



Iowa Department of Human Services

Kim Reynolds
Governor

Adam Gregg
Lt. Governor

Kelly K. Garcia
Director

02/06/2019

Valarie Schroeder
468 Noah DR
Anamosa, IA 52205

Dear Child Care Provider:

This letter is in regards to the compliance visit at your Registered Child Development Home B conducted on 02/05/2019. Iowa Code Chapter 237A and 441 Iowa Administrative Code, Chapter 110, describes specific requirements that must be met by a Registered Child Development Home. You are not a participant in the voluntary Quality Rating and Improvement System. The following areas were out of compliance at the time of the visit:

441 IAC 110.8(1) **Facility Requirements**

- 441 IAC 110.8(1)“ n” Providers shall inform parents of the presence of any pet in the home.
1. Each dog or cat in the household shall undergo an annual health examination by a licensed veterinarian. Acceptable veterinary examinations shall be documented on Form 470-5153, Veterinary Health Certificate. This examination shall verify that the animal’s routine immunizations, particularly rabies, are current and that the animal shows no evidence of endoparasites (roundworms, hookworms, whipworms) and ectoparasites (fleas, mites, ticks, lice).
 2. Each pet bird in the household shall be purchased from a dealer licensed by the Iowa department of agriculture and land stewardship and shall be examined by a veterinarian to verify that it is free of infectious diseases. Acceptable veterinary examinations shall be documented on Form 470-5153, Veterinary Health Certificate. Children shall not handle pet birds.
 3. Aquariums shall be well maintained and installed in a manner that prevents children from accessing the water or pulling over a tank.
 4. All animal waste shall be immediately removed from the children’s areas and properly disposed of. Children shall not perform any feeding or care of pets or cleanup of pet waste.
 5. No animals shall be allowed in the food preparation, food storage, or serving areas during food preparation and serving times

441 IAC 110.8(4) **Emergency Plans**

- 441 IAC 110.8(4) “b” The provider must have procedures in place for the following:
1. evacuation to safely leave the facility
 2. relocation to a common, safe location after the evacuation
 3. shelter-in-place to take immediate shelter where you are when it is unsafe to leave that location due to the emergent issue
 4. lock down protocol to protect children and providers from an external situation
 5. communication plan and plans for reunification with families
 6. continuity of operations plans
 7. Procedures to address the needs of individual children, including those with functional or access needs

441 IAC 110.9 Files

441 IAC 110.9(1)

A provider file is maintained and shall contain the following:

441 IAC 110.9(4)

Children's Files. An individual file for each child shall be maintained and updated annually or when the provider becomes aware of changes. The file shall contain:

- a. Identifying information including, at a minimum, the child's name, birth date, parent's name, address, telephone number, special needs of the child, and the parent's work address and telephone number.
- b. Emergency information including, at a minimum, where the parent can be reached, the name, street address, city and telephone number of the child's regular source of health care, and the name, telephone number, and relationship to the child of another adult available in case of emergency.
- c. A signed medical consent from the parent authorizing emergency treatment.
- d. An admission physical examination report signed by a licensed physician or designee in a clinic supervised by a licensed physician
 1. The date of the physical examination shall not be more than 12 months before the child's first day of attendance at the child development home.
 2. The written report shall include past health history, status of present health, allergies and restrictive conditions, and recommendations for continued care when necessary.
 3. For a child who is five years of age or older and enrolled in school, a statement of health status signed by the parent or legal guardian may be substituted for the physical examination report.
 4. The examination report or statement of health status shall be on file before the child's first day of care
- e. A statement of health condition signed by a physician or designee submitted annually from the date of the admission physical. For a child who is five years of age or older and enrolled in school, a statement of health status signed by the parent or legal guardian may be substituted for the physician statement.
- f. For each school-age child, on the first day of attendance, documentation of a physical examination that was completed at the time of school enrollment or since.
- g. A signed and dated immunization certificate provided by the state department of public health. For the school-age child, a copy of the most recent immunization record shall be acceptable.
- h. For any child with allergies, a written emergency plan in the case of an allergic reaction. A copy of this information shall accompany the child if the child leaves the premises.
- i. A list that is signed by the parent and names persons authorized to pick up the child. The authorization shall include the name, telephone number, and relationship of the authorized person to the child.
- j. Written permission from the parent for the child to attend activities away from the child development home. The permission shall include:
 1. Times of departure and arrival.
 2. Destination.
 3. Persons who will be responsible for the child
- k. Injury report forms documenting injuries requiring first aid or medical care
- l. If the child meets the definition of homelessness as defined by section 725(2) of the McKinney-Vento Homeless Education Assistance Act, the family shall receive a 60-day grace period to obtain medical documentation.

Findings:

1. All dogs have annual examinations. Records of the exams are on file and must verify that routine immunizations are current.
 - Providers two dogs CoCo and Mocha need updated examinations.
2. Provider needs to complete the emergency preparedness plan. Provider states that she has done this, but has misplaced it and will be doing it again.
3. Children files- provider was caring 6 children on 2/5/2019
 - One child needs an updated physical

Suggestions for Improvement:

Recommendation:

[] Is the recommendation to terminate a provider agreement or revoke a registration?

Non-compliance with any of the mandated requirements listed above may lead to the cancellation or revocation of your Child Development Home Registration. Please take whatever steps are necessary to completely address each of the violations noted above. It is essential you correct all above-mentioned violations.

Based on the items out of compliance listed above, you will not be required to have a recheck or follow up visit to your home. No further action is required.

Please do not hesitate to contact me at DHS at 319-892-6857/ jsteven@dhs.state.ia.us if you have any questions regarding this letter.

Sincerely,

Jami Stevens

Social Worker II

Kimberly Hahn

Social Work Supervisor

Always Remember:

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 877-216-8481

As you plan your future trainings to meet your 24 hours of training requirement, please remember that you can access the approved training by going to http://www.dhs.state.ia.us/Consumers/Child_Care/Professional_Development.html

You may also access training at: <https://ccmis.dhs.state.ia.us/trainingregistry/>

All providers need to maintain compliance with rules set out in Iowa Administrative Code, Chapter 110, which includes: 441 IAC 110.5(1): Check with the appropriate authorities to determine how the following local, state, or federal laws apply to you: • Zoning code • Building code • Fire code • Business license • State and federal income tax • Unemployment insurance • Worker's Compensation • Minimum wage and hour requirements • OSHA • Americans with Disabilities Act (ADA).