Health and Human Services

Iowa Department of Health And Human Services

CHILD CARE CENTER ANNUAL EVALUATION

Name of Center: Hand In Hand

Provider No.: 19482

Address: 3860 Middle Rd, Bettendorf, IA, 52722

County: Scott

Director's Name: Jennifer Chastain

On-Site Supervisor:

Phone Number: 5633328010

E-Mail: jennifer@handinhandqc.org

HHS Visit Date: 04/10/2026

Licensing Period: 08/01/2025 to 08/01/2027

Fire Inspection:

Date Inspected: 02/12/2025

Comments:

Report Visit Type:

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

License Type:

- [X] Full
- [ ] Provisional

Quality initiative:

Quality Rating: 4

- [ ] Accrediation

Program Duration:

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

Health and Human Services

Iowa Department of Health And Human Services

CHILD CARE CENTER ANNUAL EVALUATION

HOURS:	*Year-round*	*School-Year*	*Summer Only*
Sunday			
Monday	7:00 AM to 5:30 PM		
Tuesday	7:00 AM to 5:30 PM		
Wednesday	7:00 AM to 5:30 PM		
Thursday	7:00 AM to 5:30 PM		
Friday	7:00 AM to 5:30 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	15	14	39	44	112
Summer					0

1. Basic Overview

An unannounced off year visit was completed at this center on 4/10/26. The center director Jennifer Chastain was present on the day of the visit along with other staff. Jennifer is qualified with 26 years of child care center experience along with ongoing professional development training throughout those years. This center is a non-profit center governed by a board of directors. Angela Kendall is the CEO for the board, and she was also present on the day of the visit. The center operates out of the main level and a large portion of the lower level of the building. The property is owned by the center. A respite program through the HCBS Waiver program is also located on site, and administered by the Hand In Hand agency, for children and adults age Kindergarten through 18. This space is included in the program's license capacity. The school-age child care children are integrated with the respite children. Care for school age children is provided after school and on non-school days. The center participates in the Iowa Voluntary Preschool Grant program. Jennifer states the center uses the Creative Curriculum except for school age where they use Ages and Stages developmentally appropriate center created curriculum. The center reports enrollment of 87 children at the time of the visit.

The center consists of the following program rooms on the main floor: Groot Room (school age/art room), Maple Room (three/four years, formerly the castle room), Truffula Room (20 months through two years), Pine Room (four/five years), and Dragon Room (six weeks to 20 months). The lower level includes one large room that is licensed space for school age child care. The room is also used by children age three and older for a break out space when not in use by the school age children. Hand washing sinks are located within each program room on the main floor. All but the art room on the main floor include adjacent restroom areas. There is also a hallway restroom area. The Maple, Truffula, and Dragon rooms include a diapering station within the program room. The Pine Room includes a diaper station that is inside the restroom area. The lower level includes two restroom areas each with a toilet and a hand washing sink. One of the restroom areas is adjacent to the program room. All program space was observed.

CHILD CARE CENTER ANNUAL EVALUATION

The center serves breakfast (only to non-school age portion of program), morning snack, lunch, and afternoon snack. The center participates in the CACFP. Snacks are prepared on site in the center's kitchen. Breakfast and lunch are catered to the center from a local licensed catering business. School age children are required to bring their own lunch from home. The kitchen area is organized.

2. Identify Observed Strengths of the program

This center is unique in its philosophy and population served. Because of the history and development of this center there is a strong identification with serving children with special needs, although the program rooms are integrated. The center works closely with the AEA. The center director reports having completed the LEEAD training. This program reports being certified program-wide for the PBIS training through 5/2028. Program rooms continue to be spacious and bright with windows. Rooms are generally organized with plenty of accessible materials to support program needs. The children's crafts and projects are posted throughout the center. The center's outdoor play area for the non infant children has been designed as an outdoor classroom environment. The center has achieved level four IQ4K through 6/30/26. Staff appear to work well together, and staff were observed to be engaged with the children in activities throughout the center. The center continues to work closely with their local CCRR and CCNC consultants. Child and staff files are organized.

3. Identify the aspects that fall below the standard

109.10(1): Medications: The center shall have written procedures for dispensing, storage, and authorization, and recording of all prescription and non-prescription medications.Staff must be over 18 to administer medication.All medications shall be stored in original containers with physician or pharmacist directions. Labels should be intact and stored so they are inaccessible to children and public. Nonprescription medications shall be labeled with the child’s name.For every day an authorization for medication is in effect and child is in attendance, there shall be a notation of administration including the name of medicine, date, time, dosage, given or applied, and the initials of the person administering the medication or the reason the medication was not given.For ongoing, long term medications, authorization shall be obtained for a period not to exceed the duration of prescription.Staff shall not provide medications to a child if pre-service/orientation training for medication management has not been completed.
1. Medications present without current authorizations.
2. Expired medication present.

109.11(3)a: Center shall ensure that:Facility and premises are sanitary, safe, and hazard free.Sufficient lighting shall be provided.Sufficient ventilation.Sufficient heating.Sufficient cooling.Equipment placed in the program area is maintained so as not to result in injury to the children.
1. Items that should not be accessible to the children (plastic bags, miscellaneous choking hazards) are accessible in drawers in the toddler room.
2. Surfaces that are not considered non porous are being used for food service activities. Non porous material surfaces that is properly cleaned and sanitized immediately prior to the activity is required.
3. Choking hazards, scissors, batteries, etc. accessible in drawer in the nursery.
4. Food service area is not sanitary in the nursery. This area shall be free of clutter and shall be properly cleaned and sanitized immediately prior to use for any food or bottle service activity.
5. Diaper ointments accessible to children in the nursery in the diaper station cabinet that was not secured.

109.11(4)b Record of monthly inspections of outdoor recreation area and equipment shall be kept.
1. Playground inspections were not available for 1/2026 through 3/2026.

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

N/A

5. Special Notes/Recommendations

Targeted Assessment: Behavior Management
I discussed with (director) their oversight of behavior management related to helping childcare staff: 1) Understand expectations, 2) managing frustrations, 3) monitor performance.

CHILD CARE CENTER ANNUAL EVALUATION

The center director provided the following responses:
How do you help staff understand the expectation associated with behavior management?
All lead staff are trained in PBIS. We have some staff that are trained in Conscious Discipline as well. We do not use time-outs as discipline. We use a step-by-step problem-solving process:
1. Approach calmly and stop any unsafe or hurtful behavior
2. Acknowledge feelings ("You're feeling frustrated…")
3. Ask what happened and gather input
4. Restate the problem clearly
5. Brainstorm solutions together and agree on a plan
6. Support follow-through and offer praise for positive choices

How do you help staff recognize their frustration and respond with de-escalation?
At Hand in Hand, keeping everyone safe - physically and emotionally - is one of our highest priorities. That's why we've trained our staff in Safety-Care, a nationally recognized, evidence-based approach rooted in Positive Behavior Interventions and Supports (PBIS). Safety-Care helps staff:
• Build positive, supportive relationships
• Prevent behavioral challenges before they start
• Teach meaningful alternatives to unsafe behavior
• Safely and respectfully respond to crisis situations only when absolutely necessary
• Reflect on what happened to reduce the chance of it happening again
During orientation, each staff is trained to recognize their need to TAP OUT when they need a break or feel overwhelmed. Tapping out means that another staff member will take over with a situation so the original staff member and walk away, take a break, and deescalate. The lead for the classroom should be notified so that the staff and lead can have a conversation about what happened and what the next steps are.

How do you monitor these skills / expectations?
We have annual trainings in Safety care. Regular conversations are had with individual staff and teams of staff. Incident reports are tracked and there is a monthly meeting to discuss the reports. Lead teachers and the director have conversations about classroom behaviors and management to discuss any changes in routine, structure in schedule, classroom management, and layout need to be made. Additional trainings are assigned by the director or if a staff member feels they need a refresher training.

The center is reminded, again, regarding the updated rules regarding combining different age groupings of children and what is allowed and when. Two year old children may not be combined with four year old children and three year old children may not be combined with six year old children unless under the very specific rule 109.8(2)h for the very beginning and/or end of the day with only the number of children and staff present at the center as defined by the rule. The center will need to ensure compliance.

1. Improve cot spacing in the three year old room. Ensure at least two feet of space between cots.
2. Label diaper waste can in the preschool room for this material only.
3. Remove open containers of clothing stored in the restroom area of the preschool room.
4. Ensure menu showing all meals and snacks is current (dated) and is posted where visible for everyone and note any substitutions on the menu.
5. Ensure all open food items in the center, kitchen or otherwise, are stored in a sealed container or ziploc and dated for freshness. This has been noted previously.

The center will continue with a full license. Please address the violation(s) and/or concern(s) noted in the report so that corrections are obvious and ensure that items remain in compliance. This report does not require a written response. Thank you.

Date: 05/06/2026

HHS Licensing Consultant: Heidi Hungate

CHILD CARE CENTER ANNUAL EVALUATION

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**.