Health and Human Services

Iowa Department of Health And Human Services

CHILD CARE CENTER ANNUAL EVALUATION

Name of Center: Eddyville Child Care Center

Provider No.: 53058

Address: 406 N Merino Ave, Eddyville, IA, 52553

County: Wapello

Director's Name: Paige Ver Steegh

On-Site Supervisor: Jenna Rodwell

Phone Number: 6419694343

E-Mail: paige.versteegh@rocketsk12.org

HHS Visit Date: 04/03/2026

Licensing Period: 01/01/2026 to 01/01/2028

Fire Inspection:

Date Inspected: 04/10/2024

Comments: the former program was inspected by State Fire Inspector Seth Jones, who stated the inspection was still good for three years under the new program name

Report Visit Type:

- [ ] PTO
- [X] Licensing Visit
- [ ] Drop In
- [ ] Administrative Change

License Type:

- [X] Full
- [ ] Provisional

Quality initiative:

- [ ] Accrediation

Program Duration:

- [X] Year-Round
- [ ] School Year
- [ ] Summer Only

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HOURS:	*Year-round*	*School-Year*	*Summer Only*
Sunday			
Monday	8:00 AM to 5:00 PM		
Tuesday	8:00 AM to 5:00 PM		
Wednesday	8:00 AM to 5:00 PM		
Thursday	8:00 AM to 5:00 PM		
Friday	8:00 AM to 5:00 PM		
Saturday			

Program Population Served:

- [X] Infant(0-<24 Months)
- [X] Toddler
- [X] PreSchool
- [X] School Age
- [ ] All Ages

LICENSE CAPACITY	Infants	2 Years	Preschool	School-Aged	Capacity
General	8	11	22	26	67
Summer					0

1. Basic Overview

Eddyville Child Care Center is located in a newer masonry structure attached to Eddyville Elementary School in Eddyville. The program is owned and operated by a non profit corporation governed by a Board of Directors and offers full day childcare for infants, toddlers, and preschoolers. The center also offers before and after school care and summer care for school age children. On 1/5/2026 HHS determined that the program met criteria and were given permission to open without a license on that date. On 4/3/26 I made an unannounced licensing visit to the center. All program areas were observed at that time.

HHS, CCR&R and IDPH have had multiple phone calls and emails with the Director the past six months. The center was formerly operated by the school district since January 2001. However, the new center began through organized community efforts and has served the community since January 2026. Services offered: childcare for children ages 6 weeks through 12 years. Paige VerSteegh is the Director for this program. She was formerly the OSS for the last program in this building. She meets the points to be qualified as Director and is primarily in charge of all areas of the center. Ms.VerSteegh has been employed at the center since 2012. She is in the center daily and also works in ratio when necessary. 7a - 5:30 pmShe is typically present from early morning to mid-afternoon. Ms. Jenna Rodwell is the on site supervisor from 5:45- 1:45 each day. Ms. Rodwell has been employed at the center for several years. I observed staff providing care to the children and also met with the Director.

Center Observations:

Five classrooms are divided by age and are equipped with new and well-maintained furniture, toys, and other supplies. Each classroom has at least one restroom and hand washing sinks both in the restroom and classroom itself. Activity

programs in the child care classrooms, with the exception of the preschool age classroom, are developed separately by each classroom teacher. I observed the infant, toddler, and preschool age programs, school age child care area, food service areas, and the outdoor play area. All rooms were in ratio
during the visit.

The infant area has an adequate number of age-appropriate toys. Cribs meet safety compliance standards from 2012. The room contains a bottle preparation sink and a hand washing sink. A crock pot is out of the reach of the infants on a tall countertop used for bottle warming. Daily infant sheets are recorded and sent home with parents per my observation. The diaper changing table is positioned so that staff can change diapers and still supervise other children in the room. On the visit cribs were spaced three feet apart. The center utilizes Oxivir TB for disinfecting, which is best practice. They also utilize soapy water kept in spray bottles in each room.

Some children were sleeping at the time of the visit and Safe Sleep practices were being followed. Lower drawers and cabinets were checked. They were either locked or did not contain items dangerous to infants.

The two year old room is spacious and contained age appropriate toys. Any items kept in lower cabinets in this room are locked if potential safety hazards exist. The room arrangement was constructive to adequate supervision of the children and appeared to be working well for both staff and children.

The center is utilizing Experience Curriculum. Interest centers available to children in this classroom include: blocks, children's literature, computer area, toys and games, dramatic play, art, music and movement, puzzles and small manipulatives, science and discovery center, sensory table, and writing table.

The center contains a school age room which contains several age appropriate activities and games. The room contains tables so children are able to work on school projects and homework assignments. No blind spots were observed in the program. During the time of the visit school age children were in school.

Center Nutrition:

Breakfast and lunch are prepared in the school kitchen. The meals are then taken to the center kitchen. Childcare plates and serves the food each day. Snacks are prepared in the center kitchen. The kitchen was clean and well-kept the day of the visit.

The facility is aware of CACFP guidelines and standards. I observed dry food storage in cabinetry. No food was stored on the floor. All opened food had been resealed. No expired food items were observed. All food items were dated by staff. The Director is contemplating participating in CACFP in the future.

Food is purchased weekly at a local grocer. I observed cold and frozen food storage. Thermometers were present in each unit and temperatures met guidelines of proper food storage temperatures.

Monthly menus are posted in each room and on the bulletin board in the hallway. Copies of monthly menus are sent home with the children. Children are allowed to bring lunches.
Snack menus are in the kitchen. The center is aware they will have to substitute food in lunches that do not meet CACFP requirements. The center follows minimum CACFP menu
patterns for meals and snacks. Menus planned one week in advance, made available to parents, and kept on file with substitutions noted. Avoid foods with high incident rate of causing choking.

Menu patterns appear to meet minimum nutritional standards.

Center Health and Safety:

We reviewed regulations regarding medication. We reviewed administration of prescription and non-prescription medication in accordance with licensing regulations, physician directions, and parental consent. The center was given a locked medication box from IDPH. The box is kept in the center office. The other two boxes are kept in the rooms where medication is needed. Medication should not be administered without written authorization that is signed and dated from the doctor for prescription medication and nonprescription medication. All medication must be in the original container, labeled by the pharmacy or the manufacturer with the name of the child, name of medication, the time of day in which it is to be given, the dosage and the duration. The only children currently enrolled in the center have seasonal allergies only.

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We reviewed regulations regarding maintenance and storage of First Aid Kits throughout the center. Labeled kits were observed in each room inaccessible to the children. The kits are mobile and are taken outside when necessary. The center has the latest item checklist from 2025 with most items on the list present.

We reviewed environmental testing and the necessary detection of such. The center is on Eddyville City Water, therefore water analysis is not required. Carbon monoxide detectors are located in each room. All are UL approved and non-battery operated. The Director is aware of expiration dates. The center is geothermal and electric, but has a gas oven so a fuel burning appliances inspections is required. Radon testing should be conducted every 5 years. It is currently up to date. Each room has forced heat through ceiling vents and contains its own thermostat. Windows are not opened in the rooms, but should be to assist in ventilation. The rooms each have a cooling unit, which need to be cleaned regularly. CCNC Matzen made a visit to the center regarding these units and humidity in each room in years past. Humidity in the rooms was not an issue this year.

Floor plans were submitted so accurate capacity could be issued. We discussed that rooms containing cribs mandate that children should have at least 40 square feet per child. Rooms without cribs must have at least 35 square feet each. The gross motor room should provide at least 75 square feet of space for each child during gross motor activities. Each cot or mat should have a sheet that is washed weekly. We discussed this.

The building was constructed in 2001 so a lead based paint assessment is not required.

We discussed safety regulations and procedures. Volunteers from the high school are utilized. Volunteers should always be under the direct observation of staff. All volunteers and substitutes shall sign a statement indicating whether or not they have one of the following:
a. (1) Conviction of any law in any state or any record of founded child abuse or dependent adult abuse in any state.
(2) A communicable disease or other health concern that could pose a threat to the health, safety, or well-being of the children.
b. (1) Complete form 595-136 DHS Criminal History Record Check, Form B
(2) Complete Form 470-0643, Request for Child Abuse Information.
(3) Sign a statement indicating the volunteer or substitute has been informed of the volunteer’s or substitute's responsibilities as a mandatory reporter. All staff in ratio--if less than eighteen, under direct supervision of an adult. Any visitors to the Center shall complete the tasks above.

All rooms were in ratio the day of the visit.

Blinds in each room do not contain cords. Cots and cribs were spaced adequately in each room. Any shelving units or storage cabinets should be mounted to the wall if unstable.

Fire and tornado drills are current and have been conducted and documented monthly.

Outdoor Play Area:

The center has an outdoor play area specifically for ages 2-4. Another area is for preschool age play and another connected for school aged children. The area is fenced but does lack shade. The area is equipped with anchored, metal/plastic climbing and activity toys and has an area for riding toys. Fall zones are cushioned by pea gravel of adequate depth. It contains one cement area that is occasionally used for tricycle riding. The center does have helmets.

The center utilizes the Child Care Weather Watch to determine if outdoor play is suitable due to questionable weather conditions. A first aid kit is taken outside.

Center Field Trips/Transportation:

The center does provide transportation to and from field trips in the summer school age program with Eddyville/Blakesburg/Fremont School district owned and operated by the school system. The school provides a licensed driver. First Aid kits are taken on each trip. An extra staff is always present on field trips as well as emergency contact for each child. Staff members are over 18 years of age and CPR/First Aid certified. Sometimes trips are taken in the summer for the summer camp program for the school age children to the movie theater in Oskaloosa.

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Center Administration:

Child misbehavior is addressed by positive reinforcement of appropriate behavior, setting clear limits and expectations, redirection and short time out periods of age appropriate length. The discipline policy includes: does not allow -- corporal punishment; punishment that causes humiliation, fear, pain or discomfort; locking children in an area or using mechanical restraints; associating with illness, toilet training, food or rest; or the use of verbal abuse, threats, or derogatory remarks about a child's family.

Child files were audited including child immunizations, physicals (due annually) and child statements of health for school age children. I further reviewed emergency contacts, pick up authorizations, medical and dental information. This information should be updated annually or when a change occurs. The children are not allowed to start the program until all paperwork has been turned in.

Staff records were reviewed. Records are complete and well organized. This is a great improvement from past visits. Fingerprint results are reviewed. They are due every 4 years. Iowa Criminal background checks are due every 2 years. Universal precautions due upon initial employment and Mandatory reporter training is due every 5 years were reviewed. Also reviewed were CPR/First Aid is due every two years and professional development hours. All staff have signed a form of criminal conviction/child abuse. I reviewed staff physicals (due every 3 years) and annual professional development requirements. The center currently employs 8 staff and the Director.

Incident and Injury reports are kept on file and a copy sent home with parents. Staff sign and date each report. Staff will fill out an Incident Report on any injury or incident (including biting) that occurs while the child is at the center. The report will be given to the parent at the end of the day and the parent will sign it. Parents will receive a copy to take home if they like and the original will be filed in the child's file. Parents will also be informed if their child has hurt another child. Staff will call parents if their child has a serious injury. Parents will not be called for every injury unless the parent request they be called.

We reviewed mandatory policies, most are included in the center handbook. Emergency procedures are included in the handbook including bomb threat, intoxicated parent. The handbook contains an unlimited access policy. It contains a biting policy and a discipline policy. An evacuation of immobile child policy is present stating that assigned staff will assist immobile children to evacuate the building.

Emergency evacuation procedures, poison control and 911, child care consultant information and mandatory reporter information are posted on the inside of the door. Schedules are posted in each room as well as curriculum. A No Smoking sign is on the front door.

Teachers in each room do daily lesson plans. CCR&R or Joan Garret may be consulted on curriculum or behavior issues, classroom arrangement, etc..

Annual emergency procedures training was conducted. Staff signed and dated acknowledgement of such

2. Identify Observed Strengths of the program

The new program is utilizing all rooms.

3. Identify the aspects that fall below the standard

1. 109.9(1)a: All files contain:Copy of a department criminal history record check form or any other permission form approved by Department of Public Safety for conducting an Iowa or national criminal history record check. Copy of a request for child abuse information form, when applicable.Copies of results of Iowa record checks conducted through the SING for review by the department upon request. Copies of national criminal history check results.Any department issued documents sent to the center related to a record check, regardless of findings. According to the Director these were completed the next day.

2. 109.9(1)b: All files contain a pre-employment physical exam report completed within six months prior to hire and at least every three years. Physical exams shall be documented on form 470-5152, Child Care Provider Physical Examination

Report. Eight staff are behind on physicals.

3. 109.9(2)i: 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, Chiropractor, PA, or ARNP, and contains health history; present health status including allergies, medications, and acute/chronic conditions; and recommendations for continued care if necessary. Some of the updated contact information for dentist and medical provider was not present in the files. Six children had overdue physicals.

4. Any corrective action plans, provisional license, and safety plans-steps to get into compliance

5. Special Notes/Recommendations

Based upon this review, it is recommended that this center begin in Full licensing status. The center is directed to correct the items listed in Section IV. The Director gave me a verbal commitment that the noted rule violations would be promptly corrected. It is important to note, all HHS licensing standards and procedures must be maintained during the renewal period.

IHHS encourages you to contact your local nurse consultant with IDPH. Child Care Nurse Consultants work with child care and early education businesses. Businesses may call or send questions to a child care nurse consultant about health and safety policies, health programs, health of personnel, and specific child health or safety issues. Jamie Crouse is the Child Care Nurse Consultant (Iowa Department of Public Health) in cooperation with the American Home Finding Association who serve this center. The center is responsible for contacting Ms. Crouse for consultation regarding health and safety issues such as hand washing, outdoor play area regulations, toppling or tipping hazards, etc....

The program has a new CCNC Kelsey Stookesberry. She provided the following the past 6 months:

10/7/25 & 10/10/25- technical assistance provided on communicable disease (specifically hand, foot and mouth)
10/24/25- visit to center, signed BPA and scheduled upcoming visits
11/17/25- Child health record check up completed
11/17/25- provided technical assistance for behavior concern (biting)
12/18/25- visit to center, child health record follow up visit
12/22/25 &12/23/25- classroom observation in toddler room, recommendations about room layout provided
1/8/26- technical assistance provided for special health needs care plan- asthma
1/14/26- technical assistance provided for first aid kit
1/27/26- handwashing activity with 3 and 4 year olds visit
1/28/26- playground technical assistance
1/29/26- technical assistance for breast milk storage
2/17/26- technical assistance for crib spacing. Visi to center for diapering education and staff handwashing education
2/24/26- technical assistance for communicable disease- influenza
3/3/26- technical assistance for care plan for seizures
3/23/26- visit to center for immunization review
3/25/26- technical assistance provided for OTC medications
4/6/26- technical assistance provided for care plan for environmental allergies
4/13/26- technical assistance provided for safe sleep- parent wanted baby to be swaddled, provided guidance for NOT swaddling

Kelsey Stookesberry, RN
Child Care Nurse Consultant
Wapello and Mahaska Counties

American Home Finding Association
P.O. Box 656, 217 East Fifth Street
Ottumwa, Iowa 52501

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Phone: 641-682-3449 Fax: 641-682-5049

IHHS recommends the center consult with Child Care Resource and Referral. They offer centers assistance with meeting the HHS regulations, QRS, infant/toddler concerns, room arrangement and environment, developmental concerns, Best Practice information, CDA assistance, or any questions or concerns you may have. Please visit the following website for more information: http://www.iowaccrr.org. Your Consultant is Karen Lauer. She is available to assist with questions or concerns related to curriculum, supervision, transitions, behaviors, etc...

Consultant Lauer provided the following information on what CCR&R has provided the past 6 moths:

Since January 2026
• Visits 3 (topics: Business Policies and Practices, Refer Support to Other Programs, Support Licensing, Growing Iowa, Training Consultation and EC-PBIS)
• TA's 17 (topics: Training Consultation, Environments, Refer Support to Other Programs, Business Policies and Practices, Growing Iowa, Support Licensing and IQ4K)

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Serving Appanoose, Davis, Lucas, Mahaska, Monroe, and Wapello Counties

Funding provided by the Iowa Department of Human Services through the Child Care and Development Fund

Facebook Instagram YouTube News Training

The proactive approach the Director takes in working with CCR&R, IDPH and PBIS is evident with the low number of violations.

TARGETED ASSESSMENT: The Director and I discussed behavioral management techniques. She stated, "

Understanding expectations:
In our parent handbook, it is laid out very clearly that we utilize positive guidance methods. Corporal Punishment, verbal abuse, punishment which is humiliating or frightening, and derogatory remarks about the child or family is not permitted at any time. Staff are to clearly state limits and expectations that are age appropriate. Prior to a new hire being in a room, we discuss this in depth and new staff are required to shadow senior staff to watch and learn how the routines and expectations are handled. I also plan to place these items in our staff handbook in the future as a revision. This is only in our parent handbook, but I feel it is important to have in our staff handbook as well. Staff are to sign off on a copy of our handbook prior to their first start date.

Managing Frustrations:
As the director, I have an open door policy. Any time a staff member has a frustration, they understand that they can come to me immediately or call me directly. Communication is key in our role. I also try to check in with everyone throughout the day to check with overwhelm or frustration. I can also hear when children are crying when I am in my office. I will make my way down to a room if I feel the situation is getting out of control and offer to help. There have been a couple of times where my staff have felt overwhelmed and I have given them a 15 minute break to recompose themself. When they return, we discuss the situation, what led up to the frustration, and how to do things differently in the future. Staff are currently taking Infant/Toddler PBIS training to learn classroom management skills and different approaches to dealing with challenging behavior. I am also working on creating a small, quiet space for staff to utilize other than our break room in the event that overwhelm has occurred.

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Monitor Performance:
I do a daily check in with staff as soon as they start their shift. They let me know of any concerns they are having, things that are going well, and things that are not going well. I also like to go into the classrooms and do an informal observation. Sometimes I watch from the window of the classrooms. I am working on finding a way to do a more formal observation of staff, I have just not found a program or form that I like.

I have been working on finding classes for staff to participate in that deals with classroom management and challenging behaviors. So far, all I have found is PBIS. I will continue to look. I have also implemented monthly staff meetings as a whole group and weekly check in with just the teachers in the classrooms. I meet with the teachers each week and we discuss things that are going well in the classroom and things that are not going well together. I find this helps us brainstorm different solutions, reminds us to utilize similar language, and helps them understand that they are not alone.

I have also realized I am the only staff that has taken the PBIS training with Joan Garrett coming into the classrooms as a coach. I am trying to teach staff the best way I can without micromanaging or overstepping. However, the safety of the children is my number one priority. It is made clear that any kind of physical or inappropriate actions taken toward children is completely unacceptable and will end in termination."

Date: 05/06/2026

HHS Licensing Consultant: Jill Seibert

Non-compliance with any of the mandated regulatory requirements listed above may lead to the cancellation or revocation of your Child Care License. Please take steps necessary to completely address each of the violations noted above.

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 **https://iowaccrr.org**.