

CHILD CARE CENTER COMPLAINT

Name of Center: Wilton Daycare Center	Enrollment: 32	License ID: 20356
Street: 820 W 5th St	City: Wilton	IA Zip Code: 52778 County: Muscatine
Mailing Address: PO Box 824		
Mailing City: Wilton	IA Zip Code: 52778	
Director's Name: Samantha Austin	Center Phone Number: 563-732-5437	
On-Site Supervisors: LuAnn Simmering	E-Mail Address: wdc@netwtc.net	

Date of Complaint: 05-07-2026 **Date of Visit:** 07-15-2026

☐ Scheduled ☒ Unannounced ☐ NA

☒ Non-Compliance with Regulations Found ☐ Compliance with Regulations Found

RECOMMENDATION FOR LICENSE

☒ NO CHANGES to licensing status recommended

☐ PROVISIONAL license from _____ to _____

☐ SUSPENSION of License

☐ REVOCATION of License

Complaint Details:

Did this complaint result in a serious injury? ☐ Yes ☒ No

Did this complaint result in a death to a child? ☐ Yes ☒ No

Summary of Complaint:

- Incident reports are not being completed as required.
- A staff member screams at the children.
- Diapers are not being changed as required.

Licensing Rules Relevant to the Complaint:

109.10(8) Recording incidents: Parents shall be notified on the day of the incident involving a child that includes: Minor injuries. Minor changes in health status. Minor behavioral concerns. Incidents resulting in injury to a child. Shall be verbally notified immediately when there is: A serious injury to a child. An incident resulting in a significant change in health status. An incident includes the child being involved in inappropriate, sexually acting out behavior. A WRITTEN report, fully documenting every incident, shall be provided to the parent or authorized person. This should be completed by staff that witnessed the incident and retained in child file. Serious injuries and deaths must be reported to the Department within 24 hours.

109.12(2)a-d The center shall not use as a form of discipline: Center does not use corporal punishment including spanking, shaking, or slapping. Punishment which is humiliating or frightening or causes pain or discomfort is not allowed. Children shall never be locked in a room or closet. When restraints are part of a treatment plan for a child with a disability authorized by a parent and a psychologist or psychiatrist, staff shall receive training on the safe and appropriate use of the restraint. Punishment or threat of punishment associated with illness, toilet training, or food or rest is not to be used. No child is subject to verbal abuse, threats, derogatory remarks about child or child's family.

109.12(4)b Each infant and toddler shall be diapered in a sanitary manner as frequently as needed at a central diapering area. Diapering, sanitation, and hand-washing procedures shall be posted and implemented in every diapering area. There shall be at least one changing table for every 15 infants.

Inspection Findings:

CHILD CARE CENTER COMPLAINT

109.10(8) Recording incidents: Parents shall be notified on the day of the incident involving a child that includes: Minor injuries. Minor changes in health status. Minor behavioral concerns. Incidents resulting in injury to a child. Shall be verbally notified immediately when there is: A serious injury to a child.

An incident resulting in a significant change in health status. An incident includes the child being involved in inappropriate, sexually acting out behavior. A WRITTEN report, fully documenting every incident, shall be provided to the parent or authorized person. This should be completed by staff that witnessed the incident and retained in child file. Serious injuries and deaths must be reported to the Department within 24 hours. VIOLATED.

-The center is transitioning from paper to ProCare. Center staff are not consistently using ProCare, some of the center staff need additional training. This worker printed off instructions and gave them to each classroom. Staff were also reminded when they need to complete incident reports.

109.12(2)a-d . The center shall not use as a form of discipline: Punishment which is humiliating or frightening or causes pain or discomfort is not allowed. VIOLATED.

-One staff member did yell at the children; however, she is no longer with the center.

109.12(4)b. Each infant and toddler shall be diapered in a sanitary manner as frequently as needed at a central diapering area. VIOLATED.

-The center is transitioning from paper to ProCare. Center staff are not consistently using ProCare, some of the center staff need additional training. This worker printed off instructions and gave them to each classroom. Staff were also reminded when they need to complete diaper checks/changes.

Special Notes and Action Required:

The director will have all staff review and sign this report. Proof will be sent to HHS by 9/3/26.

The director will have all staff review the ProCare Instructions for incident reports/diaper changes.

109.10(8) Recording incidents and implementation:

a. Incidents involving a child, including minor injuries, minor changes in health status, or other minor behavioral concerns, shall be reported to the parents, guardians, and legal custodians on the day of the incident.

Significant change in health status means unexplained changes in a child's daily behavior or activities of daily living. Examples include a child who:

- Experiences a sudden change in self-care (ambulatory child suddenly stops walking or stops self-toileting; child who stands in crib suddenly only bears weight on one leg, etc.)
- Experiences a change in level of consciousness (child goes from alert to lethargic, is difficult to arouse from sleep, or sleeps longer than usual)
- Whimpers, cries or exhibits gestures of pain or discomfort and can't be consoled or relieved, etc.

A review of incident reports may also be useful in identifying areas of the center where children are routinely suffering injury (i.e., running into a certain piece of furniture, a hazardous component of an outdoor play equipment, etc.) or patterns of behavior exhibited by children that require intervention. Recording such information can be useful when seeking consultation from other professionals regarding remedies to the facility or behavioral interventions, discharge of children, etc. Ensure that staff understanding the importance of supervising children and completing incident reports when injuries occur within the program

To protect the privacy and interactions of children, you are encouraged to not identify other children by name on incident reports.

b. Incidents resulting in a serious injury, as defined in Iowa Code section 702.18, to a child in the child care facility or in the care of a child care facility staff or incidents resulting in a significant change in the health status of a child must be verbally reported to the parents, guardians, and legal custodians immediately.

(1) Serious injuries must be reported to the department within 24 hours of the incident.

(2) Serious injuries must be documented and information maintained in the child's file as required by subrule 109.9(2).

Serious injuries include:

- Disabling mental illness.
- Bodily injury which creates a substantial risk of death, causes serious permanent disfigurement, or causes protracted loss or impairment of the function of any bodily member or organ.
- Any injury to a child that requires surgical repair and necessitates the administration of general anesthesia.
- Includes, but is not limited to, skull fractures, rib fractures, metaphyseal fractures of the long bones of children under the age of 4 years.

c. The parents, guardians, and legal custodians of any child included in incidents involving inappropriate, sexually acting-out behavior must be notified immediately after the incident.

CHILD CARE CENTER COMPLAINT

A written report fully documenting every incident will be provided to the parent or person authorized to remove the child from the center. The written report shall be prepared by the staff member who observed the incident, and a copy will be retained in the child's file.

All reports to the Department must be completed on 470-0121, Child Care Injury/Incident Report Form and submitted to ccsid@dhs.state.ia.us within 24 hours of the incident."

The director will review the center's discipline policy with all staff.

"Checking for the Need to Change Diapers: Diapers should be checked for wetness and feces at least hourly, visually inspected at least every two hours, and whenever the child indicates discomfort or exhibits behavior that suggests a soiled or wet diaper. Diapers should be changed when they are found to be wet or soiled.

RATIONALE

Frequency and severity of diaper dermatitis is lower when diapers are changed more often, regardless of the type of diaper used

(1). Diaper dermatitis occurs frequently in diapered children. Most common diaper dermatitis represents an irritant contact dermatitis; the source of irritations prolonged contact of the skin with urine, feces, or both.

(2). The action of fecal digestive enzymes on urinary urea and the resulting production of ammonia make the diapered area more alkaline, which has been shown to damage skin (1,2). Damaged skin is more susceptible to other biological, chemical, and physical insults that can cause or aggravate diaper dermatitis (2).

Modern disposable diapers can be checked for wetness by feeling the diaper through the clothing and fecal content scan be assessed by odor. Nonetheless, since these methods of checking may be inaccurate, the diaper should be opened and checked visually at least every two hours. Even though modern disposable diapers can continue to absorb moisture for an extended period of time when they are wet, they should be changed after two hours of wearing if they are found to be wet. This prevents rubbing of wet surfaces against the skin, a major cause of diaper dermatitis." taken from Caring for Our Children

Consultant's Signature:

Heidi Brown

Date:

06-22-2026