11/07/2024

Helen Sando
3501 Brook View DR
Des Moines, IA 50317

Dear Child Care Provider:

This letter is in regards to the compliance visit at your Registered Child Development Home B conducted on 11/07/2024. 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)"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)"c" Medications shall be given only with the parent's or doctor's written authorization. Each prescribed medication shall be accompanied by a physician's or pharmacist's direction. Both nonprescription and prescription medications shall be in the original container with directions intact and labeled with the child's name. All medications shall be stored properly and, when refrigeration is required, shall be stored in a separate, covered container so as to prevent contamination of food or other medications. All medications shall be stored so they are inaccessible to children. Any medication administered to a child shall be recorded, and the record shall indicate the name of the medication, the date and time of administration, and the amount given

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 110.8(5) **Safe Sleep**

441 IAC 110.8(5) "a" The provider shall follow safe sleep practices as recommended by the American Academy of Pediatrics for infants under the age of one.

a. Infants shall always be placed on their back for sleep.
b. Infants shall be placed on a firm mattress with a tight fitted sheet that meets Consumer Product Safety Commission federal standards.
c. Infants shall not be allowed to sleep on a bed, sofa, air mattress or other soft surface. No child shall be allowed to sleep in an infant seat, car seat, swing, bouncy seat, or items not designed for sleeping.
d. No toys, soft objects, stuffed animals, pillows, bumper pads, blankets, or loose bedding shall be allowed in the sleeping area with the infant.
e. No co-sleeping shall be allowed.
f. Sleeping infants shall be actively observed by sight and sound.
g. If an alternate sleeping position is needed, a signed physician authorization with statement of medical reason is required.

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:

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)“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)“c” Medications shall be given only with the parent’s or doctor’s written authorization. Each prescribed medication shall be accompanied by a physician’s or pharmacist’s direction. Both nonprescription and prescription medications shall be in the original container with directions intact and labeled with the child’s name. All medications shall be stored properly and, when refrigeration is required, shall be stored in a separate, covered container so as to prevent contamination of food or other medications. All medications shall be stored so they are inaccessible to children. Any medication administered to a child shall be recorded, and the record shall indicate the name of the medication, the date and time of administration, and the amount given
441 IAC 110.8(5) "a" The provider shall follow safe sleep practices as recommended by the American Academy of Pediatrics for infants under the age of one.
Infants shall always be placed on their back for sleep.
Infants shall be placed on a firm mattress with a tight fitted sheet that meets Consumer Product Safety Commission federal standards.
Infants shall not be allowed to sleep on a bed, sofa, air mattress or other soft surface. No child shall be allowed to sleep in an infant seat, car seat, swing, bouncy seat, or items not designed for sleeping.
No toys, soft objects, stuffed animals, pillows, bumper pads, blankets, or loose bedding shall be allowed in the sleeping area with the infant.
No co-sleeping shall be allowed.
Sleeping infants shall be actively observed by sight and sound.
If an alternate sleeping position is needed, a signed physician authorization with statement of medical reason is required.
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:
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.
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.

Suggestions/Recommendations:

Child & Resource & Referral

Katie: 515-246-3551 Ext. 2333 Work Cell 515-631-2913

Please do not hesitate to access the free and voluntary consulting services offered by CCR&R to assist with any compliance related needs or questions.

Effective immediately all safe sleep regulations will be complied with and only the main floor of your house will be used, since the basement and 2nd floor, do not have an additional exit. All other corrections must be completed by 2/5/2025.

Corrective Action Required:

Per my compliance visit on 11/7/2024 the following issues must be addressed based on the above mentioned rules:
1. 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.
2. A smoke detector was beeping in the basement. Please change the battery ASAP.
3. You stated you give a daycare child medication but don't log when you give it to the child. Please log these for inspection purposes.
4. When I arrived a 9 month old child was sleeping in a pack and play on the 2nd floor. The child was observed to have a blanket in his crib. We reviewed the child cannot be sleeping on the 2nd story or basement of the house, due to there not being an additional exit. I directed you to bring the pack and play down to the main floor, which you stated you would. We reviewed the child cannot have a blanket in his crib. You stated you were worried he was cold. You removed the blanket and we discussed the child wearing a sleep sack, if you are concerned about him being cold. You signed my check list by the safe sleep section, stating you understood and would comply with all safe sleep regulations. A referral to Child Care Resource & Referral will also be made.
5. All household members over the age of 18 need physicals completed on the state required from. These need completed every 3 years.
6. You stated your mother has recently moved into your house, due to her being sick. Please contact the registration unit to add her to as a household members.
7. Please review all daycare children files to ensure they have the required documentations- emergency contact information, pick up and drop off information, emergency medical consent, current physical and immunization records. Physicals need updated yearly.
8. Fire and tornado drills need practiced monthly. Record of these drills need kept for inspection purposes.

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 515-339-8262 ellen.abbott@hhs.iowa.gov if you have any questions regarding this letter.

Sincerely,

Ellen Abbott

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).