Health and Human Services

Iowa Department of Health And Human Services

CHILD CARE CENTER ANNUAL EVALUATION

Name of Center: Algona Family YMCA Childcare @ the YMCA

Provider No.: 29410

Address: 2101 E McGregor ST, Algona, IA, 50511

County: Kossuth

Director's Name: Chelsi Muleski

On-Site Supervisor:

Phone Number: 5152957701

E-Mail: childcare@algonaymca.org

HHS Visit Date: 04/13/2026

Licensing Period: 06/01/2026 to 06/01/2028

Fire Inspection:

Date Inspected: 10/29/2025

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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HOURS:	*Year-round*	*School-Year*	*Summer Only*
Sunday			
Monday	6:00 AM to 6:00 PM		
Tuesday	6:00 AM to 6:00 PM		
Wednesday	6:00 AM to 6:00 PM		
Thursday	6:00 AM to 6:00 PM		
Friday	6:00 AM to 6:00 PM		
Saturday			

Program Population Served:

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

LICENSE CAPACITY	Infants	2 Years	Preschool	School-Aged	Capacity
General			31	89	120
Summer					0

1. Basic Overview

An unannounced annual visit was made to the Algona YMCA Childcare program on 04-13-26 where I met with the center director, Chelsi Muleski. Chelsi took over the director role of the program on 10-01-24 and is well qualified for the position with a BA degree, and having been with the program since 2012. The center provides full day programing to preschool age children that are at least 3 years of age and toilet trained, and before/after school and summer programming to school age children. There are currently 26 children enrolled in the "Little Y" preschool program, and 20 children enrolled in the "Big Y" school age programs. While the program typically has large numbers of children enrolled for the school age programming not all attend on a regular basis or at any given time. The program is served by 9 staff. All areas of the program subject to Licensing Standards were reviewed during the visit.

The general layout and operation of each room remains the same as in prior visits. The school age program operates primarily out of two adjoining rooms at the YMCA but also makes use of the other facility spaces such as the pool, racquetball courts, and gymnasium. The preschool programming operates out of a third room which is dedicated to that programming. Each room has secondary exits that provide direct egress to the outdoors as well as other areas of the center. All exits were maintained so that they were free of obstruction and opened easily and freely. Evacuation notices that include both diagram and written instructions for fire and tornado evacuation were present but were missing by some doors and need to be replaced. Each room has sinks that can allow for hand washing. The preschool room has restroom facilities available directly from the programming space so that the children do not need to leave the room. Additional general facility restrooms are available off the main corridors, and locker room areas. Windows along the exterior walls provide ample natural light and a view of the outdoors in each classroom but do not open to allow ventilation. The building custodial services are responsible to provide the majority of cleaning but the center staff do have supplies for cleaning and sanitizing tables, toys, and other materials as needed. There were no maintenance concerns noted in any of the classrooms

on the day of the visit. All classroom areas are divided into activity centers through the placement of furniture and play structures that are arranged so as not to create any blind areas.

2. Identify Observed Strengths of the program

Good interactions were observed on the day of the visit in both programs. The preschool program had a copy of the planned schedule and curriculum posted and the teachers were implementing those. This included during center play time having the children move to different activities including a teacher lead small group doing language and number pages. The teachers also moved through the classroom interacting with the children and attending to their needs such as one teacher assisting a child that had a toileting accident. In the school age room the teachers assisted with settling the children into the program after arrival, serving snack, and engaging in center activities. The teachers did move to ensure that they were able to have a teacher in each classroom where children were present and reviewed which children they were responsible for when the group split up. All of the teachers presented a positive and energetic attitude and spoke to the children using calm tones and positive word choices. The teachers and children appear to have very strong and positive relationships knowing each other on a personal level with engaging in some good natured teasing, talking about personal and family interests, and the children being responsive to guidance from the teachers. The center has a proactive positive behavior support approach to managing behavior with the use of routines, reminders, redirection, and problem solving. This coupled with the positive relationships resulted in a program where there were no behavioral concerns observed. Ratio was maintained with at least two staff present in each classroom, and teachers ensuing that children were within direct line of sight and sound at all times. Children needing to use the restroom were escorted as needed given the multiple use nature of the facilities.

Good health and safety practices were generally observed during the time of the visit but there was an issue with regard to toileting. During the visit the restroom that is accessible from the preschool classroom was observed to have toilet paper, paper towels, and feces on the floor. This would suggest that the staff do need to provide more supervision for children when using the restroom so that they can assist as needed. In addition one child had a toileting accident and the teacher assisting the child did make use of the diapering station of the nursery area used by parents when they are working out at the facilities. In observing that diapering the teacher did follow good general practices but did not deglove between handling soiled and clean items, nor was the changing station properly disinfected. It is understood that part of the enrollment requirement is that the children are fully toilet trained but accidents and illness can occur where developing written policy and practice is needed. As an example following cleaning the child from the toileting accident there was a question about how to handle the soiled clothing and resultant solids that were present in the clothing. Establishing policies as part of Universal Precautions on if staff will attempt to deposit solids in the toilet, or simply contain the items in a leak-proof bag can help staff to know what to do, and inform parents of what to expect. Good hand washing practices were observed with the school age children being directed to wash their hands upon arrival and before snack service. In the preschool class the teachers did direct children to wash their hands following restroom use, and ensured that they washed them in an effective manner. Chemical cleaners, personal items, medications, and other items that could pose a safety risk to children were stored in areas where they were not accessible. The center has first aid kits in each room necessary to address most common first aid needs. More extensive first aid supplies and materials also available and kept by the YMCA which can address more serious concerns such as AED units. Cots are provided for preschool children to use when napping and cover sheets and bedding that can be removed and laundered as needed were present. Allergy plans were posted in the classrooms for those children who had identified allergies.

The center outdoor area consists of a large open field and outdoor space where the children can play. While the space does not have any climbing structures there is a paved walking trail, Frisbee golf, sand table, and other outdoor play materials that are kept in a shed that the children play with. There are mature trees which provide ample shade.

The center kitchen area is located in the space used by the school age program. Counters and other furnishings define the kitchen area but access is not fully controlled with use of doors or gates. This will need to be monitored to ensure that children do not enter into this area. A copy of the menu was posted. The snack served consisted of string cheese, pepperoni slices, milk, and bananas. The program uses a mixed approach to service with staff portioning the pepperoni but allowing the children to self-serve items such as the bananas and string cheese which were in individual serving wrappers. The menu does identify a good variety of nutritious meal and snack options consistent with CACFP guidelines. Good food storage, handling, and preparation practices were observed with the staff washing their hands before preparing or serving food, wearing food service gloves, and using measured practices when portioning meals. The children eat in the classrooms and supervision is provided.

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All required notices for No Smoking, Center License, Consultant Contact, and Mandatory Abuse Reporting were present and posted in an area that was readily available and accessible to parents and visitors in both areas. The consultant contact notice in the preschool classroom was partially covered and it was reviewed that those notices all need to be fully visible at all times. Other required notices for emergency evacuation, emergency numbers, daily schedule, lesson plan, handwashing, and menu were also present. In reviewing child files a random selection of 20% of the files were reviewed for both the preschool and school age children and each reviewed file was found to contain all required documentation. This did include response plans for identified allergies. In reviewing staff files 50% were reviewed and compared to the self-audit which was found to be accurate and identified that all staff had all required documentation with the exception of 2 that needed Mandatory Child Abuse Reporter Training. Inspection logs and certificates were current and available for all required elements. The center parent handbook was reviewed and found that several required written policies had not been brought forward or needed to be expanded in the most recent revision.

3. Identify the aspects that fall below the standard

109.4(1): Written policies on: Enrollment and discharge. Field trips and non-center activities. Discipline/Behavior/Biting. Nutrition. Health and safety policies. Transportation if applicable. Assurance people do not have unauthorized access to children at the center. Protecting children's confidentiality.
-- Required policies were missing or needed to be expanded to include all required elements for Health & Safety (responding to major/minor injury, immunization notification, response plans), Incident Report, Curriculum, Access, and Emergency Plans (chemical spill, bomb threat, relocation).

109.10(3): Infectious disease control: Centers shall establish policies and procedures related to infection disease control and use of universal precautions with handling of bodily fluid. Soiled diapers shall be stored in containers separate from other waste.
-- Policy and/or practice need to be reviewed to reduce the risk of disease exposure. Supervision should be provided to children making use of restroom to ensure that they practice good hygiene, and assist as needed. The center needs to establish how soiled clothing and items will be handled in the event of a toileting accident.

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

A copy of all required written policies with recommendations for implementation was provided to the center.

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.

Date: 04/28/2026

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**.