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

Name of Center: HACAP Head Start-Dyersville **Enrollment:** 23 **License ID No. (Reapplications)** 51195

Street: 750 5th St NW **City:** Dyersville Iowa **Zip** 52040 **County:** Dubuque

Mailing Address: 1515 Hawkeye Dr, Hiawatha , IA, 52233

Director's Name: Amy Knockel **Phone Number:** 563-348-5200

On-Site Supervisor(s): Donna Leonard **E-Mail:** JMoore@hacap.org cregan@hacap.org

Date(s) of Visit: 04-24-2024

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: 07-19-2023

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 School-Age

Get-Well Evening Care Special Needs

SCHEDULE: Year-round X School-Year Summer Only

HOURS:	*Year-round*	*School-Year*	*Summer Only*

LICENSE CAPACITY	Infants	2 Years	Preschool	School-Age	Capacity
General	2	6	20		28
Summer					0

QRS Rating: N/A

RECOMMENDATION FOR LICENSE:	
X	**FULL** license from 10-01-2024 to 10-01-2026
	PROVISIONAL license from
	DENIAL of initial application
	SUSPENSION of license
	REVOCATION of license

Licensing Consultant: Heidi Hungate **Date:** 05-01-2024

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

N/A

II. IDENTIFY THE AREAS OBSERVED ON THE VISIT:

An unannounced licensing visit was completed at the center on 4/24/24. The on site supervisor, Donna Leonard, was present along with other staff. One staff primarily functions as the program cook but also helps out in the classrooms as needed. This Head Start program is one of many managed by the HACAP entity. There is a well-defined organizational structure within HACAP. Amy Knockel is the center director for this center. Amy was not present on site the day of this visit. The program is located in a newer one level building and uses two program rooms and an adjacent kitchen area to one of the rooms as well as adjacent restroom area shared between the rooms for the children.

One of the rooms is a Head Start room and the other an Early Head Start room. The program areas offer plenty of space, are nicely decorated, and are child friendly including age appropriate and accessible materials. Rooms are well supplied with materials to support program needs. A restroom area is shared between the program rooms. Program rooms include hand washing sinks within the program space. The early head start room also includes a diaper station. All program space was observed.

The center participates in the CACFP. The program serves breakfast, lunch, and snack as prepared by the experienced cook on-site. The kitchen is clean and very organized.

III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:

The staff are experienced and the on site supervisor has managed this Head Start program for many years. This is reflected in how well the center continues to be organized and how well the staff continue to work together. Both program rooms are bright and colorful with large windows, appear clean, and include very well-maintained equipment and materials. A separated additional fenced outdoor play area has been added for the early head start room. The program continues to utilize the local AEA program where materials can be borrowed to supplement the program activities. The staff were again observed to be highly engaged in activities with the children, staff provide careful supervision, and many positive and enthusiastic words of encouragement were overheard, and the children appeared to be enjoying their child care experience. Required licensing documentation and child and staff files were found highly organized at this site.

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

109.10(3): Medications.
1. Medications present without current authorization forms completed by the parent, missing emergency action plan for the medication, and/or missing specific beginning and ending dates for the period of authorization.

V. SPECIAL NOTES/RECOMMENDATIONS:

1. All required postings need to be visible for both program rooms either in each room separately or at a common area that is visible to all parents.

1. Ensure all open food items are stored in a sealed container or ziploc and dated for freshness.
2. Ensure daily written records are maintained for each child under two years of age and include time periods slept, amount of/time food consumed, time/irregularities of elimination patterns, general disposition, and general summary of activities.
3. Emergency plan postings at the doors in the EHS room need to include the written instructions for fire and tornado.

The center will continue with a full license. Please address the violation(s) and/or concern(s) noted in the report so that corrections are obvious and ensure that items remain in compliance. This report does not require a written response. Thank you.

*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.