Health and Human Services

Iowa Department of Health And Human Services

CHILD CARE CENTER ANNUAL EVALUATION

Name of Center: Hope Learning Center

Provider No.: 25991

Address: 1711 Osceola AVE, Chariton, IA, 50049

County: Lucas

Director's Name: Destiny Dawson

On-Site Supervisor: Chelsey Greubel

Phone Number: 6412032745

E-Mail: hopelearningcenter.ia@gmail.com

HHS Visit Date: 02/18/2026

Licensing Period: 11/01/2026 to 11/01/2028

Fire Inspection:

Date Inspected: 03/08/2024

Comments: Due every 3 years, performed by SFM Curt Seddon.

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

CHILD CARE CENTER ANNUAL EVALUATION

HOURS:	*Year-round*	*School-Year*	*Summer Only*
Sunday			
Monday	6:00 AM to 6:30 PM		
Tuesday	6:00 AM to 6:30 PM		
Wednesday	6:00 AM to 6:30 PM		
Thursday	6:00 AM to 6:30 PM		
Friday	6:00 AM to 6:30 PM		
Saturday			

Program Population Served:

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

LICENSE CAPACITY	Infants	2 Years	Preschool	School-Aged	Capacity
General	24	18	52	41	135
Summer					0

1. Basic Overview

Hope Learning Center is the only licensed child care center in Lucas County. This center is governed by a Board of Directors. The center is located on the edge of Chariton in a modern 2 story building located in a business complex (Vredenburg Center). Care is offered for newborns to 12 year old children. This is a secure building where a door code must be used to enter the facility, or the doorbell must be rang. A door camera is present so they can see who has rang the doorbell before opening the solid wood door that has no window.

A licensing visit was conducted by HHS on 2/18/26. All program areas were observed at that time. The new Director Destiny Dawson began job duties with the center as Director in September 2025. . She meets the points required for the position. She worked in the center since 2021 before accepting this promotion. Chelsey Greubel has been employed at the center since 2023. Prior to this she worked in the school system as an associate. She must send an OSS to HHS for approval. She is currently the designated person in charge. This was completed 3/3/26 per HHS request. A center this size requires an onsite supervisor be present, so that at least one person in charge of the center can be consulted outside of the classroom when issues arise.

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Center NUTRITION:

Children are served breakfast, am snack, lunch, and a pm snack. The center has a long term kitchen staff- who is trained on

CHILD CARE CENTER ANNUAL EVALUATION

regulations. Menus are a six week rotation. A current monthly menu was posted at various places in the center. Refrigerators contain thermometers that are checked to make sure safe temperatures are maintained. Food items are stored according to NHSPS guidelines. The staff sit and eat with the children. Family style eating is introduced to children when they are in the two year old room. The center participates in the CACFP program. Most food is stored in the kitchen but some food is stored in individual rooms. Staff are aware of food storage practices.. Administration reviewed sanitizing and disinfecting products with their Child Care Nurse Consultant to ensure they are safe for childcare. Bleach and water solution is made each morning by the opener.

Children dine at child sized tables and chairs in their classrooms.

Children with food allergies have allergy action plans and they are posted in the classroom. HHS staff met with the kitchen lead during the visit.

Center HEALTH AND SAFETY:

Medicines are kept in each classroom in a locked cabinet. Every room has a fully stocked first aid kit. We discussed allergies and required forms. I observed over the counter medication and adjoining medication administration paperwork.

Monthly fire and tornado drills are practiced and documented each month. An annual furnace inspection is conducted each fall. Plug in carbon monoxide detectors are present. Cleaners should be gone over with IDPH to ensure they are safe for childcare.

Radon testing is required every five years and it is recommended the testing be done during the winter months when the ground is frozen. A test kit is to be placed in every room serving children except kitchens, bathrooms and laundry areas. Radon testing is current for the program and has been conducted within the past 5 years. The building was constructed after 1960 therefor a lead-based paint assessment is not required.

We discussed Safe Sleep requirements. They were met the date of the visit. Lighting, no blankets in cribs, clear vision of all infants and all other Safe Sleep requirements were being met. This is an improvement from years past. Cribs or cots should be spaced 2-3 feet apart to deter spreading of communicable diseases and accidents. We discussed this.
We also discussed boppy pillows which are in the infant room. They are no't recommended in child care centers (except for nursing mothers). This has been a topic of discussion the past 3 years.

Children with allergies of any sort have allergy action plans. Plans must be signed by parents and a physician. Staff supervising the child should be trained on the plan.

Supervision is an issue identified as needing improvement at the center. The center began breaking the children into groups in July so that careful supervision is achieved.

CCNC Heather Marsh may be consulted in all health and safety matters.

Center PLAYGROUND:

Three playground areas are present. One space is specifically for children under the age of two, and one is for ages two to five. The other playground is for the school age children. The school age playground had some drainage work done so the children can now play on this playground. Rubber matting and wood mulch is used for surfacing in these areas. Wood mulch has been added to the area to meet adequate surfacing depth requirements. The school age children also have access to a large grassy area.

Monthly playground inspections are documented. Canopies provide the shade in separate areas on the playground. The sand box should be monitored to ensure animals are not entering the play area. During the summer they take gallon thermos jugs of water out to the playground, so the children stay hydrated. The Child Care Weather Watch should be utilized on days where outdoor play is questionable due to varying weather conditions.

A first aid kit, emergency contacts and emergency medications are taken outdoors with the children.

Children should be counted and supervised by the staff person designated as their caretaker. Children should not be left

outdoors by their caretaker. It is the responsibility of the staff assigned to the child to ensure the child leaves the outdoor play area with staff assigned to their care.

Center TRANSPORTATION/FIELD TRIPS:

The center has two vans that are 15 passenger vehicles. Field trips are taken by children ages three and up. The field trips are primarily to places in town but have not been utilized this past year. The hospital conducts annual maintenance on the vans. A first aid kit, emergency contacts and emergency medications are taken on field trips with the children.

Center ADMINISTRATIVE RECORDS:

Conferences are held twice a year for the children ages three and up. The Director has been working with staff since she took this position on implementing schedules, routines, and age-appropriate curriculum. In the past the Director reported she checked in weekly with staff to make sure daily lesson plans and curriculum are implemented. This should resume or continue. HHS recommended in June 2024 restroom breaks be added into the daily schedule. The daily schedule should be revisited with all classrooms to ensure the current schedules are being followed and/or are working.

All required postings were present. The notice of being mandatory reporters of abuse and contact information for licensing consultant are posted. Fire and tornado evacuation diagrams, and no smoking signage were present. Communicable diseases were posted the date of the visit.

Child files are reviewed annually, and the file tracking sheet is also reviewed annually. Parents should sign annual updates at the beginning of the school year. The center is now using ProCare software. Emergency contacts, pick up authorizations, physicals, immunizations, field trip authorizations are all tracked and monitored and should also be updated annually.

Staff files are reviewed annually. Universal Precaution training is due 90 days after hire as is Essentials. Iowa SING checks due ever 2 years, National Fingerprints (every four), staff physicals, (every 3), and CPR/1st Aid training (2 years) Mandatory Reporter training (3 years) are tracked and monitored for all employees. Professional development hours are due annually. Staff work four ten-hour days. Two staff had overdue physicals. Several staff have just taken PBIS with CCR&R.

New administration reached out to CCR&R in summer 2021and had in person consultation in the center. CCR&R had several recommendations. Administration formerly reported they were often working in ratio administrative duties are not always attended to quickly. This is now corrected. Other persistent issues were staff not following directives. In 2022 administration reported this issue had been corrected by administration and the board following center policies and following through with holding staff accountable to rule. They later reported staff were not following directives and are not bringing issues to administration to address. The center handbook should be utilized on a daily basis as well as Comm 204 and the HHS Licensing Rules checklist. Leadership changed again in 2025.

Center emergency policies and procedures have been reviewed with all staff annually. They signed and dated acknowledgement of such.

The discipline policy uses redirection and positive reinforcement. Behavioral policies are well defined and should be consistently followed. Incident reports should be written and given to parents when minor incidents/behaviors occur. They are required to be documented and kept in child files for behaviors, physical injuries or other minor and more significant issues such as sexualized behavior or when children are temporarily out of the classroom or left outdoors.

2. Identify Observed Strengths of the program

The center has been actively involved with Karen Lauer, CCR&R .

The Director and OSS are holding staff meetings so staff and administration have good communication.

Center administration met with CCR&R and IDPH twice to form a plan to ensure violations are quickly resolved.

CHILD CARE CENTER ANNUAL EVALUATION

The center recently switched to four ten hour days for staff and report it is working out well so far.

When staff do not follow protocol issues are quickly and systematically addressed.

3. Identify the aspects that fall below the standard

1. 109.10(13)c: Center shall develop procedures for annual staff and volunteer training on emergency plans. The OSS agreed to train staff on the EPP and have them sign and date acknowledgement of such.

2. 109.12(4)f: Crib or crib-like furniture, waterproof mattress covering, and sufficient bedding that meets CPSC or ASTM standards is provided for each child under two years of age. Infants were too close together while sleeping. All cots required sheets.

3. 109.7(1) All staff (within first three months of employment): Iowa's training for the mandatory reporting of child abuse.
At least one hour of training regarding universal precautions.
Certification in First Aid infant, child, and adult cardiopulmonary resuscitation (CPR) or equivalent certification approved by the Department. A valid certificate indicating the date of training and expiration date shall be maintained.
Certification in infant, child, and adult first aid that uses a nationally recognized curriculum or is received from a nationally recognized training organization including the American Red Cross, American Heart Association, American Safety and Health Institute, or MEDIC First Aid or an equivalent certification approved by the Department. A valid certificate indicating the date of training and expiration date shall be maintained.
Minimum health and safety trainings, (Essentials) approved by the Department. If significant changes occur to content, the Department may require the training be renewed.

109.7(2) Center directors and all staff have the required contact hours of training. Some (4)staff do not have all required hours of training. Two do not have updated physicals. CCR&R can help the Director or OSS develop a training plan.

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

5. Special Notes/Recommendations

HHS encourages you to contact your local nurse consultant. Child Care Nurse Consultants work with child care and early education businesses. Businesses may call or send questions to a child care nurse consultant about health and safety policies, health programs, health of personnel, and specific child health or safety issues. Please visit the following website for more information. http://idph.iowa.gov/hcci/consultants. CCNC Heather Marsh completed the following this past year:

IDPH CCNC Heather d'Auteuil <hdAuteuil@maturaia.org> works consistently with the program.

On 3/4/26 she stated, "In speaking with the director, it sounds like they have things much better in hand. She said the biting is under control and they have implemented a few things we talked about (using small activities in between big activities to keep kids waiting engaged etc.) and splitting up the room which she says has made a huge difference."

"3/17/25- onsite visit completed with follow up email sent provided extensive TA re: med admin and special health needs with f/u email"
5/12/25- TA re: allergy/action plan- cat allergy
5/14/25- TA: sunscreen and shade
6/23/25- Onsite visit for TA re: special health needs and med admin x 3
6/25/25- TA re: med admin and special health needs
7/17/25- TA re: first aid kits
7/24/25- TA dehumidifiers
8/25/25- TA humidity bags

CHILD CARE CENTER ANNUAL EVALUATION

8/28/25- TA cloth diapers
9/3/25- TA CPR
9/15/25- TA IZ and med admin
9/25/25- TA special health needs survey
10/3/25 TA asthma and child with special health needs
10/6/25- TA- call with HHS re: biting reports
11/12/25- Onsite visit for med admin x3 as well as follow up r/t biting issues at the center and questions regarding sunscreen.
11/24/25-TA sunscreen documentation
2/18/2026 onsite visit to follow up with director re: the issues they had been having with biting etc. She states the behaviors are no longer an issue as the child and the staff that were the issues are no longer there and they have been implementing more little activities in between the big activities to keep kids busy and splitting the class.

HHS encourages you to contact Child Care Resource and Referral consultant. They offer centers assistance with meeting the DHS regulations, QRS, infant/toddler concerns, room arrangement and environment, developmental concerns, Best Practice information, CDA assistance, or any questions or concerns you may have. Please visit the following website for more information: http://www.iowaccrr.org Michelle Greenough is your consultant. CCR&R and IDPH have provided assistance to the center this past year including:

CCR&R Consultant Karen Lauer: provided the following in 2024/2025:

In-Person Visits: 7 (Topics: Safety, Business Policies & Practices, Training Consultation, Environments and Behavioral Supports)
Virtual Visits: 1 (Topics: Business Policies & Practices, Safety and Training Consultation)
13 consultations with topics including director support of children, environments, business policies and practices, safety, training consultation, behavior supports, support licensing and QIP.
30 TA's with topics including QIP, training consultation, safety, business policies and practices, support licensing, behavior supports, refer/support to other programs and IQ4K.

This past year she provided the following:

February 2025 – present date
On-Site Visits 8
Topics: behavior supports, environments, safety, support licensing, QIP, business policies and practices, training consultation and refer support to other programs

TA's 32
Topics: refer support to other programs, safety, QIP, business policies and practices, IQ4K, training consultation, recruitment and retention, environments, support licensing, curriculum and EC-PBIS

Karen Lauer

Last year the program was removed from a Provisional License and restored to Full licensure. No identified past tissues have been observed by IDPH, CCR&R or IHHS during visits. Center program administration report no current deficiencies. The indicate they will access CCR&R or IPDH if questions arise. Violations have been corrected and a plan implemented and followed to ensure all violations are resolved long-term. Based upon this review, it is recommended that this center remain in Full licensing status. The center is directed to continue to monitor day to day practice and adjust accordingly to continue to ensure licensing rule is met consistently. It is important to note, all HHS licensing standards and procedures must be maintained during the renewal period.

Administration and I discussed behavioral management and techniques including the following:

• How do you help staff understand the expectation associated with behavior management? They take the required training, we go over acceptable/unacceptable discipline methods and how to handle the behaviors. Positive behavior guidance is

strongly encouraged and using de-escalation strategies.
• How do you help staff recognize their frustration and respond with de-escalation? When they feel like they might have raised their voice, or feel overwhelmed we ask them to please call management into the room to give them a break to restart.

• How do you monitor these skills / expectations? Our staff are very open about how they are feeling. Very seldom do they ask for a break out of their room. Management walks around multiple times a day to make sure staff are doing their task and managing the classroom well.

Date: 03/09/2026

HHS Licensing Consultant: Jill Seibert

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**.