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

Name of Center: Color My World Child Care & Preschool **Enrollment:** 145 **License ID No. (Reapplications)** 27928

Street: 2900 Easter Lake DR **City:** Des Moines Iowa **Zip** 50320 **County:** Polk

Mailing Address: 2900 Easter Lake DR, Des Moines, IA, 50320

Director's Name: Bobbie Gregory **Phone Number:** 515-256-7797

On-Site Supervisor(s): Amanda Crise **E-Mail:** amanda@colormyworlddsm.com director@colormyworlddsm.com admin@colormyworldddsm.com

Date(s) of Visit: 10-14-2024

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

LICENSING VISITS

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

Signed Application (470-0722) Received X **Yes** **No** **NA** **Date Signed:** 09-18-2024

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

Date Inspected: 08-01-2024

Comments :

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

Financial Type: X Profit Non-Profit NA

Accredition: Accredited NAEYC NSACA Other X NA

Program Serves: X Infants (0-23 mo.) X 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	24	12	53	60	149
Summer					0

QRS Rating: 3

RECOMMENDATION FOR LICENSE:	
X	**FULL** license from 11-01-2024 to 11-01-2026
	PROVISIONAL license from
	DENIAL of initial application
	SUSPENSION of license
	REVOCATION of license

Licensing Consultant: Melinda Larson, Child Care Licensing Consultant **Date:** 10-16-2024

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

II. IDENTIFY THE AREAS OBSERVED ON THE VISIT:

Color My World Child Care Center began operating in the fall of 1998. The program has provides daycare services to children ranging from infancy through school-age. This center is located within a single standing building. There is a secured entrance. Blake and Jane Boyer are the owners of the center. Bobbie Gregory is the director. Bobbie has been with this center since 2002. She has an Associates degree in Early Education. Amanda Crise is the on site supervisor. She has been employed at the daycare since 2011. Amanda Aberthany is the Operations Manager.

An unannounced visit was completed on today's date. All areas subject to HHS licensing rules were reviewed. Mandatory postings are in place at the center's entrance. Classroom schedules and lesson plans were posted by most classroom doors. Handwashing posters and diaper changing posters are in place. The center has ten classrooms. Classrooms are well supplied with age appropriate furnishings, toys and learning supplies. A lot of children's artwork is displayed in classrooms.

Bobbi, Amanda and Amanda were present today. They all assisted with today's visit. The infant classroom, Moonbeams, had seven infants present. Two staff were working today. The Sea Shells, the older infants, had seven infants present. There were infants . Sunshine Room (1's) had eight children present. There were two staff working in this classroom. The Seascape Room (1's) had three children and there was one staff. The Rainbows (2's) had twelve children present. Two staff were working in this class. The Wilderness Room (2/3's) was closed today. The Explorers (2/3's) had seventeen children. The Preschool classroom isn't currently open. The PreK class (4/5's) had twelve children. This classroom had two staff. The school age class wasn't in session at the time of today's visit.

The center has two playgrounds. Both playgrounds have grass turf for surfacing material. There is also concrete for riding toys. Fencing is in place. The center also uses the parking lot for taking walks for the young children. The center completes monthly playground checks.

The center has a full kitchen. The center has a full time cook. Breakfast, morning snack, lunch and afternoon snack is served. The center participates in CACFP. Menus are on a four week rotation.

The center owns two vans that used for field trips and for Des Moines school transportation.

III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:

Bobbi has been employed at the center since 2002. Administrative records are well maintained. This center is involved in the Women's Empowerment Program, through the United Way. The center benefits a great deal from this participating in the program, from a financial standpoint as well as support for staff. Staff from United Way and VNS visit the center to offer support and guidance. The center participates in IQ4K.

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

There were no licensing violations cited during this visit.

V. SPECIAL NOTES/RECOMMENDATIONS:

The center has a full license.

*Note: If you are the Child Care Center Director and you feel something is unclear or unjustly cited, please contact me (phone (515)362-7823: email melinda.larson@hhs.iowa.gov so that we can discuss the issue. If necessary, I can make a notation in your record. You may also send a letter that will be included in your licensing file noting any disagreement you may have with this report. If you have the need for any additional information discussed during my visit, please contact me and I will forward the information to you. Thank you.

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

*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.