

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

Name of Center: Mt. Pleasant Childcare Center **Enrollment:** 43 **License ID No. (Reapplications)** 51508

Street: 304 W. Washington St **City:** Mt. Pleasant **Iowa** **Zip** 52641 **County:** Henry

Mailing Address: 304 W Washington ST, Mount Pleasant, IA, 52641

Director's Name: Cairece Allen **Phone Number:** 319-348-1984

On-Site Supervisor(s): Ivet Rodriguez **E-Mail:** mpchildcare9@gmail.com

Date(s) of Visit:

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

LICENSING VISITS

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

Signed Application (470-0722) Received X **Yes** **No** **NA** **Date Signed:** 06-08-2023

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

Date Inspected: 07-02-2021

Comments : conducted by SFM Amy Fratzke due every 3 years

LICENSE TYPE: X **Child Care** **Preschool (ages 3-5 meets three hours or less per day)**

Financial Type: Profit X Non-Profit NA

Accreditation: 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	23	9	15	5	52
Summer					0

QRS Rating: N/A

RECOMMENDATION FOR LICENSE:	
	FULL license from
X	PROVISIONAL license from 08-01-2023 to 08-01-2024
	DENIAL of initial application
	SUSPENSION of license
	REVOCATION of license

Licensing Consultant: Jill Seibert

Date: 07-03-2023

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

CCR&R Consultant Jodi Norton met with the Director on 8/8/22 to develop a Corrective Action Plan on several violations.

1. 109.6(6)d: Center repeats national criminal history checks at a minimum of every four years or when aware of additional history that occurs. On the day of the visit prints had been rolled but not sent off. Two staff have been hired in May 2023 and fingerprints not yet sent off. (currently corrected, ongoing correction required)

2.. 109.10(16)a: The center and supervisor shall ensure that staff knows names and number of children assigned. Staff shall provide careful supervision. A technical referral was made to CCR&R regarding supervision issues in March 2022, but administration reported supervision had drastically improved for 3 months. Another technical referral was made to CCR&R again in July after reported concerns. Another supervision concern was reported in August 2022. On 8/8/22 OSS Cheyenne S. left an ill child unattended in the front common area of the building. Cheyenne S. chose to leave employment after being interviewed about the incident by other DHS personnel. CCR&R Consultant visited the center on 8/18/22. She advised the center take a specific training on supervision entitled Supervision training from Better Kid Care- Where Do I Stand?. She reported, "It may be an excellent place for the staff to start considering the layout of the program and playground could lead to supervision issues." The center had a parent complain of a one year old child with bruising in September 2022, no incident report present.

Again in September 2022 supervision and incident reporting were accepted complaints. Other DHS personnel and DHS Licensing concluded a one year child had a mark that was not reported by staff to the parent of the child

Staff have been trained on active and safe supervision techniques and are aware they are to have eyes on each child indoors and outdoors. Children cannot be left alone or unattended.

In May 2023 a two year old child was left in the restroom on the toilet for 45 minutes. Again in June 2023 a 4 year old child was left unattended. for at least 20 minutes in the bathroom. Consistent monitoring of classrooms and coaching will be required to reinforce safe supervision practices are in place.

All issues above have been clearly addressed by the Department, Child Care Resource and Referral Consultant Norton and Iowa Department of Public Health Child Care Nurse Consultant Toni Krana. Consultation, training and information have been provided and supports will continue to be in place for the duration of the provisional licensing period. Service providers and HHS will continue to support and consult the center in efforts to maintain long term compliance. It is the center's responsibility to ensure the plans set forth to make corrections are enacted. The Director has given clear direction to staff and parents regarding both center and DHS policies. All parties agree clear communication from Administration has helped the center maintain rule and establish routine and practice. The center agrees that supervision issues should be clearly corrected and long term visible results will be apparent by 12/1/2023. Consultant Jodi Norton is visiting the center every other week providing services attempting to assist the program to move from Provisional Licensing status. The board, HHS, CCNC and CCR&R are meeting in July to discuss next steps regarding Corrective Action.

II. IDENTIFY THE AREAS OBSERVED ON THE VISIT:

Mount Pleasant ChildCare Center opened in July 2021. It is located on the edge of downtown Mt. Pleasant in a business/

housing district. The center is housed in a one story former commercial building on a busy street in Mt. Pleasant. The Director originally hired for this position is no longer with the program. The second director hired for this program resigned and her last day was June 17th, 2022.. At that time the center on-site Supervisor, Cairece Allen, was appointed as the interim Director until the Board of Directors is able to hire another Director. She was hired in August 2022 as the full time Director. Director Allen has been employed at the center since it's inception as staff and then On Site Supervisor. Director Allen holds a BA in Criminal Justice and over 70 hours of child care related professional development training. She has 8 years of experience in child care. Ivet Rodriguez was appointed on site supervisor in March 2023. She has a BA in Psychology and has worked at the center since October. This facility offers full day child care. It is governed by a Board of Directors. The Mount Pleasant Area Chamber Alliance supports this center and provides guidance.

Unannounced off year visit to the center on 3/11/22, a complaint visit in July 2022 and other DHS personnel visited the center 8/11/22 on a separate complaint. Another visit was made to the program on 3/8/23 for a regular licensing with several violations found. This worker held this report in order for the center to make corrections. However, on 5/8/23 another visit was required due to a supervision complaint. Frequent email and phone consultation has occurred the past two years since the center opened.

Center Nutrition:

The center has a large kitchen. They participate in the CACFP program. Menus are available and meet requirements. Food storage met safe food storage guidelines. No expired food items were expired or stored on the floor. Each refrigeration and freezer unit contained thermometers. All opened food items or liquids were stored in sealed bags or containers. An OSS, or the Director should visit each classroom and monitor and/or train staff on CACFP. Food allergies should be posted. Diet modification forms and allergy action plans are not present on all children with allergies.

Center Health and Safety:

Primary care groups are implemented in each classroom. Ratio was met and maintained throughout the visit. Staff should know how many children they were supervising. A camera system is utilized. A technical referral was made to CCR&R regarding supervision issues in March 2022, but administration reported supervision had drastically improved for 3 months. Another technical referral was made to CCR&R again in July after reported concerns. Another supervision concern was reported in August 2022 and another in May 2023.

The program contains separate rooms for infants, toddler, twos, threes and fours. Restrooms are in a central location in the middle of the building. It contains 6 toilets. The center is in compliance with the rule of 1 restroom for every 15 children counted in capacity. Each center room has a capacity sign so staff know how many children can be present in each room at one time. The center contains a moderate sized kitchen and office.

Rooms may be modified/switched or repurposed to fit different ages/needs of children and center growth in the future. CCNC or CCR&R should be consulted in these matters as well as DHS.

Radon testing is up to date. It is required every 2 years. Testing should be conducted in the winter months when the ground is frozen. The center is compliant with UL approved plug in carbon monoxide detectors on opposite ends of the building. The center does contain fuel burning appliances. An approved fuel burning appliances inspection is due annually. The initial inspection was not approved. A second inspection was later conducted and approved. The center had to close a day this summer due to the AC not working correctly.

Emergency medication as well as regular medication had pharmacy labels intact. Storage and documentation for such met rule. First Aid kits are inaccessible to children and contain products sufficient to administer first aid. Kits are taken outdoors with classrooms. A child with asthma does not have a Health Care Plan on file. CCNC Krana is working with the facility (August 2022) to secure the necessary documentation so that staff know how to respond in a health emergency. This child no longer attends the center. CCNC Krana covered special health plans and allergy action plans in May 2023.

The restroom has ventilation. Capacity for restrooms 1:15, classroom space (35 square feet of useable floor space per child) and outdoor play area (75 square feet of useable floor space) are met. Capacity and ratio signs are posted in each room.

All rooms should implement safe supervision practices to ensure careful supervision of each child is achieved at all times.

In May a newborn infant was being swaddled. This is not allowed. Coaching, instruction and services have been provided to the center on Safe Sleep regarding all matters of Safe Sleep.

Center Outdoor Play Area:

The center has an L shaped play area for older children on the side and back of the building. The center also has a separate play area for toddlers and infants on the side of the building. The Child Care Weather Watch is consulted when weather

conditions are questionable for outdoor play. The outdoor play inspection should be conducted and documented monthly. A latch on the gate was reported to the center contractor in August as it will not shut properly. Staff are aware and will ensure children do not exit the area through the gate.

Center Field Trips/Transportation:

Transportation and field trips are not provided by the center.

Center Administration:

Child files are reviewed annually including physicals, immunization and annual updates including emergency contacts, medical and dental information, pick up and field trip authorizations.. Allergy Action plans will be sent home with parents of every child that had allergies marked on physicals.

Staff files are reviewed annually including SING checks (every 2 years), fingerprints (every 4 years). Prior to staff starting on the floor fingerprints are obtained and sent off. During the interim period staff are able to get training hours and perform other duties in the center. Staff are mostly up to date on professional development hours, CPR/1st Aid training (all but 2), Mandatory Reporter training, physicals and Universal Precautions training. In an effort to keep updates current CCR&R and IDPH have been assisting the Director and OSS with ongoing tracking of requirements.

Discipline and behavior policies are clearly defined.

Curriculum or program structure developmentally appropriate and activities designed to the developmental level/needs of children served. Since inception curriculum has been an ongoing work, due to staff turnover and consistency. The center is meeting with CCR&R consistently and will continue to address this. They met on this topic in June. Creative Curriculum is utilized in each classroom. Lesson plans should be completed for the week ahead. A designated staff member should work with the staff on the lesson plans. CCR&R Consultant Jodi Norton has been providing consultation on this matter to the center the past year and prior to opening. The Director will ensure curriculum is implemented daily. This was also cited during the July visit but continued to be an issue in August. The Director indicated on 8/12/22 staff are following schedules and utilizing curriculum daily. The center has removed broken toys, etc to reduce clutter so they can focus on providing age appropriate curriculum. Jodi Norton visited again on 11/22/22 and helped staff with this process. She continues to do so in 2023.

DHS has encouraged the center to have a all staff take trainings prior to being in ratio in the rooms. The Director reports all staff get to job shadow prior to be in ratio in the rooms. The Director has an open door policy encouraging staff to approach her with potential issues so they can be immediately addressed. A points system is in place for employees regarding following center policy and DHS rules. Clear leadership roles have been assigned and staff are now aware of the chain of command. The Director is present on a daily basis and takes an active role in the center. CCR&R and DHS sent the new Director informational videos on the IPOWER system on 6/21/22.

All required postings are present such as No Smoking signage, DHS Licensing Consultant contact information, the Center License, and Mandatory Reporter posting.

Administration trains each staff on the center Emergency Preparedness Plan annually. Staff sign and date acknowledgement of such.

III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:

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

109.6(6)c: Center repeats Iowa record checks at a minimum of every two years or when aware of additional child abuse or criminal history that occurs.

109.6(6)d: Center repeats national criminal history checks at a minimum of every four years or when aware of additional history that occurs.

109.7(1): All staff(within first 3 months of employment)Two hours of approved training FOR the mandatory reporting of

child abuse. 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.

109.7(2): Center directors and all staff have the required contact hours of training.
Number not in compliance: 6

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.

109.11(7)c: All centers: Annual inspection prior to heating season of all fuel-burning appliances to reduce risk of carbon monoxide poisoning and shall install one carbon monoxide detector on each floor that conforms to UL Standard 2034.

109.9(2)g: Any child with allergies, a written emergency plan. Copy shall accompany child if they leave the premises.

V. SPECIAL NOTES/RECOMMENDATIONS:

This is an administrative change. In an effort to extend the maximum amount of time to the center to make corrections the first Provisional License has been extended from 8/1/22 to 8/1/23. The second Provisional License will begin on 8/1/23 and run to 8/1/24. Capacity for the building is decreased to 52. Hours are decreased from 5:30 a.m. to 6:00 a.m. and 6:00 pm to 5:30 pm.

Approval for a Provisional License

The Department may issue a provisional license at time of new application or renewal when the center does not sufficiently meet licensing laws and rules. In some instances, the child care consultant may request a corrective action plan, including timelines.

A provisional license may be in effect for up to one year. A provisional license may be renewed when a written plan to bring the center into compliance with the standard, giving specific dates for completion of work, are submitted to and approved by the Department. A center cannot receive a provisional license for more than two years in a row for being out of compliance with the same licensing standards.

When the center submits documentation or it can otherwise be verified that the center complies with the licensing regulations or standards, the license will be upgraded from a provisional to a full license status.

In addition, if a center is issued a license indicating it is fully in compliance with licensing requirements, but at a later date within the license period fails to be in compliance, the Department may reduce a license to a provisional status. Upon correction of the deficiencies and approval by the child care consultant, the provisional license may be upgraded to a full license.

Denial

The Department will deny a license on an initial or renewal application when:

The center does not comply with essential center licensing laws and rules in order to be considered for a provisional license.

The center is operating in a manner that the Department determines impairs the safety, health, or well-being of children in care.

A person subject to an evaluation has transgressions that merit prohibition of involvement with child care and of licensure, as determined by the Department. This may also include an individual affiliated with the center, such as an owner.

Information provided to the Department, either orally or in writing, or information contained in the center's files is shown to have been falsified by the provider or with the provider's knowledge.

The center is not able to obtain an approved State Fire Marshal's certificate or fails to comply in correcting or repairing any deficiencies in the time determined by the state fire marshal, or the State Fire Marshal determines the building is not safe for occupancy.

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Suspension and Revocation

The Department may act to suspend or revoke a license during the licensing year. The Department will suspend or revoke a license if corrective action has not been taken when:

The center does not comply with the licensing laws and rules and makes no substantial attempt to correct deficiencies.

The center is operating in a manner that the Department determines impairs the safety, health, or well-being of the children in care.

A person subject to an evaluation has transgressions that merit prohibition of involvement with child care and of licensure, as determined by the Department.

Information provided to the Department, either orally or in writing, or information contained in the center's files is shown to have been falsified by the provider or with the provider's knowledge.

The center is not able to obtain an approved State Fire Marshal's certificate or fails to comply in correcting or repairing any deficiencies in the time determined by the State Fire Marshal, or the State Fire Marshal determines the building is not safe for occupancy

*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.