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

**Name of Center:** McKee Extended Day Program **Enrollment:** 26 **License ID No. (Reapplications)** 28293

**Street:** 2116 E 39th CT **City:** Des Moines Iowa **Zip** 50317 **County:** Polk

**Mailing Address:** 2100 Fleur DR, Des Moines, IA, 50321

**Director's Name:** Zoe Hauptmann **Phone Number:** 515-242-8548

**On-Site Supervisor(s):** Madi Kennedy **E-Mail:** Kristin.Rourk@dmschools.org

**Date(s) of Visit:** 09-19-2024

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:** 08-07-2024

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

**Date Inspected:** 09-25-2024

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

Get-Well Evening Care Special Needs

**SCHEDULE:** Year-round X School-Year Summer Only

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

| LICENSE CAPACITY | Infants | 2 Years | Preschool | School-Age | Capacity |
|---|---|---|---|---|---|
| General | | | 20 | | 20 |
| Summer | | | | | 0 |

**QRS Rating:** N/A

| RECOMMENDATION FOR LICENSE: | |
|---|---|
| X | **FULL** license from 10-01-2024 to 10-01-2026 |
| | **PROVISIONAL** license from |
| | **DENIAL** of initial application |
| | **SUSPENSION** of license |
| | **REVOCATION** of license |

**Licensing Consultant:** Melinda Larson, Child Care Licensing Consultant **Date:** 09-20-2024

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

**II. IDENTIFY THE AREAS OBSERVED ON THE VISIT:**

This program (EDP) is located in the McKee Learning Center. Children attend preschool and are able to attend a wraparound/child care program for the other part of the day. In 2014, the extended day program became licensed by DHS. Kristin Rourk is the Director of Early Childhood Education. Zoe Hauptmann is the principal. The staff in the extended day program have at least a two year degree, a CDA or are a para-educator. The school has secured entrances.

An unannounced visit was completed on today's date. All areas subject to HHS licensing were reviewed. Mandatory posted are in place at the classroom entrance. The lesson plan and the class schedule are posted. The classroom is well supplied with age appropriate furnishings, toys and learning materials.

Madi Kennedy, the lead teacher, and an associate, were working today. The afternoon class was observed today. There were sixteen children present. Children were observed on the playground and in the classroom.

Children attending the morning session are provided breakfast and lunch. Children attending the afternoon session are provided lunch and afternoon snack. The school cafeteria provides all meals and snacks. Des Moines Schools follow CACFP guidelines.

The school's playground is age appropriate for the preschool. The school serves all preschool age children. The school staff maintain the playground. The center staff complete monthly playground checks.

Des Moines Schools use their own buses for school transportation.

**III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:**

The classroom is well supplied with age appropriate learning supplies and toys. Children are able to attend all day programming. Lead teachers have a CDA or AA degree.

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

109.9(1)a: All files contain statement signed by staff indicating whether they have a criminal conviction or founded child/dependent adult abuse.
Staff didn't have this state form in their files.

109.9(2)b: All files contain sufficient information and authorization to allow the center to secure emergency medical and dental services at any time child is in center's care.
The center didn't ensure children had this required information on file.
The center is working on getting this information from parents/guardians.

**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 mlarson@dhs.state.ia.us) so that we may 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 DHS Licensing Consultant to inquire.

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