06/19/2025

Alice Nyiramitavu
617 Main ST
Fairfax, IA 52228

Dear Child Care Provider:

This letter is in regards to the compliance visit at your Registered Child Development Home A conducted on 06/18/2025. 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)"a"	The home shall have a nonpay, working land-line or mobile telephone with emergency numbers posted for police, fire, ambulance, and the poison information center. The number for each child's parent, for a responsible person who can be reached when the parent cannot, and for the child's physician shall be written on paper and readily accessible by the telephone. The home must prominently display all emergency information, and all travel vehicles must have a paper copy of emergency parent contact information
441 IAC 110.8(1)"d"	Approved safety gates at stairways and doors shall be provided and used as needed.
441 IAC 110.8(1)"g"	The home shall have at least one 2A 10BC rated fire extinguisher located in a visible and readily accessible place on each child-occupied floor.
441 IAC 110.8(1)"h"	The home shall have at least one single-station, battery-operated, UL-approved smoke detector in each child-occupied room and at the top of every stairway. Each smoke detector shall be installed according to manufacturer's recommendations. The provider shall test each smoke detector monthly and keep a record of testing for inspection purposes
441 IAC 110.8(3)	**Medications and Hazardous Materials**
441 IAC 110.8(3)"b"	A first-aid kit shall be available and easily accessible whenever children are in the child development home, in the outdoor play area, in vehicles used to transport children, and on field trips. The kit shall be sufficient to address first aid related to minor injury or trauma and shall be stored in an area inaccessible to children. The kit shall, at a minimum, include adhesive bandages, bottled water, disposable tweezers, and disposable plastic gloves.
441 IAC 110.8(4)	**Emergency Plans**
441 IAC 110.8(4) "a"	Fire and tornado drills shall be practiced monthly and the provider shall keep documentation evidencing compliance with monthly practice on file for the current year and the previous year.

441 IAC 110.9 Files

441 IAC 110.9(1) A provider file is maintained and shall contain the following:

441 IAC 110.9(1)“a” A physician’s examination report for the provider and all members of the provider’s household aged 18 years or older. Acceptable physical examinations shall be documented on Form 470-5152, Child Care Provider Physical Examination Report. All children residing in the household must have medical documentation outlined in 110.9(4) “d”, 110.9(4) “f”, and 110.9(4) “g”

441 IAC 110.9(1)“b”(2) Documentation from the department confirming the record checks required under 441 IAC 110.11(3) have been completed and authorizing or conditionally limiting the person’s involvement with child care.

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. For children under the age of 6,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 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. Documentation 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.**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:
An annual compliance check was completed on 6/18/25 and the following was out of compliance:

441 IAC 110.8(1)“a” The number for each child’s parent, for a responsible person who can be reached when the parent cannot, and for the child’s physician shall be written on paper and readily accessible by the telephone. The home must prominently display all emergency information, and all travel vehicles must have a paper copy of emergency parent contact information.

Alice did have a written list of children, parental contacts, emergency contacts and physician but it was not updated with all of the children enrolled.

441 IAC 110.8(1)“d” Approved safety gates at stairways and doors shall be provided and used as needed.

Alice did not have a gate at the bottom of the stairs in the lower level of the home. She needs this to prevent young children from climbing on/up the stairs.

441 IAC 110.8(1)“g” The home shall have at least one 2A 10BC rated fire extinguisher located in a visible and readily accessible place on each child-occupied floor.

Alice did have the appropriate size fire extinguisher on both levels of the home but she was not able to reach the one on the main level. She did have her son put it in a lower location while this worker was present.

They also were not visible, and she did not have the sign identifying the location.

441 IAC 110.8(1)“h” The provider shall test each smoke detector monthly and keep a record of testing for inspection purposes.

Alice did not have any documentation of monthly testing of smoke detectors. She was provided a new form to use for documentation purposes.

441 IAC 110.8(3)“b” A first-aid kit shall be available and easily accessible whenever children are in the child development home, in the outdoor play area, in vehicles used to transport children, and on field trips. The kit shall be sufficient to address first aid related to minor injury or trauma and shall be stored in an area inaccessible to children. The kit shall, at a minimum, include adhesive bandages, bottled water, disposable tweezers, and disposable plastic gloves.

Alice could not locate her First aid Kit.

441 IAC 110.8(4) “a” Fire and tornado drills shall be practiced monthly and the provider shall keep documentation evidencing compliance with monthly practice on file for the current year and the previous year..

Alice did not have any documentation of monthly fire and tornado drills. She was provided a new form to use for documentation purposes.

441 IAC 110.9(1)“a” A physician’s examination report for the provider and all members of the provider’s household aged 18 years or older . Acceptable physical examinations shall be documented on Form 470-5152, Child Care Provider Physical Examination Report. All children residing in the household must have medical documentation outlined in 110.9(4) “d”, 110.9(4) “f”, and 110.9(4) “g”

Alice's husband had an expired physical.

441 IAC 110.9(1)“b”(2) Documentation from the department confirming the record checks required under 441 IAC 110.11(3) have been completed and authorizing or conditionally limiting the person’s involvement with child care.

Alice could not locate this documentation.

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:
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.
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.
A signed medical consent from the parent authorizing emergency treatment.
An admission physical examination report signed by a licensed physician or designee in a clinic supervised by a licensed physician
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.

The written report shall include past health history, status of present health, allergies and restrictive conditions, and recommendations for continued care when necessary.
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.
The examination report or statement of health status shall be on file before the child's first day of care
For children under the age of 6, 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 enrolled in school, a statement of health status signed by the parent or legal guardian may be substituted for the physician statement.
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.
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.
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.
Documentation 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.
Written permission from the parent for the child to attend activities away from the child development home.
Injury report forms documenting injuries requiring first aid or medical care
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.

Alice did not have a file at all (none of the required documentation) for two children recently enrolled.

She also did not have updated/annual physicals for 2 children and was missing an immunization record for one child.

The paperwork that Alice did have was missing emergency contact information and authorization on who can pick up a child for almost all of the children. We did discuss the need to have parents fill out the paperwork completely.

Alice was provided some additional forms (required paperwork) for the two children that had none. We also discussed that she can always contact CCR&R if she needs more forms.

Alice speaks Kirundi and an interpreter was present via phone. Rachel Bonefas from CCR&R was also present and plans to follow up with Alice in a few weeks to assist her in coming into compliance.

Suggestions/Recommendations:

I encourage you to work with Rachel Bonefas with Child Care Resource and Referral if you have any ongoing compliance or training needs.

Rachel can be reached at 563-362-8225

Thank you for your service in providing childcare in your community.

1305 E. Walnut Street, Des Moines, IA 50319-0114

Corrective Action Required:

A re-check is not needed at this time. Corrections need to be made by 7/9/25 and will be reviewed at the next annual compliance check. Please send pictorial verification of the items where specifically noted below.

Alice needs to update her written list of children, parental contacts, emergency contacts and physician to include all of the children enrolled. She will also need to update the list in her vehicle she uses to transport children. Alice needs to send pictorial verification to HHS when updated.

Alice needs to obtain a new gate at the bottom of the stairs in the lower level of the home to prevent young children from climbing on/up the stairs. Alice needs to send pictorial verification when obtained.

Alice needs to obtain fire extinguisher signs identifying the location of both fire extinguishers if they are not visible. She needs to send pictorial verification to HHS.
Alice also needs to ensure that they are accessible (within her reach) at all times.

Alice needs to ensure that she is testing her smoke detectors monthly and documenting that accordingly.

Alice needs to locate her first-aid kit that shall be available and easily accessible whenever children are in the child development home, in the outdoor play area, in vehicles used to transport children, and on field trips. The kit shall be sufficient to address first aid related to minor injury or trauma and shall be stored in an area inaccessible to children. The kit shall, at a minimum, include adhesive bandages, bottled water, disposable tweezers, and disposable plastic gloves. If she can't find hers, she needs to obtain a new one. Alice needs to obtain a new one if she can't find hers. She also needs to send pictorial verification to HHS.

Alice needs to ensure that she is practicing fire and tornado drills monthly and documenting those accordingly.

Alice's husband needs to obtain an updated physical and this needs to be on the HHS approved form. A copy of the form was provided to her. This was also an area that was out of compliance at last year's annual compliance check, so it is requested that Alice send pictorial verification when updated.

Alice should try to locate the documentation from the department confirming the record checks required under 441 IAC 110.11(3) have been completed and authorizing or conditionally limiting the person’s involvement with child care. She should keep this in her files with her other records for future compliance verification.

Alice needs to work with the parents to obtain all of the required documentation for each child's 's file.

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.

Please do not hesitate to contact me at DHS at 319-429-0749 or christy.weber@hhs.iowa.gov if you have any questions regarding this letter.

Sincerely,

Christine Weber

Social Worker II

Sheila Aunspach

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).