IOWA HHS
Iowa Department of Health And Human Services

Kim Reynolds
Governor

Adam Gregg
Lt. Governor

Kelly K. Garcia
Director

02/27/2023

Kelsie Ball
104 N Church ST
Morning Sun, IA 52640

Dear Child Care Provider:

This letter is in regards to the pre-inspection visit at your residence in which you are seeking child development home registration conducted on 02/27/2023. 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 110.7 **Provider Requirements**

441 IAC 110.8 Standards. Conditions in the home are safe, sanitary, and free of hazards.

441 IAC 110.8(4) **Emergency Plans**

441 IAC 110.8(4) “b” The provider must have procedures in place for the following:

1. evacuation to safely leave the facility
2. relocation to a common, safe location after the evacuation
3. shelter-in-place to take immediate shelter where you are when it is unsafe to leave that location due to the emergent issue
4. lock down protocol to protect children and providers from an external situation
5. communication plan and plans for reunification with families
6. continuity of operations plans
7. Procedures to address the needs of individual children, including those with functional or access needs

Findings:

Kelsie will make the following addition to her Emergency Preparedness Plan:
Lockdown Section: "Will not allow any person(s) to come in or out of my childcare facility until the all clear is given by the provider or law enforcement."

1305 E. Walnut Street, Des Moines, IA 50319-0114

Suggestions/Recommendations:

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. Need for M.B.(7), M.B.(3), W.N.

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. Need for M.B.(7), M.B.(3)

A signed medical consent from the parent authorizing emergency treatment. Need for M.B.(7), M.B.(3)

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. Need physical for L.K., B.K., M.B.(3), W.N., K.R.

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. Need for L.K., B.K., M.B.(3), W.N., K.R., B.S.

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. Need for M.B.(7), M.B.(3), W.N.

Written permission from the parent for the child to attend activities away from the child development home. Need for M.B.(7), M.B.(3).

Corrective Action Required:

Based on the items out of compliance listed above, you will not be required to have a recheck or follow up visit to your home. Please have all items of non-compliance noted above completed within 15 days of receipt of this letter and submit to the department for review.

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) 768-8653/creckli@dhs.state.ia.us if you have any questions regarding this letter.

Sincerely,

Chad Reckling

Social Worker II

Machelle Pezley

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 563-324-3236

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).