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

Name of Center: Hancock County Learning Center **Enrollment:** 49 **License ID No. (Reapplications)** 51393

Street: 110 5th St NW **City:** Britt Iowa **Zip** 50423 **County:** Hancock

Mailing Address: 110 5th ST NW, Britt, IA, 50423

Director's Name: Noland Stewart **Phone Number:** 641-843-0166

On-Site Supervisor(s): **E-Mail:** hclcdirector@gmail.com

Date(s) of Visit: 07-08-2025

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: 08-19-2024

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	17	12	15	17	61
Summer					0

QRS Rating: 1

RECOMMENDATION FOR LICENSE:	
X	**FULL** license from 09-01-2025 to 09-01-2027
	PROVISIONAL license from
	DENIAL of initial application
	SUSPENSION of license
	REVOCATION of license

Licensing Consultant: Raymond Salsbury **Date:** 07-24-2025

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

II. IDENTIFY THE AREAS OBSERVED ON THE VISIT:

An unannounced annual visit was made to the Hancock County Learning Center on 07-08-25 where I met with the assistant director, Audra Muro, as the center director Noland Stewart was not in. Noland took over as the director of this program at the beginning of August 2024 and is well qualified for the position based on prior experience as the executive director for several licensed YMCA based child care programs, formal education, and on-going training in early childhood care and education. The center is located in a free standing building in Britt operating as a non-profit program overseen by a board of directors. The center provides daycare programming to infants through school age children. There are currently 49 children enrolled in the center served by 12 staff. All aspects of the program subject to licensing standards were reviewed during this visit.

The general layout of the facility remains the same as in prior visits. The program makes use of 4 classroom spaces with one room for infants, and a larger space that has been divided into three classrooms for 2 year olds, 3/4 year olds, and school age children. The infant room has a secondary exit that leads directly to the outdoor playground area. The other classrooms share a secondary exit that leads to the outdoor playground, and another off the school age area that opens onto the parking lot from a small hallway. All exits opened easily and freely, and access to all exits were clear of obstruction. Evacuation cribs are used in the infant room and were also clear of obstruction. Restroom facilities are located just off a central hallway and just off the programming space for the toddlers. Sinks are present in the restrooms, and in the infant, 2 year old, and preschool classrooms. Hand washing procedures postings were present by all sinks used for handwashing. Changing stations are present in the infant and two year old classrooms and the required changing procedures postings were present. Windows are located along the exterior walls and provide natural light, ventilation, and a view of the outdoors. Each room was observed to be clean with only minor maintenance issues none of which rose to the level of being an immediate safety concern. Each room had a variety of activity centers that are created through the placement of furniture and play structures that were arranged so as to not create any blind areas. Each activity center was stocked with toys and materials that were generally appropriate to the ages of the children present though there were a couple toys in the infant room that had small parts that could break off which would be considered choking hazards. These were removed from use after they were identified.

Each classroom had a copy of the daily schedule and planned curriculum posted. The posted curriculum plans identified weekly themes and specific activities that were planned which supported those themes. Good interactions were generally observed during the time of the time of the visit with staff being engaged with the children and attending to their needs. This did include presenting the planned activities, joining the children in their play, responding to behavioral issues, and other care needs. Some staff did provide more observational supervision but were attentive to the children and positioned in a manner that they could ensure all children were within direct line of sight at all times. The center does use proactive positive behavioral support techniques to manage behavior. Examples of this were most evident in the school age classroom where the teacher used techniques such as clapping her hands to get the children's attention when noise and energy levels began to rise rather than trying to yell over the children to be heard. The teacher also maintained a focus on safety such as redirecting a child that was sitting in a chair in an inappropriate manner and identifying that it could result in the child falling and getting hurt. Ratio was maintained in each classroom as required by age.

While the center has established health and safety policies in place some practices do need to be reviewed. During the visit I was able to observe a diaper change and staff did not follow the required procedures. This included the staff did not use a wipe to clean the child after removing the diaper, placed the clean diaper under the soiled diaper before removing it, did not wash the child's hands, and did not clean the changing station following the diapering before changing the next child. When reviewing this with the staff member she identified that following those procedures would take too long. Other concerns included staff not ensuring all children washed their hands before meal service, and some staff not washing their own hands before serving children meals. "Boppy Pillows" were also present in the infant room and staff did identify that they do use these for positioning/cushioning for children that have difficulty holding themselves up when sitting. It was reviewed that this is not the intended purpose of those items and they are not to be used in that manner. Chemical cleaners and other items that could present a safety risk to the children were stored in areas where they were not accessible to children. Staff in the preschool and school age classrooms were observed to follow good practices when using chemical cleaners by directing children from the area before use. First aid kits were present in the classrooms and generally contained materials necessary to address most common first aid needs. Over the counter medications were labeled and good storage practices are in place. The center does have a lock box maintained in the kitchen for prescription medications. Safe sleep requirements were followed for children under 1 year of age. It was noted that children over 1 year of age did have blankets in the cribs with them and while safe sleep requirements do not apply to children over 1 year of age it is not recommended to add blankets, pillow, or plush toys to cribs. These items should not be introduced until after children transition to cots. The preschool and school age children did have cots with proper bedding available. Supplemental light was added to the toddler and preschool classrooms to ensure sufficient illumination was present during nap time to allow staff to observe the children and determine if the child is in distress and needs assistance.

The center does have a full kitchen and meals are prepared on-site. Good food storage and handling practices were observed for foods stored in the kitchen, dry pantry, and classrooms. A copy of the planned menu is posted and identifies a good variety of nutritious food options. Lunch was served during the time of the visit and was modified as Audra was also doing the cooking and did not have enough time to prepare the planned meal and participate in the licensing visit. Good food service practices were observed with Audra wearing food service gloves and using measured scoops when portioning out meals. While the staff did not sit to eat with the children supervision was provided at the tables. O

The playground includes three areas with a large open grassy area, area with a climbing and dramatic play structures for the older children, and an area for the infants and toddlers. All were enclosed and divided by chain link fencing which was in good repair. Foam tiles were installed in the infant area for use as fall surfacing to allow for the use of some climbing structures. The preschool/school age playground has a wooden climbing structure which was observed to be in good repair but does have an gap at the slide entrance which is large enough to be an entrapment risk and an additional rail should be added to address that concern. Pea gravel is used for fall surfacing which has developed a hardpan layer and either needs to be aerated, supplemented, or use restricted until there is a sufficient depth of loose material. Suspend awning shade structures in both the infant and school age playground spaces provide shade.

In reviewing administrative records the required notices for Consultant Contact, Mandatory Abuse Reporting, and the License Certificate were posted in an area readily accessible to parents and visitors. A random sample of 25% of the child files were reviewed and were generally found to contain all required information though several children needed an updated physical. In reviewing staff files the center does maintain a self-audit record to identify what information is present and what is needed. That self-audit was found to be accurate when compared to randomly selected files. The self-audit did identify that 6 staff needed an updated physical. It also identified that 4 staff needed an FBI Fingerprint background check as they had been labeled NA as they were under 18 years of age. It was reviewed that requirements had changed and all staff are required to have an FBI FIngerprint background check, but staff under 18 did require written permission from their parents to conduct the check. All inspection logs and certificates were available and current. It was noted that the center does not have a radon mitigation system and the tested levels were found to be 3.3 in January 2024 and so do not need to be renewed for 5 years from that date.

III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:

The center is participating in the IQ4K program which seeks to implement best practice recommendations and is currently rated a Level 2 program out of a 5 level scale where 5 is the highest level.

The center has completed some updates including new siding.

The center is working to implement a new curriculum program, Active Learning.

The center is exploring options of purchasing the building, or renovating and moving to a new space.

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

109.9(1)a: All files contain:Copy of a department criminal history record check form or any other permission form approved by Department of Public Safety for conducting an Iowa or national criminal history record check Copy of a request for child abuse information form, when applicable.Copies of results of Iowa record checks conducted through the SING for review by the department upon request.Copies of national criminal history check results.Any department issued documents sent to the center related to a record check, regardless of findings.
-- Documentation of FBI fingerprints was not present for staff under 18 years of age.

109.9(1)b: All files contain a pre-employment physical exam report completed within six months prior to hire and at least every three years. Physical exams shall be documented on form 470-5152, Child Care Provider Physical Examination Report.
-- Number not in compliance: 6

109.10(5): Staff hand washing: The center shall ensure staff demonstrate clean personal hygiene sufficient to prevent or minimize the transmission of illness or disease
-- Staff did not wash hands before serving meals.

109.10(6): Children's hand washing: Center shall ensure staff assist children in personal hygiene.
-- Children did not wash hands immediately before eating.

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.
-- Staff did not use a wipe to clean the child after removing the diaper, placed the clean diaper under the soiled diaper before removing it, did not wash the child's hands, and did not clean the changing station following the diapering before changing the next child.

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.