Iowa Department of Human Services
CHILD CARE CENTER EVALUATION AND RECOMMENDATION FOR LICENSE

Name of Center: Little Rebels Learning Center **Enrollment:** 105 **License ID No. (Reapplications)** 22288

Street: 120 Cedar ST **City:** Reinbeck Iowa **Zip** 50669 **County:** Grundy

Mailing Address: 120 Cedar ST, Reinbeck, IA, 50669

Director's Name: Robin Moore **Phone Number:** 319-788-6120

On-Site Supervisor(s): Chelsey Henricks **E-Mail:** littlerebelslc@gmail.com

Date(s) of Visit: 09-19-2023

Licensing Visit X **Unannounced Visit** X **Off Year Visit** **Administrative Change**

LICENSING VISITS

New Application **Re-Application** X **NA**

Signed Application (470-0722) Received **Yes** **No** X **NA** **Date Signed:**

FIRE INSPECTION X **State** **Local** **NA** **Is Fire Inspection Approved?** X **Yes** **No** **NA**

Date Inspected: 04-04-2023

Comments :

LICENSE TYPE: X **Child Care** **Preschool (ages 3-5 meets three hours or less per day)**

Financial Type: Profit X Non-Profit NA

Accredition: Accredited NAEYC NSACA Other X NA

Program Serves: X Infants (0-23 mo.) 2 Years X Preschool-Age X School-Age

Get-Well Evening Care Special Needs

SCHEDULE: X Year-round School-Year Summer Only

HOURS:	*Year-round*	*School-Year*	*Summer Only*

LICENSE CAPACITY	Infants	2 Years	Preschool	School-Age	Capacity
General	58	16	78	20	172
Summer					0

QRS Rating: N/A

RECOMMENDATION FOR LICENSE:	
X	**FULL** license from 12-01-2022 to 12-01-2024
	PROVISIONAL license from
	DENIAL of initial application
	SUSPENSION of license
	REVOCATION of license

Licensing Consultant: Raymond Salsbury **Date:** 09-26-2023

I. IF CURRENT LICENSE IS PROVISIONAL, IDENTIFY THE CORRECTIVE ACTIONS

NA

II. IDENTIFY THE AREAS OBSERVED ON THE VISIT:

An unannounced annual visit was made to the Little Rebels Learning Center on 09-19-23 where I met with center director Robin Moore. Robin took over the directorship of the program in 2016 and is well qualified for the position based on her experience, formal education, and on-going training. The program is located in a free standing building on the campus of the Reinbeck elementary school. While the program has a strong collaborative relationship with the school it is overseen by a separate board of directors. The program operates throughout the year providing services to children ages birth through school age. There are currently 105 children enrolled in the program served by 46 employees. All aspects of the program subject to licensing standards were reviewed.

The general layout and design of the building and classrooms remains the same as in prior years. The program operates out of several rooms determined by age group. All rooms were observed to be clean. While there were some minor maintenance issues none rose to the level of being a safety concern. Each room has windows along the exterior walls that provide natural light, a view of the outdoors, and ventilation. The 3 year old classroom is also fitted with storm shutters and a reinforced roof so that it serves as the tornado shelter for the center. One storm shutter continues to be damaged, non-functional, and left in the closed position. While this does not create a safety risk Robin did identify that the center is looking for options as the particular design is no longer in production. Each room has a secondary exit that provides direct access to the outdoors. All exits were clear of obstruction and opened freely. Each classroom has restrooms and sinks directly accessible from the classroom. Changing stations are present in those rooms where children may need assistance with diapering.

Each room is divided into activity centers through the use of furnishings and play structures. The rooms are arranged so that there are no blind areas. The available activity centers increase with each age group with all ages having large/small manipulatives, art/crafts, and books. Older classrooms begin adding more complex activity centers such as math/science, experience tables, dramatic play, table games, and group learning. The toys and materials present were observed to be in good repair and appropriate to the ages of the children present. A copy of the daily schedule and curriculum themes was posted for each room. Good interactions were observed in all classrooms with the staff being engaged with the children either implementing the planned curriculum or attending to the children's needs. This included staff who were reading stories to the children, doing craft activities, or soothing those who were laying down for nap time. Good behavior management techniques were observed in
all classrooms with the staff implementing positive intervention approaches such as redirection, recognition of positive behavior, and reminders of expected behavior.

Good health and safety practices are in place. I was able to observe several diaper changes in several classrooms and all staff followed the posted procedures. Good hand washing practices were observed with staff reminding and assisting children to ensure that they not only wash their hands but do so in an effective manner. Medications were properly stored in secured cabinets and the center has ensured that all over the counter medications were labeled with the name of the individual to whom it belonged. The center does need to review medication administration documentation procedures. First aid kits are maintained in each classroom with both a more fully stocked supply generally kept in a cabinet, and a backpack kept on a hook. Medications, chemical cleaners, first aid kits and items that could pose a safety risk to children were stored in locations that are not accessible to children. Cots were placed with sufficient spacing to prevent disease transmission

during nap time. The center uses infant oxygen monitors for sleeping infants. Good Safe Sleep practices were generally observed but it was observed that placards with the childrens names were suspended over cribs from the ceiling. It was reviewed that these should be removed and placed on the cribs, or walls by cribs to reduce the risk of suspended items falling into a crib. During the visit the staff did an excellent job of responding to a child that appeared to be having a health issue. The staff did note that the child did not have a temperature but did not appear to be responding as the child normally does. The child was brought to Robin who had the parents contacted to come to the center where she spoke with the child and noted that during the time the child had been with her the child's temperature had begun to rise. Robin did arrange for staff to accompany the parent and child to the doctor's office to provide support and information.

The center has a full kitchen and meals and snacks are prepared on-site. Additional refrigeration units are maintained in the classrooms to facilitate cold holding of milk and other items in classrooms. Food storage practices do need to be reviewed. A few bulk packaged items such cereals and crackers were observed to have the bag rolled closed in both classrooms and the kitchen. Additionally the center uses larger totes to store food items and while these do have lids and give an impression of proper storage they are not air tight. Options that would be considered to be air tight and acceptable alternatives were reviewed. Good food handling practices were observed with staff washing their hands and using food service gloves when handling or serving meals. Meals are typically served family style in the classrooms with the children serving themselves. Measured scoops and child sized utensils and dishes are used to ensure that the children receive a full serving. A menu is posted and identifies a good variety of nutritious meal options. The teachers do sit at the table and eat with the children to provide supervision and model good eating habits.

The program has several playground spaces which are fenced with a larger playground on the north side of the building, and smaller area on the south side used by the younger children. The larger playground has commercial climbing structures, music centers, paved area, and grassy area. A poured unitary foam surface is used for fall surfacing. All equipment and materials were observed to be in good repair. Shade is provided by the building, play structures, and trees. The smaller playground on the south side of the building made use of residential grade climbing structures but had so many that there were insufficient fall zones around each structure. Options such as moving non-climbing structures to grassy areas, removing damaged equipment, and reducing the number of structures were discussed.

In reviewing administrative records all required notices and postings were present and located in an area readily accessible and visible to parents and visitors. The center uses an electronic file maintenance system for both staff and child files which does have a self-audit system. When comparing the electronic records and self-audit to randomly selected hard copy files the information was found to be accurate. The self-audit identified 9 files that needed an updated physical. The center uses the same computer system to maintain infant daily sheets and while the system does have the ability to track all required information staff were not including information on Activities and Disposition for each child under 24 months daily as required. The documentation was inconsistent with information being present on some days, and not others. It was reviewed that the system also has the ability to take photographs and attach them to daily records and that this could be used as a visual depiction of the activities and disposition of children. With regard to staff files the self-audit was was again found to be accurate and identified that all files contained all required information. All inspection logs and certificates were available and current. All appliances are electric so the center does not conduct a fuel burning appliance inspection but does need to maintain a carbon monoxide detector as required which is in the utilities room. The center handbooks have been previously reviewed and found to contain all required information.

III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:

This continues to be a very strong program with a focus on developing and implementing an engaging curriculum to help children develop skills.

As noted the center had an excellent system for responding to identifying, monitoring, and responding to children regarding health concerns.

IV. IDENTIFY THE ASPECTS OF OPERATION THAT FALL BELOW THE STANDARDS REVIEWED:

109.10(1)a: Preschool (for children five years and younger not enrolled in school): Physical exam report submitted within 30 days of admission, was obtained no more than 12 months prior to admission, is signed by a licensed MD, DO, PA, Chiropractor or ARNP, and contains health history; present health status including allergies, medications, and acute/chronic conditions; and recommendations for continued care if necessary.
-- Number not in compliance: 9

109.11(3)a: Center shall ensure that: Facility and premises are sanitary, safe, and hazard free. Adequate indoor and outdoor space is provided. The outdoor area shall include safe play equipment and area of shade. Sufficient space provided for dining. Sufficient lighting shall be provided. Sufficient ventilation. Sufficient heating. sufficient cooling. Sufficient bathroom and diapering facilities. Equipment, including kitchen appliances, are maintained so as not to result in

burns, shock, or injury to children. Sanitation and safety procedures for the center are developed and implemented to reduce risk or injury or harm to children and reduce transmission of disease.
-- The playground on the south side of the building used for younger age groups had too many climbing and play structures placed in close proximity to each other and fencing such that there were insufficient fall zones. Fall zones must be maintained as identified in the CPSC Public Playground Safety Handbook, (https://www.cpsc.gov/s3fs-public/325.pdf)

V. SPECIAL NOTES/RECOMMENDATIONS:

A full license is recommended at this time. Please provide a written response to the licensing consultant identifying a plan of action to correct and maintain those aspects cited as not meeting licensing standards and identifying an anticipated date of compliance. At least one visit will be made to the center during the next year.

*Note: If you are the Child Care Center Director and you feel something is unclear or unjustly cited, please contact your DHS Licensing Consultant to discuss the issue. The child care director may also send a response which will be placed in the licensing file.

*Note: If you are a member of the general public, there may be additional information contained in the public file. You may contact the DHS Licensing Consultant to inquire.