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

Name of Center: Discovery Daycare **Enrollment:** 60 **License ID No. (Reapplications)** 17841

Street: 600 2nd Ave SW **City:** Pocahontas Iowa **Zip** 50574 **County:** Pocahontas

Mailing Address: 600 2nd Ave SW, Pocahontas, IA, 50574

Director's Name: Sarah Vial **Phone Number:** 712-335-4804

On-Site Supervisor(s): **E-Mail:** discovery.daycare@pocahontashospital.org

Date(s) of Visit: 07-12-2024

Licensing Visit X **Unannounced Visit** X **Off Year Visit** **Administrative Change**

LICENSING VISITS

New Application X **Re-Application** **NA**

Signed Application (470-0722) Received **Yes** **No** X **NA** **Date Signed:**

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

Date Inspected: 12-01-2021

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

Get-Well Evening Care Special Needs

SCHEDULE: X Year-round School-Year Summer Only

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

LICENSE CAPACITY	Infants	2 Years	Preschool	School-Age	Capacity
General	9	5	30	10	54
Summer					0

QRS Rating: N/A

RECOMMENDATION FOR LICENSE:	
X	**FULL** license from 09-01-2023 to 09-01-2025
	PROVISIONAL license from
	DENIAL of initial application
	SUSPENSION of license
	REVOCATION of license

Licensing Consultant: Raymond Salsbury **Date:** 07-23-2024

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

II. IDENTIFY THE AREAS OBSERVED ON THE VISIT:

An unannounced annual visit was made to the Discovery Daycare center on 07-12-24 where I met with Kaylee Shivers who was identified as the person in charge as the center director, Sarah Vial, was not in. Sarah has been the director of this program since 2013 and is well qualified based on her experience and on-going training. The program is located on two levels of a wing of the St. Peter's Church in Pocahontas. The program is operated independently of the church under a separate board of directors. The program provides daycare and preschool programming to infants through school age children. There are approximately 60 children enrolled in the program served by 10 staff. All aspects of the program subject to licensing standards were reviewed during the visit.

The general layout and design of the building and classrooms remains the same as in prior visits. The center operates out of 6 rooms with two for infants, three for preschool age children, and one for school age children. The young infant room made use of shelving and a baby gate to define a primary programming and sleeping area from the eating and changing area. The older infant room is also divided but makes use of a mobile fence and gate system. Staff were observed to open the gate when passing between the two areas rather than stepping over the fence in both rooms. The classroom on the upper level has a curtain divider which can be closed to create two programming rooms. Each room was observed to be clean with some minor maintenance issues such as missing access panels on heating registers. While these did not rise to the level of being an immediate safety concern these are issues that do need to be addressed. Restrooms are located outside of the classrooms on the upper level off the main corridor. Changing stations are present in one of the restrooms and in both infant rooms. Sinks are present in the infant rooms, and one of the classrooms on the upper level to allow for hand washing. Each room has windows along the exterior walls. While the windows do allow for natural light, ventilation, and a view of the outdoors the windows of the lower level are elevated which reduces the availability of these benefits. Several of the classrooms has multiple exits from the room. Emergency evacuation notices that include both written and diagram directions for fire and tornado evacuation were present by all exits from each space used for child programming. Each room is divided into activity centers through the placement of low shelving, furniture, and play structures which are arranged so as not to create any blind areas.

The available activity centers of each room include large/small manipulatives, art/craft, and books, and increase in the number and complexity of centers for older age groups to include math/science, dramatic play, group learning, and media. Each activity center was observed to have toys and materials present that were in good repair and appropriate to the ages of the children present. Additional toys and materials are kept in storage and can be rotated into use to provide new play options. A copy of the daily schedule and curriculum was present in the preschool and school age classrooms. Ratio was maintained in the center as required by age groups. The center had just finished lunch when at the time of my arrival and the younger children were transitioning to nap time. The older school age children were engaged in quiet center play activities. The staff were observed to be attending to the children's care needs, or playing and interacting with them. Supervision was provided including when children needed to leave the classroom to use the restroom.

Good health and safety practices were generally observed during the visit. I was unable to observe a diaper change during the visit but the required changing procedures posting was present by all changing stations. Staff that do engage in diapering were able to recount the practices followed and recommendations were made on changes that would help to

reduce the risk of disease transmission. Chemical cleaners, medications, personal belongings, and other items that could present a safety risk to children were properly labeled and stored in areas where they were not readily accessible. Good hand washing practices were observed. First aid kits were maintained in the center and contained materials necessary to address most common first aid needs. Safe sleep practices were discussed as there were two children under 1 year of age making use of swaddling sleep sacks where the children were restrained. It was reviewed that while sleep sacks are allowable if they are of the design with Velcro wings that can be used to bind the child they must be applied so that the arms and legs are free to move. One of the children was observed to only have one arm bound and it was reported that this was done at the request of the parent to help address a physical/developmental issue. It was reviewed that if it were being used as an adaptive medical device the center would need documentation from the child's physician identifying why, when, and how it was to be used.

The outdoor play area was observed and is fully enclosed and separated into two areas with one for older children, and one for infants and toddlers by chain link fencing. Several safety and maintenance issues were observed with both playground areas. The playground for the older children has a large climbing structure which was observed to have several structural issues and is not safe to use. It was discussed that staff need to restrict children from using the structure until it can be repaired or removed. The other equipment and toys were observed to be in good repair. The main playground has a variety of play surfaces that include grass, pavement, and the soft area with the rubber mulch used for fall surfacing beneath climbing structures. Additional work had been completed to expand the paved space which now includes a riding track that encompasses the full of the playground area. The playground is fully enclosed by fencing which was in good repair. Shade is provided by mature trees and an awning.

The toddler playground is a large open grassy area. In the toddler playground area a crawling tree play structure appeared to have storm damage and was sectioned off until repairs could be made. A small residential grade slide was also present in that play area which did not have any fall surfacing placed beneath it. That structure either needs to be removed, relocated to an area with fall surfacing, or have fall surfacing installed beneath it, and again children need to be restricted from use until corrections are made. Other toys and equipment are also available in this area. This area is also fully enclosed by fencing, and shade is provided by several mature trees.

The center makes use of the Summer Lunch Program from the school with the older children walking to the school, and meals being brought in hot/cold holding containers for younger children. When the school program is not in operation meals are prepared by the local hospital and brought to the center in hot/cold holding containers for all age groups. The center does prepare breakfast and snacks on-site and some items are maintained at the center. A refrigerator is present and food items were properly stored. A copy of the planned menu was posted. I was not able to observe a meal or snack service on the day of my visit but prior reports identify that staff have worn food service gloves, and provide supervision at the tables. One issue that was observed was with regard to feeding infants where an infant identified as being under 6 months of age was being floor fed in a reclined position. It was reviewed that infants under 6 months of age must be fed being held in an upright position to reduce the risk of aspirating formula and development of other health related concerns such as ear infections.

In reviewing administrative records the Mandatory Child Abuse Reporting notice had been partially covered so that the information contained in the notice was not visible. It was reviewed that this and the other required notices for No Smoking, Availability of Licensing Standards w/ Consultant Contact, and the License Certificate must be posted where they are readily visible and accessible to all parents and visitors at all times. The center is using the Pro-Care program to track child and staff information as well as hard copy files of original documents. A random sample of 15 child files were selected for review and of those 3 needed an updated physical. In reviewing staff files it appeared that some elements were maintained in various locations and without Sarah being present to facilitate the review those records could not be fully assessed. Forms will be sent to the center for Sarah to complete an audit of staff files which can be returned to the licensing consultant and any issues identified will be addressed at that time. Emergency fire and tornado drills were not conducted for several months of the previous or current year. This is the second year this has been cited. All other inspection logs and certificates were available and current.

III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:

The center completed renovations to the outdoor playground with adding a riding track, and moving a storage unit that provides more room for the children to play.

The center has also ordered new equipment for the infant room which should be arriving soon, and is looking to acquire additional materials for the other classrooms.

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

109.4(3)b: Postings are required for mandatory reporter requirements, the notice of availability of the handbook required in subrule 109.4(5), and the program activities and shall be placed in an area that is frequented daily by parents or the public
-- The Mandatory Reporter Requirement posting was partially covered on the day of the visit such that the notice was not fully visible including the contact number to report concerns.

109.9(1)b: All files contain:A signed copy of DHS criminal history record check or any other permission form approved by the Department of public Safety for conducting an Iowa or national criminal history check. A copy of Request for Child Abuse Information.Copies of the results of Iowa records checks conducted.Copies of national criminal history check results.Any Department-issued documents sent to the center related to records check.
-- Number not in compliance: 1

109.9(1)d: 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.
-- Number not in compliance: 2

109.10(15)b: Emergency instructions, phone numbers, and diagrams for fire, tornado, and flood shall be visibly posted and documented at least once a month for fire and tornado. Records shall be maintained for current and previous year.
-- Drills were not conducted monthly as required. NOTE: 2ND YEAR CITED

109.11(3)a: Center shall ensure that: Facility and premises are sanitary, safe, and hazard free. Adequate indoor and outdoor space is provided. The outdoor area shall include safe play equipment and area of shade. Sufficient space provided for dining. Sufficient lighting shall be provided. Sufficient ventilation. Sufficient heating. sufficient cooling. Sufficient bathroom and diapering facilities. Equipment, including kitchen appliances, are maintained so as not to result in burns, shock, or injury to children. Sanitation and safety procedures for the center are developed and implemented to reduce risk or injury or harm to children and reduce transmission of disease.
-- The climbing structure of the preschool/school age playground area is not safe and shall not be used until such time that it has been repaired or replaced. The slide structure of the toddler playground requires fall surfacing and shall not be used until it has been relocated to an area with sufficient fall surfacing.

109.15(3)b: Children under six months held or fed in sitting-up position.Bottles not propped for any child, given to a child in a crib or left sleeping with a bottle.Spoon feeding is adapted to developmental capabilities of child.
-- Infants under 6 months were observed being floor fed in a reclined position while propped on a "Boppy Pillow".

V. SPECIAL NOTES/RECOMMENDATIONS:

A full license will remain in effect at this time. Please provide a written response to the licensing consultant identifying a plan of action to correct and maintain those aspects cited as not meeting licensing standards and identifying an anticipated date of compliance. At least one visit will be made to the center during the next year.

NOTE: Please provide a list of planned calendar dates for Emergency Fire, and Tornado Drills to be conducted for each month through the end of the 2025 calendar year, and a completed Staff File Audit form to the DHHS Licensing Consultant by 08-09-24. Failure to comply could be viewed as a wilful disregard of licensing requirements and could result in negative action being taken against the center license. If additional time is required to complete the documentation please notify the Licensing Consultant.

*Note: If you are the Child Care Center Director and you feel something is unclear or unjustly cited, please contact your DHS Licensing Consultant to discuss the issue. The child care director may also send a response which will be placed in the licensing file.

*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.