Health and Human Services

Iowa Department of Health And Human Services

CHILD CARE CENTER ANNUAL EVALUATION

Name of Center: Little Mustangs Learning Center LLC

Provider No.: 53006

Address: 525 N 6th St, Armstrong, IA, 50514

County: Emmet

Director's Name: Taetym Fredricksen

On-Site Supervisor:

Phone Number: 7128683548

E-Mail: littlemustangs@yahoo.com

HHS Visit Date: 10/30/2025

Licensing Period: 10/01/2025 to 10/01/2027

Fire Inspection:

Date Inspected: 09/26/2025

Comments:

Report Visit Type:

- [ ] PTO
- [X] Licensing Visit
- [ ] Drop In
- [ ] Administrative Change

License Type:

- [X] Full
- [ ] Provisional

Quality initiative:

- [ ] Accrediation

Program Duration:

- [X] Year-Round
- [ ] School Year
- [ ] Summer Only

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Program Population Served:

- [ ] Infant(0-<24 Months)
- [ ] Toddler
- [ ] PreSchool
- [ ] School Age
- [X] All Ages

LICENSE CAPACITY	Infants	2 Years	Preschool	School-Aged	Capacity
General	5	10	15		30
Summer					0

1. Basic Overview

An unannounced licensing visit was made to the Little Mustangs Learning Center on 10-30-25 where I met with the center director Taetym Fredricksen. The facility had been in operation previously under different ownership and was purchased by Zoey Huntley. This is the initial licensing visit for the center under the new ownership which was granted permission to open on 10-01-25 and will operate as a for-profit center. Taetym also took over the director role on that date and is well qualified for the position based on her experience as a director of another center, and on-going training in early childhood care. The program is located in a commercial store front building in the downtown main street of Armstrong. The center provides full range daycare programming serving infants through school age children. There are currently 33 children enrolled in the center served by 7 staff. All aspects of the program subject to licensing standards were reviewed during the visit.

The general layout of the building has a long open area that is divided into several areas by full and half walls. The infant room is located at the rear of the building and is separated from the rest of the center by a full wall and half door. The infant room is further divided into a primary programming area, and a crib/access corridor by a half wall. The half wall is of a height that if staff are sitting on the floor or in a rocker they would not be able to observe sleeping infants. Options of bring a crib into the programming area, positioning staff in the sleeping area, or lowering/removing the walls to allow direct observation were discussed. Part of that intention of the wall was to provide an access corridor to a secondary exit located at the rear of the building which the older children could use without intruding on the infant programming space. The rest of the building is divided into 4 areas by half walls to define a kitchen space, an entry/administrative space, and two programming classrooms for 2-3 year olds, and preschool/school age children. There are 3 restrooms located in the center with one in the infant room, and two off the preschool/school age space. Changing stations are also present in the infant and 2-3 year old spaces. At the time of the visit one toilet was not functional and the center had contacted services for repairs. Sinks are located in each programming area to allow for hand washing. During the visit it was noted that the water temperature was very hot and measured to be 131.2 deg F. It was reviewed that this can result in instant scald burns and the temperature needs to be adjusted to no more than 120 deg. F. when measured at the spigot with only the hot water tap on. Taetym stated that this had also already been reported as an issue for the plumber to address. There is a large storefront window at the front of the store in the entry/administration area that provides some natural light and a view but due to the layout is not readily accessible to the children. There is also a small inset window to the exit door of the infant room that can provide some natural light. The majority of the space is light by florescent lighting which provides ample illumination to programming areas. The center makes use of a basement area which had clear access of the stairs, and which was largely empty providing ample shelter space however it did have a musty odor and some mold staining was visible on a section of one wall. Furniture and play structures are used to define activity centers for the children in each programming space. The arrangement of the furnishings did not create any blind areas but it noted that children were using them as climbing structures to allow them to look over the divider walls. While not being a licensing violation it was reviewed that changes to the arrangement could reduce the risk of injury from the children climbing.

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2. Identify Observed Strengths of the program

A copy of a planned curriculum and daily schedule was posted and the staff were observed to be engaged with the children. While much of the planned schedule identified larger periods of self-directed play the teacher in the preschool room was moving children through activities such as reading a story, self-directed center play, a group coloring/craft activity, and lunch. In the infant room the teacher was engaged with the children being down on the floor playing with them, and attending to their needs with changing diapers, and laying them down for naps. Interactions were mixed with teachers using calm tones with positive word choices in some situations, and loud harsh/frustrated tones with negative word choices in others. While not raising to the level of being threatening or derogatory it did tend to be less effective in reducing the overall escalating energy and behavioral issues that it was intended to address. Ratio was maintained as required in the center.

Good health and safety practices were generally observed but some practices do need to be reviewed. During the visit I was able to observe a diaper change and the teacher did follow the posted procedures but did not deglove between handling soiled and clean items. Children were directed to wash their hands a required following diapering/restroom use, before meals, and other times they became soiled. Chemical cleaners, personal belongings, and medications were stored where they were not accessible to children. One concern that was observed was the presence of items and toys with small parts that could easily break off and be a choking hazard were present in programming spaces serving infants and toddlers. It was reviewed that items that are less than 1 1/4 inches diameter and 2 1/4 inches length are considered choking hazards and need to be removed from areas serving children under 3 years of age. First aid kits were present and contained materials to address most common first aid needs. Safe Sleep practices were followed with regard to infants under 1 year of age, however during the visit as previously noted the half walls are of a height that they prevent direct line of sight if staff are not conscious of positioning and the teacher was observed to be sitting on the floor with other children while a child was sleeping in a crib. The child did wake up and was returned to the programming space but options for maintaining direct line of sight observation was discussed. Older children make use of cots that did have appropriate bedding present.

The center does have a small outdoor space at the back of the building which has been used as a playground in the past but which is not being used at this time due to damaged fencing and other concerns. Given the highly commercial area of the facility the center does make use of a community park which is located two blocks away for outdoor programming.

The center does have a full kitchen and meals are prepared on site. Good food storage practices were observed for both dry pantry and refrigerated items. While cleanliness could be improved the observed conditions did not rise to the level of being a health concern, nor was there any observed evidence of insect or rodent infestation. A copy of the menu was posted and did identify a good variety of nutritious food options.

In reviewing administrative records all required notices for No Smoking, Permission to Open, Consultant Contact, and Mandatory Abuse Reporting were present in an area readily accessible to parents and visitors. Other notices for emergency evacuation, emergency contact numbers, diapering procedures, handwashing procedures, curriculum, and daily schedule were present. A brief review of child files was made and Taetym noted that the center is working to update all files. Taetym stated that they do have contact information for all children, but are working to obtain updated physicals and while they have obtained most they are still working on others. The center is currently using a communication application program to maintain infant daily sheets and while the program does prompt for all required elements the records were inconsistent and routinely did not document daily activities and disposition. Similarly when reviewing employee files Taetym noted that she is again working to update the files. Two staff under 18 needed an FBI background check and Taetym stated that the prior owner had said that because they were minors those checks were not required. It was reviewed that the background checks are required for all staff, but for those staff under 18 a parent must provide written consent to conduct the check and if they refuse then the individual cannot be employed. In addition 5 staff needed updated physicals, and Taetym had given all staff a deadline of 12-01-25 to update all training, and she had scheduled a 1st Aid/CPR training which would be provided on 11-13-25. Taetym did have documentation of fire and tornado drills but noted that she would be conducting Radon testing, and obtain a fuel burning appliance inspection. The center is working to revise the center handbooks and Taetym stated she would forward a copy for review once completed.

3. Identify the aspects that fall below the standard

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 checkCopy 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.
-- Number not in compliance: 2

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: 5

109.9(3): Daily written records are maintained for each child under two years of age and include: The time periods in which the child has slept. The amount of food consumed and the times at which the child has eaten. The time of and any irregularities in the child's elimination patterns. The general disposition of the child. A general summary of the activities in which the child participated.
-- The center uses a communication application to electronically log daily information for infants. While the program has the functionality to log all required information and attach photos completion of daily disposition and activities was very inconsistent. A phone can be considered a visual depiction of both mood and activity however if using that method staff need to take photos of every child every day both AM and PM to show any changes in functioning.

109.11(2)a: The center will provide sufficient and safe indoor play equipment, materials, and furniture. It must meet the developmental, activity and special needs of the children.
-- Items and toys with small parts that can break off which would be less than 1 1/4 inches diameter and 2 1/4 inches length are choking hazards and need to be removed from classrooms serving children under 3 years of age.

109.11(3)a: Center shall ensure that:Facility and premises are sanitary, safe, and hazard free.Sufficient lighting shall be provided.Sufficient ventilation.Sufficient heating.Sufficient cooling.Equipment placed in the program area is maintained so as not to result in injury to the children.
-- Hot water temperatures need to be reduced to no more than 120 deg F. when measured at the spigot with only the hot water tap on for all sinks used for hand washing. The non-functional toilet needs to be repaired. The half walls of the infant room need to be lowered, removed, or other options such as staff/crib positioning implemented to ensure that staff can maintain direct line of sight of infants when they are sleeping.

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

The center did have contractors currently scheduled to address various concerns related the physical facilities.

Taetym has also established deadlines, and notified both families and staff of missing documentation.

5. 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.

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6. ADDENDUMS:

- Addendum1: An e-mail was received on 11-19-25 with the corrective action steps the center has taken and/or plans to implement to address those concerns identified as not being compliant. The following information was provided.

  - Waivers have been drafted and sent home with our two staff under the age of 18 to get parental consent to obtain fingerprints, and they're working on finding a time to get those completed. I noticed in the evaluation report you stated we never obtain background checks on those staff, but we did; we were missing fingerprints, as I was told by our previous owner, they weren't needed.
  - While we have current emergency contact information and releases from our families, I provided our families with Friday, December 5th, as the due date for those few missing physicals.
  - I got in touch with Public Health in regards to sorting out our immunization mess, and they provided great aid, and we should be scheduling our annual audit sometime this week.
  - I have added exit paths to all our emergency exit diagrams posted on the walls.
  - Radon testing in the basement is in process and will be in the mail by the end of the week to get those results and see if we need to test the main occupancy area as well.
  - Cot sheets have been ordered, and we're waiting on delivery.
  - After speaking with the plumber and our landlord, the only agreed-upon solution to our fixing our high water temperatures is placing thermostatic mixing valves on our hot water lines under each sink, and we are still awaiting those parts to come in. We are continuing to supervise and assist children while using the sinks to avoid scald burns.
  - We are still working with our landlord in regards to documentation of furnace inspection and the repair of the out-of-service restroom.
  - We have gone through our rooms for children under the age of three, and I believe we have removed all toys and items that are less than 1 1/4 inches in diameter and 2 1/4 inches in length.

This Addendum is approved by supervisor on 11/19/2025 4:08:41 PM

Date: 11/07/2025

HHS Licensing Consultant: Ray Salsbury

Non-compliance with any of the mandated regulatory requirements listed above may lead to the cancellation or revocation of your Child Care License. Please take steps necessary to completely address each of the violations noted above.

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 **https://iowaccrr.org**.