Health and Human Services

Iowa Department of Health And Human Services

CHILD CARE ANNUAL EVALUATION

Business Name: Karissa Taylor

Provider Name: Karissa Taylor

Provider No.: 45578

Address: 403 W South ST, Jefferson , IA, 50129

E-Mail:

County: Greene

Phone Number: 5152406001

- [ ] Pre-Inspection Date:
- [ ] Approval Date:
- [X] Annual Visit Date: 10/24/2025

Program Type:

- [ ] Registered Child Development Home A (guidelines for ratios on all categories)
- [X] Registered Child Development Home B
- [ ] Registered Child Development Home C
- [ ] Registered Child Development Home C1
- [ ] Non Registered Child Care Homes accepting CCA

Program Population Served:

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

1. Basic Overview

Karissa is a category B provider that has been providing registered child care for 10 years. As a B provider, she is allowed 8 full time children and 4 school aged for 2 hrs or less at a time unless an assistant is present. Karissa does not have any assistants approved. Karissa has a 2 story home but provides care on only the first floor. Karissa operates between 5 a.m.- 5 p.m. M-F. Karissa reports that her program is a learn through play program. She reports that she takes the children outside to play a lot during the summer.

2. Identify Observed Strengths Of The Program

Karissa has 10 years of experience and has early morning hours to accommodate families. Karissa currently only has 2

children so has several openings. She reports that she accepts state child care assistance.

3. Identify The Aspects That Fall Below The Standard

110.8 : Conditions in the home shall be safe, sanitary, and free from hazards.
* Karissa needs to clean the stairway to the basement and keep it free from clothes at all times.
* Karissa needs to add child locks to under the sinks or move cleaning supplies out of the reach of children.

Emergency numbers posted for police, fire, ambulance, and poison information center.
Number for each child's parent, a person who can be reached when the parent cannot and child's physician is written on paper and readily accessible by the working telephone.
* Karissa needs to find and post these.

All accessible electrical outlets are safely capped or are tamper-resistant electrical outlets.
* Karissa needs to go through and cap off all electrical outlets on the first floor that children have access to.

110.8 (1) h : Has a minimum of one single-station, battery-operated, UL-approved smoke detector in each child-occupied room and at the top of every stairway.
Each smoke detector has been installed according to manufacturer's recommendations.
* Karissa needs to put smoke detectors up in the living room/kitchen and at the top of the stairs.

Each smoke detector is tested monthly, and a record is kept for inspection purposes.
* Karissa needs to keep track of monthly testing.

Nonsmoking signs are posted at every entrance of the home and in every vehicle used to transport children. Signs include telephone number for reporting complaints, and www.iowasmokefreeair.gov.
* Karissa needs a no smoking sign at the back door.

All dogs and cats have annual examinations. Records of the exams are on file and must verify that routine immunizations are current and animal is free of endo and ecto parasites.
Form 470-5153, Pet Health Examination Veterinary Health Certificate, is on file.
* Karissa needs to obtain pet form.

110.8 (1) p : The provider has written policies about caring for mildly ill children and the exclusion of children due to illness, and informs parents of policies.
* Karissa needs to find her policies and keep them in a file.
110.8 (1) q : The provider has written policies about responding to health-related emergencies.
* Karissa needs to find her policy and keep them in a file.

110.8 (1) r : Certificate of registration is displayed in a conspicuous place.
* Karissa needs to find and display her certificate.

The first-aid kit shall, at a minimum, include adhesive bandages, bottled water, disposable tweezers, and disposable plastic gloves.
* Karissa is missing tweezers in her first aid kit.

The plans shall clearly map building evacuation routes in case of fire, a safe place indoors in case of tornado, and flood shelter areas.
* These need to be updated and posted by the front and back door.

Fire and tornado drills are practiced monthly and documentation kept on file for the current year and previous year.
* Karissa did not have these. This needs to be practiced and documented monthly.

110.9(1) : A provider file is maintained and contains:
110.9 (1) a : Within six months of becoming registered, a physical exam report documented on form 470-5152, Child Care Provider Physical Examination Report, for all household members over the age of 18. Physical exams should be repeated every three years.

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Within six months of becoming registered, children 18 years of age or younger residing in the household must have:Admission physical exam report.Immunization certificate.For school age: Documentation of physical exam completed at time of school enrollment or since that time.
110.9 (1) b : Documentation from the Department confirming record checks have been completed and authorizing or limiting the person's involvement with child care.
110.9(2) : An individual file is maintained for each staff assistant:
110.9 (2) a : Documentation from the Department confirming record checks have been completed and authorizing or limiting the person's involvement with child care.
110.9 (2) b : Within six months of approval, a Physical exam report documented on form 470-5152, Child Care Provider Physical Examination Report, which is repeated at least every three years.
110.9 (2) c : Certification of two hours of approved training relating to identification and reporting of child abuse within six months of employment.
110.9 (3) a : Documentation from the Department confirming record checks have been completed and authorizing or limiting the person's involvement with child care.
110.9 (3) b : Within six months of approval, a Physical exam report documented on form 470-5152, Child Care Provider Physical Examination Report, which is repeated at least every three years.
110.9 (3) c : Certification of two hours of approved training relating to identification and reporting of child abuse within three months of employment.
110.9 (3) d : Certification in infant and child first-aid that includes mouth-to-mouth resuscitation.If they are unable to locate first aid training that includes mouth-to-mouth resuscitation, they must complete both a first aid course and CPR.
110.9 (3) e : Certification or other documentation that minimum health and safety training as identified in 110.10(1)"a" has been completed within three months or prior to providing substitute care, whichever occurs first.
110.9(4) : An individual file is maintained for each child and updated annually or when there are changes. Each file contains:
110.9 (4) a : 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.
110.9 (4) b : Emergency information including where the parent can be reached, the name, street address, city, and telephone of the child's regular doctor, and the name, telephone number, and relationship to the child of another adult available in case of emergency.
110.9 (4) c : A signed medical consent from the parent authorizing emergency treatment.
110.9 (4) d : For infants and preschoolers: An admission physical examination, on the first day of attendance, including past health history, status of present health, allergies and restrictive conditions, and recommendations for continued care when necessary. The date of the exam is not more than 12 months before the child's first day of attendance.
110.9 (4) e : For infants and preschoolers: A statement of health signed by a physician submitted annually.
For school aged children: An annual statement of health condition signed by the parent or legal guardian, annually from date of statement of health or admission physical.
110.9 (4) g : A signed and dated immunization certificate provided by the state Department of Public Health.
110.9 (4) h : Written emergency plans for children with allergies. Must accompany child if away from facility.
110.9 (4) i : Documentation signed by the parent which names persons authorized to pick up the child, their telephone number, and relationship to the child.
110.9 (4) j : Written permission from the parent(s) for their child to attend activities away from the child development home.
* Karissa did not have any files for herself, family or the children in her care. She needs to work on getting these updated and put in an area that can be located easily for future compliance visits.

All items needs to be completed by 10/17/24. Please send a picture of installed smoke detectors, emergency plans posted at doors, outlet covers, child locks and the steps to the basement cleared to Sheila at: 515-380-3648 or Sheila.aunspach@hhs.iowa.gov

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

5. Special Notes/recommendations

It is recommended that you work with CCR&R to get your files up to date and organized along with any other help needed to get you into compliance.

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It is recommended that you limit screen time. You report that you have the t.v. on all day. You report it is educational programs, but children's screen time should be limited to allow them to learn through play and use their imaginations along with using their large and fine motor skills.

We discussed safe sleep.

HHS Child Development
Home Compliance Worker: Sheila Aunspach Date: 10/24/2025

Non-compliance with any of the mandated regulatory 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.

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