

CHILD CARE CENTER COMPLAINT

Name of Center: Loud House Learning Center	Enrollment: 45	License ID: 52455
Street: 204 G Avenue	City: Grundy Center	IA Zip Code: 50638 County: Grundy
Mailing Address: 204 G Avenue		
Mailing City: Grundy Center	IA Zip Code: 50638	
Director's Name: Kayla Hoffert	Center Phone Number: 319-825-4694	
On-Site Supervisors:	E-Mail Address: loudhouselearningcenter@gmail.com	

Date of Complaint: 08-14-2026**Date of Visit:** 08-18-2026
☒ Scheduled ☐ Unannounced ☐ NA

☒ Non-Compliance with Regulations Found ☐ Compliance with Regulations Found
RECOMMENDATION FOR LICENSE☒ **NO CHANGES to licensing status recommended**☐ **PROVISIONAL license from** _____ **to** _____☐ **SUSPENSION of License**☐ **REVOCATION of License****Complaint Details:**Did this complaint result in a serious injury? ☐ Yes ☒ NoDid this complaint result in a death to a child? ☐ Yes ☒ No**Summary of Complaint:**

A complaint was received that an employee of the Loud House Learning Center had handled a child in a rough and aggressive manner in response to the child's behavior.

Licensing Rules Relevant to the Complaint:

109.12(2)a-d The center shall not use as a form of discipline: Center does not use corporal punishment including spanking, shaking, or slapping. Punishment which is humiliating or frightening or causes pain or discomfort is not allowed. Children shall never be locked in a room or closet. When restraints are part of a treatment plan for a child with a disability authorized by a parent and a psychologist or psychiatrist, staff shall receive training on the safe and appropriate use of the restraint. Punishment or threat of punishment associated with illness, toilet training, or food or rest is not to be used. No child is subject to verbal abuse, threats, derogatory remarks about child or child's family.

109.12(4)a A safe and properly equipped area is provided for infants that does not allow for intrusion by children over two years of age. Children over age two who remain in the infant area are placed at the recommendation of a physician or AEA due to a significant developmental delay. Children are placed for a limited time with HHS approval if doing so does not pose a threat to the infants.

Inspection Findings:

A scheduled visit was made to the Loud House Learning where DHHS co-worker, Jay Stanish, and I met with the center director Kayla Hoffert who was aware of the complaint. Kayla did provide copies of the incident reports that had been completed. Kayla identified that the employees who had information about the incident, (SL), and (JM) were present at the center and available for interviews. Kayla did identify that the child involved does have some known behavioral issues. Kayla was also able to provide the files for the employee and child identified in the complaint. The employee file did contain all required information regarding background checks, and training certificates. The child's file did contain all required enrollment information but did not contain any response plans for any identified health or behavioral issues.

We spoke with the employee identified in the complaint, (SL), who stated that the incident occurred in the lunch room where the preschool and school age children were present. SL reported that the child identified in the complaint has known behavioral issues and it was a very chaotic day. SL stated that

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the child was had been in the infant room to calm down as it was empty but did acknowledge that there are times when the child will go into the infant room when there are infants present. SL stated that she went in to attempt to calm the child who was upset and crying. SL stated she attempted to hold the child on her lap demonstrating a wrapping both arms around the child in a hugging manner, and later changing to a cradling position. SL stated that the child started hitting, kicking, and scratching throughout the time she was holding the child, and then kind of "jumped/fall" out of her arms as she was trying to put the child down. SL stated that the child then went into the bathroom and started throwing sleeping cots which were stored in there. SL stated that they then called Kayla who came and helped calm the child down. SL denied throwing, dropping, or setting the child down in a hard or aggressive manner. SL stated that she was not aware of any specific care plans or actions for the child. When asked about the center approach to behavior management in general SL stated that she did not know. When asked about orientation and training SL stated she has been with the center for about 2 years and did have some orientation when she first started and they do talk about things during staff meetings.

We next spoke with JM who stated she had also been working in the classroom and had observed the interactions. JM provided much the same basic history that the child was in the infant room due to being over-stimulated in the lunch room. JM stated that SL tried sitting and holding the child who got upset and began struggling grabbing SL's glasses, and other actions. JM stated that SL got frustrated and threw the child down in an aggressive manner. JM did state that she has seen other times that SL has had similar interactions with other children in the past as well. When asked if she felt the interaction was accidental or intentional JM stated that it was intentional. When asked about the center policies regarding discipline JM stated that she is usually with the older children and will try talking to them about their behavior and other options, and if that does not work she will use time out having them sit in an area away from others to allow them to calm down. JM was asked if there is a different response for the child identified in the complaint. JM stated that the child will normally go an isolated area and calm down on their own. JM confirmed that this does include the child going into the infant room both at times when the room is empty, and at times when the infants are present.

Based on the information obtained this complaint is SUBSTANTIATED for violation of Licensing Standard 109.12(2)a-d The center shall not use as a form of discipline:

*Center does not use corporal punishment including spanking, shaking, or slapping.

*Punishment which is humiliating or frightening or causes pain or discomfort is not allowed. Children shall never be locked in a room or closet. When restraints are part of a treatment plan for a child with a disability authorized by a parent and a psychologist or psychiatrist, staff shall receive training on the safe and appropriate use of the restraint.

*Punishment or threat of punishment associated with illness, toilet training, or food or rest is not to be used.

*No child is subject to verbal abuse, threats, derogatory remarks about child or child's family.

-- All parties provided consistent and credible statements that a situation occurred in which the child identified in the complaint became upset in response to a chaotic situation in the lunch room. All staff agree that the employee identified in the complaint responded to the situation with attempting to hold the child. This was described as initially having the child on the employee's lap with both arms wrapped around the child in a hugging manner, and then shifting to a cradling manner. All parties agree that the child began to struggle and fight including hitting, kicking, scratching, and grabbing the employee's glasses in an attempt to get away from the employee throughout the attempt to hold the child. While the employee holding the child identified that the child fell to the ground from her grasp when attempting to put the child down, another account described the employee throwing the child to the ground in an aggressive manner after becoming frustrated. While the action may have initially been intended to comfort and support the child it would be considered to shift to disciplinary and a form of physical restraint once the child attempted to end the contact and the employee continued to hold the child.

Based on the information obtained this complaint is SUBSTANTIATED for violation of Licensing Standard 109.12(4)a A safe and properly equipped area is provided for infants that does not allow for intrusion by children over two years of age. Children over age two who remain in the infant area are placed at the recommendation of a physician or AEA due to a significant developmental delay. Children are placed for a limited time with HHS approval if doing so does not pose a threat to the infants.

-- The child's file does provide documentation that the child is well over 2 years of age. All parties provided consistent and credible information that the child is allowed into the infant room when upset as a means of helping the child to calm down. All parties agree that this has occurred at times when infants are present in the room.

Special Notes and Action Required:

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This complaint is substantiated and the following actions are required and/or recommended. A full license will remain in effect at this time.

REQUIRED:

1. The center shall discontinue the practice of allowing the child identified in the complaint, and all other children over 24 months of age to enter the infant room when infants are present.
2. The center director shall conduct a staff meeting in which the center policies regarding approved discipline, and center policies regarding physical interactions with children are reviewed. All staff shall sign documentation acknowledging that they were informed of those expectations, and the documentation shall be maintained by the center.

RECOMMENDED:

1. The center has a Behavioral Response Plan template which provide a strong framework for supporting children with identified behavioral concerns. It recommended that the center complete and review a written response plan with the child's parents which can then be implemented by staff.

Consultant's Signature:

Ray Salsbury

Date:

08-19-2026