06/18/2025

Julie Husmann
16381 190th ST
Monticello, IA 52310

Dear Child Care Provider:

This letter is in regards to the follow up at your Registered Child Development Home B conducted on 06/17/2025. 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:

Findings:

An annual compliance check was completed on 6/17/25 and the following was out of compliance:

441 IAC 110.6 Limit. Except as provided in subrule 110.6(3), no greater number of children shall be received for care at any one time than the number authorized on the registration certificate.
441 IAC 110.15 SPECIFIC REQUIREMENTS FOR CHILD DEVELOPMENT HOME CATEGORY "C"
441 IAC 110.15(1)“e” No more than 16 children shall be present at any one time when an emergency school closing is in effect.
e. If only one approved provider is present, not more than 8 children are present. If more than 8 children are present at any one time due to an emergency school closing exception, the provider shall be assisted by a department-approved assistant who is at least 18 years of age.
If only one approved provider is present, no more than 6 of 8 children may be 24 months of age or younger and of these 6 children, no more than 3 are 12 months of age or younger.

At the time of the annual check on 6/17/25, Julie had 10 children present. Her co-provider was not present. As a C2 provider, if only 1 approved provider is present, no more than 8 children can be present at one time. Julie did have an approved assistant who is 15 years of age but that only allows that individual to assist the 2 approved providers but does not allow them to take additional children. Julie did report that her co-provider is not working with her at all this summer and she has been utilizing the assistant with the assumption this allowed her to have up to 16 children. That is not the case.

Julie was over on the number of children she is allowed to have at one time. Two of the children did leave while this worker was present. Some of the children are not full time and come on different dates. We did discuss the need for Julie to be in compliance with not more than 8 children at any time if her co-provider is not present. We discussed that the C2 category allows for more children due to the qualifications of both providers and thus an assistant does not replace one of the providers. A substitute may however replace one of the providers but not an assistant.

Safety planning was done on this date in regard to the number of children allowed for one approved provider and Julie agreed to stay within those numbers allowed at all times. Safety planning was also done in regards to only allowing approved providers/ or substitutes to care for the children.

441 IAC 110.7(1) The provider shall meets the following requirements:

Be present at all times except when emergencies occur or an absence is planned, at which time care shall be provided by a department-approved substitute. When an absence is planned, the provider shall give parents at least 24 hours' prior notice.
Shall be free of the use of illegal drugs and shall not be under the influence of alcohl or any of the prescription or non-prescription drug that could impair their ability to give careful supervision.
441 IAC 110.7(2) Substitutes. The provider shall assume responsibility for providing adequate and appropriate supervision at all times when children are in attendance. Any designated substitute shall have the same responsibility for providing adequate and appropriate supervision. Ultimate responsibility for supervision shall be with the provider
All standards regarding supervision and care of children apply to substitutes.
Except in emergency situations, the provider must inform parents in advance of the planned use of a substitute.
The substitute must be 18 years of age or older.
Use of a substitute is limited to: No more than 25 hours per month. An additional period of up to two weeks in a 12-month period. (These limitations do not apply per Iowa Code Section 237A.3A(3)(e) when the provider is engaged in jury duty or official duties related to provider's membership on state board, committee or policy-related body.)
The provider maintains a written record of the number of hours substitute care is provided, including the date and the name of the substitute.

441 IAC 110.9(3) An individual file is maintained for each substitute and contains:
Documentation from the department confirming the record checks required under 441 IAC 110.9(1) "a" have been completed and authorizing or conditionally limiting the person's involvement with child care.
A completed Form 470-5152, Child Care Provider Physical Examination Report. The examination shall include any necessary testing for communicable diseases; a discussion of recommended vaccinations; completed no more than six months prior to approval to assist or be a household member; completed by a licensed medical doctor, doctor of osteopathy, physician assistant or advanced registered nurse practitioner; and repeated at least every three years.
Certification of two hours of approved training related to identification and reporting of child abuse as required by Iowa Code section 232.69 within 3 months of employment.
Certification in infant and child first aid
Certification or other documentation that minimum health and safety training has been completed within 3 months or prior to providing substitute care, whichever occurs first.

The above 3 code sections refer to the use of a substitute. Julie did share that a few times per year instead of closing early, she will have a friend come watch the childcare children for a few hours only. We discussed that this individual is not an approved substitute and those instances do not constitute an emergency. Julie agreed to take steps to get her friend approved as a substitute and this individual is not allowed to provide any care to the children until such time she can be approved as a substitute. If Julie does not have an approved substitute, the co-provider needs to be present or Julie needs to notify parents at least 24 hours in advance that she will be closed a few hours. Steps that need to be taken to get someone approved as a substitute were discussed. Julie also stated that she might consider dropping to a category B.

441 IAC 110.8(1)"a" The number for each child's parent, a responsible person who can be reached when the parent cannot, and the child's physician shall be written on paper and readily accessible by the telephone.

Julie had a written list but it did not include contact for an emergency contact if the parent cannot be reached. She needs to update that written list.

441 IAC 110.8(1)"e" Annual laboratory analysis of a private water supply shall be conducted to show satisfactory bacteriological quality. When children under the age of two are to be cared for, the analysis shall include a nitrate analysis. When private water supplies are determined unsuitable for drinking, commercially bottled water or water treated through a process approved by the health department or designee shall be provided.

Julie did not have an annual lab analysis. The last one completed was in October of 2023 and has expired.

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

Julie did not have any documentation for 2025 of monthly testing of smoke detectors.

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.

Julie did not have any documentation for 2025 of monthly practice of fire and tornado drills.

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”

Co-provider Andrea did not have a provider health exam.

441 IAC 110.9(1)“b” (1) I-PoWeR records or certificates verifying required training completion:
Prior to registration:
minimum health and safety training, approved by the Department, in required content areas
Iowa’s Mandatory Child Abuse Reporter Training
Prior to registration: First Aid and Cardiopulmonary resuscitation. Provider shall maintain a valid certificate indicating date of training and expiration date.

Julie and co-provider Andrea's First aid and CPR was expired.

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.

Julie did not have this documentation.

441 IAC 110.9(2) An individual file is maintained for each staff assistant and contains:
A completed Form 470-5152, Child Care Provider Physical Examination Report. The examination shall include any necessary testing for communicable diseases; a discussion of recommended vaccinations; completed no more than six months prior to approval to assist or be a household member; completed by a licensed medical doctor, doctor of osteopathy, physician assistant or advanced registered nurse practitioner; and repeated at least every three years.

Jessica (assistant) did not have a physical exam report.

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.

Julie was missing initial physicals for 4 children.

Julie was missing the annual statement of health for her school aged children (missing 5)

Julie did not have the written permission for the child to attend activities away from the child development home but she reported they do not leave the premises.

As a side note, in regards to several regulations, Julie stated that she did not know of those expectations and that no one ever told her. This worker did ask if she had a copy of the annual checklist with compliance expectations and offered to provide her one, but she did report she already had one. This worker recommended she review it in order to be fully aware of all of the requirements of a registered provider. She was provided contact information for Childcare Resource and Referral support and for this worker if she has any questions.

Suggestions/Recommendations:

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

Alicia can be reached at 319-538-8464

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

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.

Although a re-check is not needed, a follow up visit will be completed by HHS due to the safety plan that was developed on this date. Julie still needs to send pictorial verification of compliance items requested despite the follow up that will occur.

Julie needs to abide by the policies in regards to the number of children she is allowed to have at any given time (8). Julie now understands that an assistant as a C2 provider does not allow her to have more children.

Julie agreed to take steps to get her friend approved as a substitute and will not utilize any individuals for substitute care until approved by HHS.

Julie needs to take steps to update her written list with children, parental contact and Dr information and needs to add an emergency contact for each child. Please send pictorial verification when updated.

Julie needs to obtain an updated annual lab analysis for her water, and she needs to send pictorial verification when completed.

Julie needs to ensure that she is testing each smoke detector monthly and keeping a record of testing for inspection purposes.

Julie needs to ensure that 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.

Co-provider Andrea needs to have a provider health exam and this needs to be documented on the approved HHS form.

Both providers (Julie and Andrea) need to obtain a current certificate for First aid and CPR training and need to send pictorial verification to HHS.

Julie needs to locate her 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.

Assistant Jessica needs to obtain a provider health exam on the approved HHS form.

Julie needs to work with the parents to obtain all required documentation for the children's files (initial physicals for 4 children and annual statements of health for 5 children)

Addendums:

- Addendum2: Julie's annual compliance check was completed on 6/17/25. At that time there were numerous Regulations in which she was out of compliance. Julie needed to take steps to come into compliance and send pictorial verification of those items to HHS by 7/9/25.

  Additionally, a safety plan was developed on that date in regard to Julie having more children in care then what are allowed at one time and in regard to utilizing a substitute for care that had not been approved. Due to the establishment of the safety plan, this HHS worker planned to do a follow up, but Julie was still expected to send pictorial verification of non-compliance items by 7/9/25.

  On 7/10/25 Julie did send pictorial verification of several of the items requested. She still had several areas of compliance to address.

  On 7/22/25 this worker did an unannounced follow up in regard to the safety plan. At that time, Julie was in compliance with the number of children she is allowed at one time, and she had submitted the initial paperwork to the registration unit to get the substitute approved.

  On 7/25/25 Julie sent verification of the Water analysis. On 8/7/25 Julie sent verification of First Aid and CPR for herself, and a couple of assistants and substitutes. She still needed to send verification of Andrea's First aid and CPR. After some follow up Julie did notify this worker on 9/10/25 that she was no longer utilizing Andrea as a substitute and therefore did not need to submit her First Aid.

  As of 9/10/25 she has sent the verification of compliance that had been requested.

- Addendum1: Julie's annual compliance check was completed on 6/17/25. At that time there were numerous Regulations in which she was out of compliance. Julie needed to take steps to come into compliance and send pictorial verification of those items to HHS by 7/9/25.

  Additionally, a safety plan was developed on that date in regard to Julie having more children in care then what are allowed at one time and in regard to utilizing a substitute for care that had not been approved. Due to the establishment of the safety plan, this HHS worker planned to do a follow up, but Julie was still expected to send pictorial verification of non-compliance items by 7/9/25.

  On 7/10/25 Julie did send pictorial verification of several of the items requested. She still had several areas of compliance to address.

  On 7/22/25 this worker did an unannounced follow up in regard to the safety plan. At that time, Julie was in compliance with the number of children she is allowed at one time and she had submitted the initial paperwork to the registration unit to get the substitute approved.

  On 7/25/25 Julie sent verification of the Water analysis.
  On 8/7/25 Julie sent verification of First Aid and CPR for herself, co-provider, and assistant/substitute.

This Addendum is approved by supervisor on 10/10/2025 12:49:50 PM

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).