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

Name of Center: The Wolverine Den Child Care Center **Enrollment:** 39 **License ID No. (Reapplications)** 18150

Street: 15 Second St North **City:** West Bend Iowa **Zip** 50597 **County:** Palo Alto

Mailing Address: PO Box 287, West Bend, IA, 50597

Director's Name: Breann Schnider **Phone Number:** 515-887-7777

On-Site Supervisor(s): **E-Mail:** theden@ncn.net

Date(s) of Visit: 01-03-2023

X **Licensing Visit** X **Unannounced Visit** **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: 04-06-2021

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	10	10	20	26	66
Summer					0

QRS Rating: N/A

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

Licensing Consultant: Raymond Salsbury **Date:** 01-04-2023

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

The center had been on a provisional license due to the director not meeting the requirements of the point scale. A provisional license agreement was made allowing Breann to attending on-going professional development, and time in position to meet the requirements. Documentation was provided and Breann is fully qualified at this time.

II. IDENTIFY THE AREAS OBSERVED ON THE VISIT:

An unannounced annual visit was made to The Wolverine Den Child Care Center on 01-3-22 where I met with Breann Schnider who took over the director role in September 2021. Breann was not fully qualified at that time and an agreement for provisional status was made while she attended on-going professional development and obtained additional time in position. Breann has completed those requirements and is now fully qualified. The program is operated out of the old St. Peter and Paul Catholic Elementary School building in West Bend. The center is operated separately from the school and church as a non-profit program overseen by a board of directors. No other services or programs are provided in the building during the hours when the center is in operation. The program provides daycare services to infants through school age children. There are currently 39 children enrolled in the program served by 8 staff. All aspects of the program subject to licensing standards were reviewed during this visit.

The physical structure and layout of the building and classrooms remain the same as in prior reports. The center is currently using three classrooms though additional rooms are available for expansion if needed. Each room has a large bank of windows along the exterior walls that provide natural light, a view of the outdoors, and serve as secondary emergency egress. Each room has a toilet and sinks located just off the programming space so that children do not need to leave the room. Additional toilets are located off the main hallway. Each room was observed to be clean. Maintenance had been provided over the holiday break and no issues were noted.

The infant room is divided into three areas through the use of tall cubical panels and low shelving units. The panel dividers create a sleeping area that has limited visibility, and the shelving units divide the remaining space into two areas for mobile and non-mobile infants. The issue of the obstructed view sleeping area has been identified in the past and the center has responded to this by placing a chair in a location where staff can fully observe the cribs and having a teacher sit in that location when children are sleeping. It has been reviewed that better options would be to replace the panels with a divider that is shorter or which can be seen through. The toys and materials in the room were appropriate to the ages of the children present. The toys and materials in the preschool and school age were generally appropriate and in good repair but both rooms contained "Happy Meal" toys that were provided as promotional items by commercial food vendors. Those toys are frequently manufactured where they are not subject to ASTM or CPSC standards and need to be removed and disposed of. Each classroom does have a daily schedule posted. A copy of the planned curriculum was present in the preschool room, but not the infant or school age rooms. It was reviewed that each classroom should have a planned curriculum which is posted where it would be available to parents. Supervision and engagement was generally good but some issues were observed. Each classroom was in ratio and staff were providing supervision in the rooms with some being very engaged with the children and others providing more observational supervision. During the visit there several instances of the school age children being allowed to leave the room unaccompanied such as going to the preschool room to obtain additional portions at lunch, and children going to lockers to retrieve or deposit items. Children must be within direct line of sight and sound of staff at all times.

Good health and safety practices were generally observed but some practices do need to be reviewed. I was able to observe a diaper change on the day of my visit and the staff did follow the posted procedure though they did not deglove between

handling soiled and clean items, and did not wash the infant's hands following the diaper change. The staff member identified they typically do not wash the children's hands unless they touch something during the change. It was reviewed that ever child must have their hands washed following each diaper change. In addition it was observed that staff with the school age children did have them wash their hands prior to going to get their lunch, but while the staff were plating the meal the children were instructed to sit on the floor negating the effect of having washed their hands, and then did not wash them again immediately prior to eating. the center does use an approved disinfectant for cleaning changing stations. Chemical cleaners, medications, personal items, and other things that could pose a safety risk to children were stored in areas where they were not accessible. Over the counter medications and sun screens are labeled with the name of the individual to whom it belongs. There were no children taking any medications on the day of my visit. There were no children with any diagnosed allergies but the center does have forms should it become necessary in the future. Several children did have identified preferences and these were noted. First aid kits are maintained in classrooms and contain materials necessary to address most common first aid needs. Safe sleep practices were observed during the time of my visit. While not rising to the level of being a concern at the time of visit a couple issues were identified which should be monitored. This included crib railings that had some minor play and will need to be tightened at some point. A couple crib sheets were observed to be pulling the edges of the crib mattresses due to the weave of the material having tightened up following laundering. These did loosen up and allowed the mattresses to lay flat but if they get to a point where the material will not relax enough to allow the mattress to lay flat they will need to be replaced.

Meals are contracted through the local adult care facility and brought into the center in coolers for hot/cold temperature holding. The center does have an electric roaster, and refrigerators to maintain hot and cold holding temperatures until meals are served. Refrigerators are present in each classroom. Thermometers were present in all refrigeration/freezer units as required. The center does maintain some food at the center and good food storage and handling practices were generally observed for both refrigerated and dry pantry items. Meals are served to the children pre-portioned and the staff do provide supervision at the tables. Good food handling practices were observed with the staff wearing food service gloves when plating meals and handling food. Measured scoops were used to ensure that each child received a full portion. While a copy of the January menu had not yet been provided prior menus do identify a good variety of nutritious meal options. The meal served on the day of the visit included a hamburger with no bun, corn, peaches, potato chips, and milk. While the potato chips are not credible, and a grain option was not present it was noted that staff did comment on this to each other suggesting that it is uncommon for a bun to not be included, and chips being provided.

The center playground was not reviewed during this visit due to snow cover but will be assessed at a later date any issues identified will be addressed with the center at that time. The center playground has a fenced area with climbing equipment, a paved basketball court, and a large open grassy area. Pea gravel is used for fall surfacing beneath climbing structures. Shade is provided by a covered sandbox area, and the climbing structure. The center has also made use of portable shade structures in the past.

All required notices were posted in an area readily accessible and visible to parents and visitors. Postings for emergency evacuation were present in all rooms. In reviewing administrative records the center does have a self-audit system for tracking required information for both child and staff files which were found to be accurate when compared to randomly selected files. in reviewing the child files 4 were identified as needing an updated annual physical. In reviewing employee files there were several significant issues identified. All but 1 file did not have documentation of an FBI Fingerprint Background check having been completed. Breann did have cards for all but two staff that were ready to be submitted and stated she wanted to send them all in at the same time. It was reviewed that these background checks are to be submitted prior to hire and that the center needed to provide confirmation that all have been submitted within the next two weeks. In addition all but 1 file needed documentation of Mandatory Child Abuse Reporter Training, 5 had not completed Essentials Of Child Care, and 3 needed a current physical. All staff also needed documentation of on-going professional development training. In reviewing required inspection logs and certificates all were current and available with the exception Radon testing.

III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:

The center has been working with the Child Care Resource and Referral agency in the past and Breann stated she would like to work with them to assist in completing training for all of her staff.

The center staff do have very strong relationships with the children and families they serve. As an example during the visit in the infant room a parent arrived with a child and Breann and the teachers were talking with the mother about the child. While the general focus of the conversation was with regard to the care needs of the child it was obvious that the relationship was also very much on a personal level beyond the professional caregiver role.

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

109.7(1): All staff(within first 3 months of employment)Two hours of approved training FOR the mandatory reporting of child abuse (MCART). At least one hour of training regarding universal precautions and infectious disease control.Certification in American Red Cross, American Heart Association, American Safety and Health institute or MEDIC First Aid infant, child, and adult cardiopulmonary resuscitation (CPR) OR equivalent certification approved by the department. A valid certificate indicating the date of training and expiration date shall be maintained.Certification in infant, child, and adult first aid that uses a nationally recognized curriculum or is received from a nationally recognized training organization including the American Red Cross,American Heart Association, American Safety and Health Institute or MEDIC First Aid or an equivalent certification approved by the department.A valid certificate indicating the date of training and expiration date shall be maintained.Minimum health and safety trainings, approved by the Department. If significant changes occur to content, the Department may require the training be renewed.
-- Documentation of MCART not present in 7 files. Documentation of Essentials of Child Care not present in 5 files.

109.7(2): Center directors and all staff have the required contact hours of training.
-- Documentation not present in 3 files.

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: 7

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: 3

109.10(1)a: Preschool (for children five years and younger not enrolled in school): Physical exam report submitted within 30 days of admission, was obtained no more than 12 months prior to admission, is signed by a licensed MD, DO, PA, or ARNP, and contains health history; present health status including allergies, medications, and acute/chronic conditions; and recommendations for continued care if necessary.
-- Number not in compliance: 4

109.10(16)a: The center and supervisor shall ensure that staff knows names and number of children assigned. Staff shall provide careful supervision.
-- Children were observed to be in the hallways unsupervised. Children must be within sight and sound of staff at all times.

109.11(7)b: Centers at ground level that use basement area as program space, or have a basement beneath program space: Testing and plan for remedy of radon is conducted.
-- Documentation not available of current radon testing results.

109.12(4): Sufficient toilet articles are provided for handwashing.Sufficient and safe indoor play equipment, materials, and furniture that conforms with CPSC or ASTM.Play equipment, materials, and furniture meet the developmental, activity, and special needs of the children.Room’s arrangement does not obstruct the direct observation of children.Individual covered mats, beds, or cots, and appropriate bedding is provided for all children who nap.Procedures are developed and implemented to maintain equipment and materials in a sanitary manner.Sufficient spacing is maintained between equipment to reduce transmission of disease and allow ease of movement by children and staff to respond to activities and care needs.Sanitary procedures are followed for use and storage of personal hygiene articles.
-- Toys provided as promotional items for food vendors do not meet ASTM or CPSC standards and need to be removed. When mobile barriers are used staff shall make use of installed gates, or move the barrier so that they are not stepping over closed barriers.

109.12(5)b: Infants diapered in a sanitary manner as needed in central diapering area.One changing table for every 15 infants/toddlers needing diaper changes.Diapering, sanitation, and handwashing procedures posted and implemented in central diapering area.
-- Staff did not deglove between handling soiled and clean diapers. Infant's hands were not washed following the diaper change.

V. SPECIAL NOTES/RECOMMENDATIONS:

A full license is recommended 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 following year.

*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.