Health and Human Services

Iowa Department of Health And Human Services

CHILD CARE CENTER ANNUAL EVALUATION

Name of Center: NICAO Head Start & Early Head Start - Mason City

Provider No.: 33744

Address: 811 N Kentucky Ave, Mason City, IA, 50401

County: Cerro Gordo

Director's Name: Meghan Judisch

On-Site Supervisor: Keisha Boboltz (lead teacher)

Phone Number: 6414941891

E-Mail: mjudisch@NICAO-ONLINE.ORG

HHS Visit Date: 10/09/2025

Licensing Period: 12/01/2024 to 12/01/2026

Fire Inspection:

Date Inspected: 08/29/2025

Comments: An e-mail was received on 08-29-25 from the Fire Marshal that the facility had been inspected and while having a few corrections none impacted occupancy. Approval to occupy the building on 09-02-25 was granted. A copy of that e-mail is included as note in the center file.

Report Visit Type:

- [ ] PTO
- [X] Licensing Visit
- [ ] Drop In
- [ ] Administrative Change

License Type:

- [X] Full
- [ ] Provisional

Quality initiative:

- [ ] Accrediation

Program Duration:

- [ ] Year-Round
- [X] School Year
- [ ] Summer Only

Health and Human Services

Iowa Department of Health And Human Services

CHILD CARE CENTER ANNUAL EVALUATION

Program Population Served:

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

LICENSE CAPACITY	Infants	2 Years	Preschool	School-Aged	Capacity
General		20	60		80
Summer					0

1. Basic Overview

An unannounced annual visit was made to the Hoover Early Learning Center on 10-09-25 where I met with the on-site supervisor, Keisha Boboltz. Keisha is well qualified for the position based on her education, experience, and on-going training. This program purchased and moved to a new building for the start of the 2025 school year. This allowed the center to consolidate programming with both Head Start (HS) and Early Head Start (EHS) programming being offered at the location. The center is exploring options to continue to expand services and programming for younger children. The HS programing is offered to children 4 years of age M-F from 8:15 to 3:00 pm with an early out at 1:00 on Wednesday. The EHS programming is offered M-F from 8:15 to 2:45 pm. There are currently 51 HS children, and 8 EHS children enrolled in the program served by 8 teachers with additional support from on-site cooks and other staff. All aspects of the program subject to licensing standards were reviewed during the visit.

The building was previously used as a parochial school that was renovated and expanded for use as a daycare. A few minor renovations were completed when the building was purchased by the Head Start program primarily to address maintenance issues, and to open access to restrooms. The building has several classrooms, a full kitchen, and a large gymnasium space. The program is currently only making use of 4 classrooms with 3 for the HS programming, and 1 for the EHS programming. There is an additional classroom which is available for expansion of the EHS programming and approval is being sought from the Head Start National Office to allow the center to include younger children under 2 years of age. Another classroom space is currently being used for staff breaks and curriculum development but which could be used for child programming as well. Those two room have the potential to increase the available capacity by 36 children. The gymnasium is currently using mobile shelving for dividers to define a cafeteria space from the indoor large motor space but again if the center needed to increase programming space would allow for a potential of an additional 91 children.

Each classroom was observed to be clean with no issues related to maintenance noted. Each classroom has secondary exits with all but the EHS classroom providing direct egress to the outdoors. The EHS classroom has two secondary exits that connect to adjacent classroom spaces that have direct exterior exits. All exits were clear of obstruction and opened easily and freely though one door was noted to be sagging on the hinges and will need to be monitored. Restrooms are located outside of the classrooms off main access corridors. The EHS, and the other potential EHS classroom have changing stations and sinks in the classroom to facilitate diapering and handwashing. Water temperatures were measured to be below the 120 deg. F. maximum allowance. Each classroom has windows along the exterior walls that provide natural light, a view of the outdoors, and ventilation. There is a basement level accessible from one of the classrooms but interior spaces such as restrooms and hallways are utilized for emergency storm shelters. Classrooms are divided into activity centers through the placement of furnishings and play structures which were arranged so as to not create any blind areas. The toys and materials present in each activity center were in good repair and appropriate to the ages of the children present. The building does have a secure entry door, and video monitoring system.

CHILD CARE CENTER ANNUAL EVALUATION

2. Identify Observed Strengths of the program

Good interactions were observed with all of the teachers being actively engaged with the children presenting the planned curriculum. Each classroom develops their own curriculum which includes a general learning focus and specific number and letter concepts. The materials in the classrooms did reflect the planned curriculum such as one room which had a general focus theme of "Pets" where there were books about pets, stuffed animals in dramatic play, and focus questions about the children's pets. During the visit the teachers did follow the planned schedule with moving from teacher lead presentations in large group settings, and small group activities, to child directed center play and outdoor play. The teachers were observed to be engaged with the children joining them in their play and asking questions or making suggestions to help the children apply and explore different skills such as counting or identifying patterns. The teachers also followed strong supervision practices with escorting children to the restrooms or coat cubbies located in the hallway, and positioning themselves in different areas of the classroom. This practice was carried to the outdoor playground where again the teachers positioned themselves throughout the outdoor space which allowed the children more flexibility in choosing which activities they wanted to engage in as teachers were able to supervise all of the children in different "zones" rather than each teacher attempting to keep their class limited to a smaller area. The center uses positive intervention techniques to manage behavior such as routines, praise, redirection, and guided problem solving. When speaking with the children each of the teachers used calm engaging tones of voice and positive word choices. Some teachers do shift to a more authoritative and directive tone when addressing behavioral issues but none rose to the level that would be considered intimidating or threatening. Ratio was maintained in the center as required with at least two teachers present in each classroom.

Good health and safety policies and procedures were observed. As noted restrooms are located outside the classroom and as a result children are escorted to the restroom which allowed for staff to ensure that children not only washed their hands but did so in an effective manner. One child was observed to need assistance with a standing diaper change and the teacher did follow the posted procedures for that practice. Other personal hygiene practices were observed such as children brushing their teeth after meals. Good cleaning practices were observed with the teachers sanitizing tables both before and after meal service, and at other times when needed. This was done after the children had left the immediate area before use of chemical cleaners. Chemical cleaners, medications, personal belongings, and other items that could present a safety concern were stored in areas inaccessible to the children. First aid kits are maintained in the classrooms and were stocked with materials necessary to address most common first aid needs. The center had posted information regarding care needs for children with identified health concerns. Each child had cots available for napping that had appropriate bedding which could be removed and laundered if needed.

The center has a full kitchen and meals are prepared on site. The center does participate in the Child and Adult Care Food Program and a copy of the planned menu is posted. Menus are planned in advance and do identify a good variety of nutritious food options. The kitchen was observed to be clean with no evidence of insect or rodent infestation. Food items were properly stored for both dry pantry and refrigerated items. I was able to observe the lunch service during the visit. The meal served on the day of the visit included ham and cheese sandwich, mandarin oranges, corn, milk. A mixture of serving styles were observed with some classes using family style service with the children serving themselves and the teachers providing assistance as needed. Other classes used a pre-portioned approach with the teachers serving the children. One issue that was noted with the pre-portion option was the teachers asked the children if they wanted different elements of the meal and if the child declined it was not served. When engaging in the pre-portioned service method each child should be provided with a full serving which they are then free to eat or not as they choose. Measured scoops and child sized serving items are used to ensure each child is able to manage the utensils and receive a full portion when engaging the family style service approach. The teachers did sit at the tables and eat with the children to provide supervision and model good eating habits.

The center has a large outdoor playground, and indoor gymnasium space. The outdoor playground has two large climbing structures, swings, and equipment such as dramatic play centers, balls, and other items. Some items that were previously in place in an area that used pea gravel for fall surfacing had been removed, as had some old tires that had been partially buried as a climbing and crawling center. Wood mulch is used for fall surfacing beneath the climbing structures and swings and a good depth of material was present. The playground is fully enclosed by fencing and the center is in the process of repairing the fencing with some areas having been addressed and others still needing repair. Shade is available from mature trees located along the edges of the playground, the building, and the equipment. The gymnasium space has a traditional design with a large open wooden basketball flooring and several basketball hoops. Shelves have been placed in a line to divide the gym into a 25/75 space with the smaller side used as a cafeteria space for meal service, and the larger space for play. There is a variety of play items stored on the shelves for the children to play with.

CHILD CARE CENTER ANNUAL EVALUATION

In reviewing administrative records all required notices for No Smoking, Consultant Contact, License Certificate, and Mandatory Abuse Reporting were posted in an area that was readily visible and accessible to parents and visitors. Other required postings for emergency evacuation, emergency numbers, handwashing, diapering, curriculum, daily schedule, and planned menu were also posted. The center has moved to fully electronic file maintenance for child files but does print contact sheets for each child with parental and emergency contact information, authorized pick-up, and activity authorizations. Current physicals had been obtained for all children, and response plans for health concerns and food allergies were present. Staff files are maintained at the central administrative offices for the program and are reviewed separately for all site locations overseen by NICAO and any concerns that are identified are addressed at that time. All inspection logs and certificates are also maintained on-line and at the central office and again are reviewed during the visit to that location and addressed as needed. The center does seek to implement best practice and is also accredited by NAEYC, and has participated in the IQ4K program in the past. With the move to the new facilities the center is once again looking participate in that program.

3. Identify the aspects that fall below the standard

None Cited

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

NA

5. Special Notes/Recommendations

A full license will remain in effect at this time. Please notify the licensing consultant identifying a plan to correct and maintain those issues cited as not meeting licensing standards and an anticipated dated of completion. At least one visit will be made to the center during the next year.

Date: 10/27/2025

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**.