

11/15/2023

Rhonda Staker
300 N Church ST
Toledo, IA 52342

Dear Child Care Provider:

This letter is in regards to the compliance visit at your Registered Child Development Home A conducted on 11/14/2023. Iowa Code Chapter 237A and 441 Iowa Administrative Code, Chapter 110, describes specific requirements that must be met by a Registered Child Development Home. You are not a participant in the voluntary Quality Rating and Improvement System. The following areas were out of compliance at the time of the visit:

441 IAC 110.8(1)**Facility Requirements**

- 441 IAC 110.8(1)“ a” The home shall have a nonpay, working land-line or mobile telephone with emergency numbers posted for police, fire, ambulance, and the poison information center. The number for each child’s parent, for a responsible person who can be reached when the parent cannot, and for the child’s physician shall be written on paper and readily accessible by the telephone. The home must prominently display all emergency information, and all travel vehicles must have a paper copy of emergency parent contact information
- 441 IAC 110.8(1)“ b” Electrical wiring shall be maintained, and all accessible electrical outlets shall be tamper-resistant outlets or shall be safely capped. Electrical cords shall be properly used. Improper use includes running cords under rugs, over hooks, through door openings, or other use that has been known to be hazardous
- 441 IAC 110.8(1)“ h” The home shall have at least one single-station, battery-operated, UL-approved smoke detector in each child-occupied room and at the top of every stairway. Each smoke detector shall be installed according to manufacturer’s recommendations. The provider shall test each smoke detector monthly and keep a record of testing for inspection purposes
- 441 IAC 110.8(1)“ i” Smoking and the use of tobacco products shall be prohibited at all times in the home and in every vehicle in which children receiving care in the home are transported.
Smoking and the use of tobacco products shall be prohibited in the outdoor play area during the home’s hours of operation. Nonsmoking signs shall be posted at every entrance of the child care home and in every vehicle used to transport children.
All signs shall include:
 1. The telephone number for reporting complaints, and
 2. The Internet address of the department of public health (www.iowasmokefreeair.gov)
- 441 IAC 110.8(1)“ p” The provider shall have written policies regarding the care of mildly ill children and exclusion of children due to illness and shall inform parents of these policies.

441 IAC 110.8(1)“q” The provider shall have written policy and procedures for responding to health-related emergencies

441 IAC 110.8(3) Medications and Hazardous Materials

441 IAC 110.8(3)“a” All medicines and poisonous, toxic, or otherwise unsafe materials shall be secured from access by a child

441 IAC 110.8(3)“b” A first-aid kit shall be available and easily accessible whenever children are in the child development home, in the outdoor play area, in vehicles used to transport children, and on field trips. The kit shall be sufficient to address first aid related to minor injury or trauma and shall be stored in an area inaccessible to children. The kit shall, at a minimum, include adhesive bandages, bottled water, disposable tweezers, and disposable plastic gloves.

441 IAC 110.8(3)“c” Medications shall be given only with the parent's or doctor's written authorization. Each prescribed medication shall be accompanied by a physician's or pharmacist's direction. Both nonprescription and prescription medications shall be in the original container with directions intact and labeled with the child's name. All medications shall be stored properly and, when refrigeration is required, shall be stored in a separate, covered container so as to prevent contamination of food or other medications. All medications shall be stored so they are inaccessible to children. Any medication administered to a child shall be recorded, and the record shall indicate the name of the medication, the date and time of administration, and the amount given

441 IAC 110.8(4) Emergency Plans

441 IAC 110.8(4) “a” Fire and tornado drills shall be practiced monthly and the provider shall keep documentation evidencing compliance with monthly practice on file for the current year and the previous year.

441 IAC 110.8(4) “b” The provider must have procedures in place for the following:

1. evacuation to safely leave the facility
2. relocation to a common, safe location after the evacuation
3. shelter-in-place to take immediate shelter where you are when it is unsafe to leave that location due to the emergent issue
4. lock down protocol to protect children and providers from an external situation
5. communication plan and plans for reunification with families
6. continuity of operations plans
7. Procedures to address the needs of individual children, including those with functional or access needs

441 IAC 110.9 Files

441 IAC 110.9(1) A provider file is maintained and shall contain the following:

441 IAC 110.9(1)“a” A physician's examination report for the provider and all members of the provider's household aged 18 years or older. Acceptable physical examinations shall be documented on Form 470-5152, Child Care Provider Physical Examination Report. All children residing in the household must have medical documentation outlined in 110.9(4) “d”, 110.9(4) “f”, and 110.9(4) “g”

441 IAC 110.9(1)“b” (1) I-PoWeR records or certificates verifying required training completion:

Prior to registration:

- minimum health and safety training, approved by the Department, in required content areas
- Iowa's Mandatory Child Abuse Reporter Training

Prior to registration: First Aid and Cardiopulmonary resuscitation. Provider shall maintain a valid certificate indicating date of training and expiration date.

During each two year registration period, the provider shall receive a minimum of 24 hours of training from approved content areas. A provider shall not use a specific training or class to meet minimum continuing education requirements more than one time every five years

A provider who submits documentation from a child care resource and referral agency that the provider has completed the Iowa Program for Infant/Toddler Care (IA PITC), ChildNet, or Beyond Business Basics training series may use those hours to fulfill a maximum of two years' training requirements, not including first-aid and mandatory reporter training

441 IAC 110.9(1)"b"(2) Documentation from the department confirming the record checks required under 441 IAC 110.11(3) have been completed and authorizing or conditionally limiting the person's involvement with child care.

441 IAC 110.9(4) Children's Files. An individual file for each child shall be maintained and updated annually or when the provider becomes aware of changes. The file shall contain:

- 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.
- b. Emergency information including, at a minimum, where the parent can be reached, the name, street address, city and telephone number of the child's regular source of health care, and the name, telephone number, and relationship to the child of another adult available in case of emergency.
- c. A signed medical consent from the parent authorizing emergency treatment.
- d. An admission physical examination report signed by a licensed physician or designee in a clinic supervised by a licensed physician
 1. The date of the physical examination shall not be more than 12 months before the child's first day of attendance at the child development home.
 2. The written report shall include past health history, status of present health, allergies and restrictive conditions, and recommendations for continued care when necessary.
 3. For a child who is five years of age or older and enrolled in school, a statement of health status signed by the parent or legal guardian may be substituted for the physical examination report.
 4. The examination report or statement of health status shall be on file before the child's first day of care
- e. For children under the age of 6, a statement of health condition signed by a physician or designee submitted annually from the date of the admission physical. For a child who is enrolled in school, a statement of health status signed by the parent or legal guardian may be substituted for the physician statement.
- f. For each school-age child, on the first day of attendance, documentation of a physical examination that was completed at the time of school enrollment or since.
- g. A signed and dated immunization certificate provided by the state department of public health. For the school-age child, a copy of the most recent immunization record shall be acceptable.
- h. For any child with allergies, a written emergency plan in the case of an allergic reaction. A copy of this information shall accompany the child if the child leaves the premises.
- i. Documentation that is signed by the parent and names persons authorized to pick up the child. The authorization shall include the name, telephone number, and relationship of the authorized person to the child.
- j. Written permission from the parent for the child to attend activities away from the child development home.
- k. Injury report forms documenting injuries requiring first aid or medical care
- l. If the child meets the definition of homelessness as defined by section 725(2) of the McKinney-Vento Homeless Education Assistance Act, the family shall receive a 60-day grace period to obtain medical documentation.

Findings:

An annual compliance check was completed on 11/14/232 and the following was out of compliance:

441 IAC 110.8(1)“a” The number for each child’s parent, for a responsible person who can be reached when the parent cannot, and for the child’s physician shall be written on paper and readily accessible by the telephone. All travel vehicles must have a paper copy of emergency parent contact information.

Rhonda did not have this documentation in her home accessible by a phone or in her vehicle she uses to transport.

441 IAC 110.8(1)“b” All accessible electrical outlets shall be tamper-resistant outlets or shall be safely capped.

Not all were capped.

441 IAC 110.8(1)“h” The provider shall test each smoke detector monthly and keep a record of testing for inspection purposes.

Not all months were documented.

441 IAC 110.8(1)“i” Nonsmoking signs shall be posted at every entrance of the child care home and in every vehicle used to transport children.

She did not have a nonsmoking sign in her vehicle she does use to transport children.

441 IAC 110.8(1)“p” The provider shall have written policies regarding the care of mildly ill children and exclusion of children due to illness and shall inform parents of these policies. She did not have this policy.

441 IAC 110.8(1)“q” The provider shall have written policy and procedures for responding to health-related emergencies.

She did not have this policy.

441 IAC 110.8(3)“a” All medicines and poisonous, toxic, or otherwise unsafe materials shall be secured from access by a child.

Rhonda had some chemicals under both bathroom sinks that either need to be moved out of the reach of children or secured.

441 IAC 110.8(3)“b” The First aid kit shall, at a minimum, include adhesive bandages, bottled water, disposable tweezers, and disposable plastic gloves.

She did not have the water bottle

441 IAC 110.8(3)“c” Medications shall be given only with the parent’s or doctor’s written authorization. Each prescribed medication shall be accompanied by a physician’s or pharmacist’s direction. Both nonprescription and prescription medications shall be in the original container with directions intact and labeled with the child’s name. All medications shall be stored properly and, when refrigeration is required, shall be stored in a separate, covered container so as to prevent contamination of food or other medications. All medications shall be stored so they are inaccessible to children. Any medication administered to a child shall be recorded, and the record shall indicate the name of the medication, the date and time of administration, and the amount given.

We did discuss this and Rhonda did indicate at times she will give medications to her grandson but has not documented that as is required.

441 IAC 110.8(4) “a” Fire and tornado drills shall be practiced monthly and the provider shall keep documentation evidencing compliance with monthly practice on file for the current year and the previous year.

441 IAC 110.8(4) “b” The provider must have procedures in place for the following:

evacuation to safely leave the facility

relocation to a common, safe location after the evacuation

shelter-in-place to take immediate shelter where you are when it is unsafe to leave that location due to the emergent issue

lock down protocol to protect children and providers from an external situation

communication plan and plans for reunification with families

continuity of operations plans

Procedures to address the needs of individual children, including those with functional or access needs.

She did not have an emergency preparedness plan.

441 IAC 110.9(1)“a” A physician’s examination report for the provider and all members of the provider’s household

aged 18 years or older . Acceptable physical examinations shall be documented on Form 470-5152, Child Care Provider Physical Examination Report.

Rhonda did not have a physical exam for her husband.

Prior to registration:

minimum health and safety training, approved by the Department, in required content areas

Prior to registration: First Aid and Cardiopulmonary resuscitation. Provider shall maintain a valid certificate indicating date of training and expiration date.

Her First aid and CPR had expired.

441 IAC 110.9(1)“b”(2) Documentation from the department confirming the record checks required under 441 IAC 110.11(3) have been completed and authorizing or conditionally limiting the person's involvement with child care.

Rhonda did not have this.

441 IAC 110.9(4) Children's Files. An individual file for each child shall be maintained and updated annually or when the provider becomes aware of changes. The file shall contain:

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.

Emergency information including, at a minimum, where the parent can be reached, the name, street address, city and telephone number of the child's regular source of health care, and the name, telephone number, and relationship to the child of another adult available in case of emergency.

A signed medical consent from the parent authorizing emergency treatment.

An admission physical examination report signed by a licensed physician or designee in a clinic supervised by a licensed physician

The date of the physical examination shall not be more than 12 months before the child's first day of attendance at the child development home.

The written report shall include past health history, status of present health, allergies and restrictive conditions, and recommendations for continued care when necessary.

For a child who is five years of age or older and enrolled in school, a statement of health status signed by the parent or legal guardian may be substituted for the physical examination report.

The examination report or statement of health status shall be on file before the child's first day of care

For children under the age of 6, a statement of health condition signed by a physician or designee submitted annually from the date of the admission physical. For a child who is enrolled in school, a statement of health status signed by the parent or legal guardian may be substituted for the physician statement.

For each school-age child, on the first day of attendance, documentation of a physical examination that was completed at the time of school enrollment or since.

A signed and dated immunization certificate provided by the state department of public health. For the school-age child, a copy of the most recent immunization record shall be acceptable.

For any child with allergies, a written emergency plan in the case of an allergic reaction. A copy of this information shall accompany the child if the child leaves the premises.

Documentation list that is signed by the parent and names persons authorized to pick up the child. The authorization shall include the name, telephone number, and relationship of the authorized person to the child.

Written permission from the parent for the child to attend activities away from the child development home.

Injury report forms documenting injuries requiring first aid or medical care

If the child meets the definition of homelessness as defined by section 725(2) of the McKinney-Vento Homeless Education Assistance Act, the family shall receive a 60-day grace period to obtain medical documentation.

Rhonda did not have files for the children. She primarily watches her grandson and had an outdated physical for him and an immunization record but no other documentation. She also reported that at times she watches another family of children and did not have any files for them. This worker did review the documentation that is required and provided her copies of the necessary forms.

Suggestions/Recommendations:

Rhonda needs to have the number for each child's parent, a responsible person who can be reached when the parent cannot, and the child's physician written on paper and readily accessible by the telephone. She also needs to ensure all travel vehicles must have a paper copy of emergency parent contact information. This worker did provide her a form to use for this documentation.

Rhonda needs to ensure that all of her accessible outlets are capped.

Rhonda needs to test each smoke detector monthly and keep a record of testing for inspection purposes.

Rhonda needs to put a non-smoking sign in her vehicle she uses to transport children.

Rhonda needs to develop a written policies regarding the care of mildly ill children and exclusion of children due to illness and shall inform parents of these policies. Rhonda also needs to develop a written policy and procedures for responding to health-related emergencies.

This worker did discuss this area with her and provided her a template to use for such policies. Please send pictorial verification of this.

Rhonda needs to move the chemicals from under both bathroom sinks so they are out of the reach of children or secure those cabinets. - Please send pictorial verification of this when completed.

Rhonda needs to add a water bottle to her First aid kit.

If Rhonda gives medications to children in care she needs to ensure she is documenting that accordingly and following all guidelines in this area.

Rhonda needs to ensure she is practicing and documenting her fire and tornado drills every month. She was missing a few.

Rhonda needs to have an emergency preparedness plan. This worker did note that I can reach out to her CCR&R support to assist her in this area. Please send pictorial verification of this when completed.

Rhonda needs to obtain a physical for her husband on the HHS approved form

Rhonda needs to obtain and updated First aid and CPR certificate and send pictorial verification to this worker.

Rhonda should try to find her documentation from the department confirming the record checks required under 441 IAC 110.11(3) have been completed and authorizing or conditionally limiting the person's involvement with child care. If she cannot locate it she needs to keep the one she receives at her next renewal.

Rhonda needs to work with the parents to ensure she has all the necessary documentation for each child's file, then work to maintain them accordingly.

Corrective Action Required:

A re-check is not needed at this time. Corrections need to be made by 12/5/23 and will be reviewed at the next annual compliance check. Please send pictorial verification of the specific items noted above.

I encourage you to work with Rachel Bonefas from Child Care Resource and Referral with any ongoing compliance or training needs.

Rachel can be reached at (563) 362-8225.

Thank you for your service in providing child care in your community.



Iowa Department of Health And Human Services

Kim Reynolds
Governor

Adam Gregg
Lt. Governor

Kelly K. Garcia
Director

Non-compliance with any of the mandated 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.

Please do not hesitate to contact me at DHS at 319-429-0749 or cweber@dhs.state.ia.us if you have any questions regarding this letter.

Sincerely,
Christine Weber

Social Worker II

Sheila Aunspach

Social Work Supervisor

Always Remember:

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 877-216-8481

As you plan your future trainings to meet your 24 hours of training requirement, please remember that you can access the approved training by going to http://www.dhs.state.ia.us/Consumers/Child_Care/Professional_Development.html

You may also access training at: <https://ccmis.dhs.state.ia.us/trainingregistry/>

All providers need to maintain compliance with rules set out in Iowa Administrative Code, Chapter 110, which includes: 441 IAC 110.5(1): Check with the appropriate authorities to determine how the following local, state, or federal laws apply to you: • Zoning code • Building code • Fire code • Business license • State and federal income tax • Unemployment insurance • Worker's Compensation • Minimum wage and hour requirements • OSHA • Americans with Disabilities Act (ADA).