly and the provider shall keep documentation evidencing compliance with monthly practice on file for the current year and the previous year.
Chenia did not have documentation for this year for monthly practice of fire and tornado drills. This worker did provide her a form for documentation purposes. This was also an area where she was out of compliance at least years annual check.

441 IAC 110.8(4) “b” The provider must have procedures in place for the following:
evacuation to safely leave the facility
relocation to a common, safe location after the 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
continuity of operations plans
Procedures to address the needs of individual children, including those with functional or access needs.
Chenia could not locate her Emergency Preparedness Plan. this was also an area where she was out of compliance at last year's check although CCR&R had met with her last year and verified that she had developed one. However, at today's visit she could not locate it.

441 IAC 110.9(1)“a” A physician’s examination report for the provider and all members of the provider’s household aged 18 years or older . Acceptable physical examinations shall be documented on Form 470-5152, Child Care Provider Physical Examination Report. All children residing in the household must have medical documentation outlined in 110.9(4) “d”, 110.9(4) “f”, and 110.9(4) “g”.
Chenia did not have a physical exam for her husband or for one of her children in the home. This was also an area where she was out of compliance at last year's annual check.

441 IAC 110.9(2) An individual file is maintained for each staff assistant and contains:
Documentation from the department confirming the record checks required under subrule 110.11(3) have been completed and authorizing or conditionally limiting the person’s involvement with child care
A completed Form 470-5152, Child Care Provider Physical Examination Report. The examination shall include any necessary testing for communicable diseases; a discussion of recommended vaccinations; completed no more than six months prior to approval to assist or be a household member; completed by a licensed medical doctor, doctor of osteopathy, physician assistant or advanced registered nurse practitioner; and repeated at least every three years.
Certification of two hours of approved training related to identification and reporting of child abuse as required by Iowa Code section 232.69 within 3 months of employment.
Chenia does have an approved assistant, but she did not have any of the required documentation including the letter from HHS approving her as an assistant, the provider health form or verification of Mandatory Child Abuse Reporter training. Chenia did indicate that the assistant will need to schedule a physical and complete the MCART.

441 IAC 110.9(4) Children’s Files. An individual file for each child shall be maintained and updated annually or when the provider becomes aware of changes. The file shall contain:
An admission physical examination report signed by a licensed physician or designee in a clinic supervised by a licensed physician
The date of the physical examination shall not be more than 12 months before the child’s first day of attendance at the child development home.
The written report shall include past health history, status of present health, allergies and restrictive conditions, and recommendations for continued care when necessary.

For a child who is five years of age or older and enrolled in school, a statement of health status signed by the parent or legal guardian may be substituted for the physical examination report.
The examination report or statement of health status shall be on file before the child's first day of care
For children under the age of 6, a statement of health condition signed by a physician or designee submitted annually from the date of the admission physical. For a child who is enrolled in school, a statement of health status signed by the parent or legal guardian may be substituted for the physician statement.
For each school-age child, on the first day of attendance, documentation of a physical examination that was completed at the time of school enrollment or since.
A signed and dated immunization certificate provided by the state department of public health. For the school-age child, a copy of the most recent immunization record shall be acceptable.
For any child with allergies, a written emergency plan in the case of an allergic reaction. A copy of this information shall accompany the child if the child leaves the premises.
Written permission from the parent for the child to attend activities away from the child development home.

Chenia had 3 children in care on this date. She was missing an initial physical and immunization record as well as permission for activities for 2 of those children.

Chenai also needed to have an updated/annual physical for one of the other children in care.

441 IAC 110.8 Standards. Conditions in the home are safe, sanitary, and free of hazards.

Although not determined out of compliance (as far as safety and hazards) the home was cluttered, a bit messy and the floor needed to be swept. Chenia and I did talk about the condition of the home and the need to have it cleaner which Chenia seemed to agree with.

Suggestions/Recommendations:

A re-check is not needed at this time. Corrections need to be made by 3/13/25 and will be reviewed at the next annual compliance check. Please send pictorial verification of the items where specifically noted below.

I encourage you to work with Rachel Bonefas with Child Care Resource and Referral if you have any ongoing compliance or training needs.

Rachel can be reached at 563-362-8225

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

Corrective Action Required:

Chenia needs to obtain a fire extinguisher sign to locate its location OR it needs to be moved to a location where it is visible. Chenia needs to send pictorial verification of compliance.

Chenia needs to ensure that she is testing each smoke detector monthly and keeping a record of testing for inspection purposes.

Chenia needs to post a non-smoking sign at her secondary exit and send pictorial verification to this worker.

Chenia needs to ensure that all animal waste shall be immediately removed from the children's areas and properly disposed of.

Chenia needs to ensure that all medicines and poisonous, toxic, or otherwise unsafe materials shall be secured from access by a child at all times.

Fire and tornado drills shall be practiced monthly and the provider shall keep documentation evidencing compliance with monthly practice on file for the current year and the previous year.

Chenia needs to locate her Emergency Preparedness Plan and send pictorial verification to this worker.

Chenia needs to obtain a physical for her husband on the HHS approved form. Chenia needs to obtain a physical for one of her children. Due to the fact that this was also an area out of compliance at last year's check and she had not sent pictorial verification as requested, it is again requested that she send pictorial verification when she has obtained these required items.

Chenia needs to maintain a file for her approved assistant. Chenia needs to locate her letter from HHS that approves the assistant.
Chenia needs to obtain a provider health exam on the approved HHS form for her assistant and Chenia needs to ensure that the assistant has completed the Mandatory child Abuse Reporter training. Chenia needs to send pictorial verification of all of these items.

Chenia needs to work with the parents to obtain all of the required documentation for the children's files.

Addendums:

- Addendum3: After Chenia's follow up visit on 9/17/25, she still needed to send pictorial verification of compliance of a few items.

  This worker received verification of the posted emergency evacuation plans on 9/24/25 and received verification of the floors on 9/25/25.

  There is no additional pictorial verification of compliance that needs to be sent.
- Addendum2: Chenia's initial annual compliance inspection was completed on 2/20/25. There were numerous Regulations in which she was out of compliance, and she did not send pictorial verification to this worker as requested.

  On 8/5/25 this worker did an unannounced drop in on the childcare home. In addition to discussing some other issues, this worker did ask what steps she had taken to come into compliance with the necessary items from the February compliance visit. In reviewing each item, the only items she had completed was the physical for her husband. Additional non-compliance were noted on that date as well. Chenia was given 30 days to take steps to come into compliance with Childcare Regulations and it was noted that this worker would do a follow up visit. Chenia was directed to reach out to her local CCR&R worker for support as well.

  On 8/20/25 the local CCR&R worker emailed this worker noting she had met with Chenia on 8/19/25. As of that date Chenia had sent verification of a no-smoking sign at the secondary exit.
  The CCR&R worker verified they had tested smoke detectors, hung up two that were down and documented

the test on the drill record form. the worker also verified she had hung the sign identifying where the fire extinguisher was located. A lock had not been put on the bathroom cabinet, but chemical had been moved and were not in access to the children. They completed the EPP while the consultant was present and the consultant send me pictorial verification. they had decided that Chenia was going to change the location for tornado shelter so Chenia did still need to change that on her EPP and on her evacuation maps that were posted. Children's files were reviewed on that date and Chenia was still missing some physicals, immunization records and authorization to seek emergency medical care. The support worker did assist Chenia in highlighting what was still needed for each child. The support worker also had her add the two drop-in children to her list of children in care and emergency contact information. They also discussed the condition of the home and ways to stay on top of cleanliness.
At that time Chenia was no longer utilizing the assistant so did not need to obtain a physical or Mandatory Reporter training for her.

On 9/17/25 this worker did an unannounced drop in on the childcare home to review follow through in coming into compliance with all Regulations. Outlets were capped accordingly on this date. This worker also reviewed the items she had come into compliance with that had been verified by the CCR&R support worker.

Chenia had updated her emergency plan for fire and tornado with the map but had not printed it out and the updated plan (that utilized the bathroom as the tornado area) was not posted by either the primary or secondary exit.

Chenia had updated her Emergency Preparedness plan but should print that out for easy access and compliance verification in the future.

Chenia did have the form for monthly practice of fire and tornado drills and monthly testing of smoke detectors and although there was documentation of testing of the smoke alarms on 8/20/25 when the CCR&R worker was present she did not have any other documentation since that time and did not have documentation of fire or tornado drills.

The playroom floor does need to be swept and this worker did observe a significant amount of pet hair (clumps of hair) on the floor in the living room that the small child could put in her mouth and choke on. Chenia indicated that she only had the one child in care today (the others are school aged) and she had planned to sweep the floor after that child left. This worker is requesting that Chenia send pictorial verification that play area floor and living room floor have been swept.

In reviewing the children's files, the young child present did have all of the required documentation. One child was still missing the authorization for emergency medical care and the physical and immunization but she had taken steps to obtain the authorization for emergency medical for 2 other children but did still needs updated physicals or a parent statement of health for those 2 children. Chenia did have a medication documentation form for each child in the event she gives medications. This worker had provided her one at the last visit and she did have that available for future need.

As of this visit on 9/17/25 Chenia still needs to print and post the updated emergency evacuation plans for fire and tornado at both the primary and secondary exit.
She also needs to sweep the playroom floor and living room floor. Chenia still needs to send pictorial verification of both of those items within a week (by 9/24/24).

As an ongoing need, Chenia needs to continue to work with parents to obtain all of the required documentation for each child's file. She needs to practice and document monthly fire and tornado drills and test smoke detectors monthly and document that accordingly. She also needs to continue to work on maintaining the home in a safe manner including sweeping her floor regularly so as to not have large amounts/clumps of pet hair that a small child could choke on and other debris on the floor.

- Addendum1: Chenia's annual childcare compliance visit was completed on 2/20/25. At that time Chenia had numerous items where she was out of compliance with Regulations and she was supposed to take steps to correct those items by 3/13/25 and she was supposed to send pictorial verification of several of the items that related to safety.

As of 5/1/25 this worker had not received any communication from Chenia about her follow through and compliance. This worker attempted to call her on 5/1/25 but her voice mail was full. This worker did send her a text message requesting she send the pictorial verification ASAP.

As of 7/24/25 this worker called Chenia again as I had not heard anything or received anything from her regarding her compliance. At that time, this worker also emailed her a second copy of the compliance letter identifying what she needed to come into compliance with.

Listed below are the items she needed to take steps to come into compliance with:
Corrective Action Required:
*Chenia needs to obtain a fire extinguisher sign to locate its location OR it needs to be moved to a location

where it is visible. Chenia needs to send pictorial verification of compliance.
*Chenia needs to ensure that she is testing each smoke detector monthly and keeping a record of testing for inspection purposes.
*Chenia needs to post a non-smoking sign at her secondary exit and send pictorial verification to this worker.
*Chenia needs to ensure that all animal waste shall be immediately removed from the children's areas and properly disposed of.
*Chenia needs to ensure that all medicines and poisonous, toxic, or otherwise unsafe materials shall be secured from access by a child at all times.
*Fire and tornado drills shall be practiced monthly and the provider shall keep documentation evidencing compliance with monthly practice on file for the current year and the previous year.
*Chenia needs to locate her Emergency Preparedness Plan and send pictorial verification to this worker.
*Chenia needs to obtain a physical for her husband on the HHS approved form. Chenia needs to obtain a physical for one of her children. Due to the fact that this was also an area out of compliance at last year's heck and she had not sent pictorial verification as requested, it is again requested that she send pictorial verification when she has obtained these required items.
*Chenia needs to maintain a file for her approved assistant. Chenia needs to locate her letter from HHS that approves the assistant.
*Chenia needs to obtain a provider health exam on the approved HHS form for her assistant and Chenia needs to ensure that the assistant has completed the Mandatory child Abuse Reporter training. Chenia needs to send pictorial verification of all of these items.
* Chenia needs to work with the parents to obtain all of the required documentation for the children's files.

Chenia was also provided the name and contact number for her support worker form CCR&R.

On 7/28/25 Chenia sent pictorial verification of her husband's physical. At that time she also informed this worker that her assistant had not completed the required health exam and did not have the required Mandatory Cihld Abuse Reporter training. She shared that the assistant was moving out of state at the end of the week. This worker did clarify that if her assistant was leaving at the end of the week, Chenia did not need to send the items that had been requested for the assistant.

On 8/5/25 this worker did an unannounced drop in on the childcare home. In addition to discussing some other issues, this worker did ask what steps she had taken to come into compliance with the necessary items from the February compliance visit. In reviewing each items listed above, the only thing she had completed was the physical for her husband. The assistant was also present and had not yet moved out of state as had been reported. Both Chenia and the assistant noted she was done at end of this week.

Additional concerns noted on this date included:
- There were some outlets in the play- room not capped.
- There was also a smoke alarm that was beeping and clearly needed batteries replaced.
- Chenia did not have her emergency plan for fire and tornado posted at her secondary exit.
- There were chemicals/cleaners under the bathroom sink (again) and the latch on the cabinet was broken.
- Chenia's list of children with parental contact had 6 children listed but only 2 of which are currently enrolled in care. She has four other children in care, that were not identified on the written list and obviously she did not have the parental contact, emergency contact or physician listed.

Chenia still reported that she did not have documentation of monthly testing of smoke detectors or of fire and tornado drills.
Chenia reported she had been trying to find a no-smoking sign and fire extinguisher sign on-line, but when this worker asked her if she had contacted CCR&R as they typically will provide those, she reported she had not. She had been provided that information at the time of the February visit.

The home was also messy (at it had been at the time of the annual inspection) but not to the level of health and safety, aside from the non-compliance issues noted above.

This worker did call and consult with my supervisor. This worker then spoke with Chenia about my concern for her lack of follow through with taking any steps to come into compliance with childcare Regulations. After the visit in 2024 she also had not taken steps to come into compliance. This worker informed Chenia that I would give her another 30 days and would do a follow up visit. If at that time she had not taken active steps to address the safety issues and come into compliance with childcare Regulations, we would need to do further planning and future and continued non-compliance could result in revocation of her Registration. Chenia indicated that she understood. This worker again directed her to reach out to Childcare Resource and Referral for assistance if needed.

While this worker was present, we also had discussion about a 10 month old child in care that had recently had hand foot and mouth disease. There was also some discussion about diaper rash. Chenia did identify that the child did not regularly have diaper rash but did note she had used diaper rash cream on a few occasions. This worker asked if she had communicated that to the parent when using diaper rash cream and she reported she had not. This worker shared that she needs to make sure she is communicating such things to parents. Additionally, this worker asked if she had documented this on a medication log sheet and asked if she administers any other medications to children. Chenia reported that at times she will give Tylenol but had never used the required medication documentation form. This worker did discuss that regulation and provided her a copy of the form for future documentation purposes.

This worker also reviewed a few of her children files in trying to obtain the list of children in care and she still did not have all the required paperwork. Of particular concern was that she was missing authorization to seek emergency medical care in several of the children's files. Upon return to the office this worker did email her a copy of that form for future use. This worker also sent her a list of the required paperwork for each child's file.

Chenia needs to take steps to come into compliance with all Regulations by 9/5/25. This worker will do another follow up visit.

This Addendum is approved by supervisor on 9/25/2025 3:56:38 PM

Non-compliance with any of the mandated 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.

Please do not hesitate to contact me at DHS at 319-429-0749 or christy.weber@hhs.iowa.gov if you have any questions regarding this letter.

Sincerely,

Christine Weber

Social Worker II

Sheila Aunspach

Social Work Supervisor

Always Remember:

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 877-216-8481

As you plan your future trainings to meet your 24 hours of training requirement, please remember that you can access the approved training by going to http://www.dhs.state.ia.us/Consumers/Child_Care/Professional_Development.html

You may also access training at: https://ccmis.dhs.state.ia.us/trainingregistry/

All providers need to maintain compliance with rules set out in Iowa Administrative Code, Chapter 110, which includes: 441 IAC 110.5(1): Check with the appropriate authorities to determine how the following local, state, or federal laws apply to you: • Zoning code • Building code • Fire code • Business license • State and federal income tax • Unemployment insurance • Worker's Compensation • Minimum wage and hour requirements • OSHA • Americans with Disabilities Act (ADA).