Health and Human Services

Iowa Department of Health And Human Services

CHILD CARE CENTER ANNUAL EVALUATION

Name of Center: Little Tigers Childcare

Provider No.: 52807

Address: 151 E May St, Marengo, IA, 52307

County: Iowa

Director's Name: Taylor Snook

On-Site Supervisor: Madison Montross

Phone Number: 3197410103

E-Mail: tsnook@ivcsd.org lyunek@ivcsd.org

HHS Visit Date: 09/23/2025

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

Fire Inspection:

Date Inspected: 02/10/2025

Comments: performed every three years by DIAL, Inspector Kabala

Report Visit Type:

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

License Type:

- [X] Full
- [ ] Provisional

Quality initiative:

- [ ] Accrediation

Program Duration:

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

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HOURS:	*Year-round*	*School-Year*	*Summer Only*
Sunday			
Monday	6:00 AM to 6:00 PM		
Tuesday	6 to 6:00 PM		
Wednesday	6 to 6:00 PM		
Thursday	6 to 6:00 PM		
Friday	6 to 6:00 PM		
Saturday			

Program Population Served:

- [ ] Infant(0-<24 Months)
- [ ] Toddler
- [X] PreSchool
- [X] School Age
- [ ] All Ages

LICENSE CAPACITY	Infants	2 Years	Preschool	School-Aged	Capacity
General	20	20	40	30	110
Summer					0

1. Basic Overview

Little Tigers Childcare uses two classrooms. Taylor Snook is the director. The program is held in a school building providing childcare during the day for preschool students for three- and four-year-olds. The program also provides after care for preschool and school age children. The building is not specifically constructed for childcare, but rather is set up as a school. The building is in a residential area of Marengo. Iowa Valley District/ Elementary is the owner of this center. The program has the support of school administration.

Program Observations:

An unannounced licensing visit took place on 9/23/25. The Director was present. Director Snook meets the points required to be Director. She worked in another licensed center for two years prior to accepting this position. Madison Montross is the On Site Supervisor. Madison has worked in both a licensed center and an in home setting. A Director or OSS must be present throughout the day. All program areas were observed at the time of the visit and staff were actively providing childcare. The center is clean, bright, attractive and equipped with a satisfactory variety of new child sized furniture, equipment, toys, games, and activities for the children. The classrooms are self-contained.

Center Nutrition Practices Observed:

School staff prepare all meals. The snack menu was reviewed, but not all snacks had been recorded. Two components of approved foods must be provided at snack. Some lunch items do not meet CACFP requirements for three year olds. Some snack items do not meet requirements. This is not in compliance with CACFP requirements.

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Thermometers are present in refrigeration/ freezer units per requirements. One should be added to the milk cooler. Temperatures were below recommendations of 40 degrees or below for cooling and zero degrees or below for freezing temperatures.

One percent milk is served. The Director is aware CACFP approved foods must be served.

Center Health and Safety:

Children were observed in the classroom. Staff were actively engaged with the children's activities throughout the visit. If staff need a break, to run errands, etc.. classrooms would be are never left out of ratio. Staff reported they are always in ratio as an extra person is always present. We also toured the gymnasium. No safety hazards were identified.

All volunteers shall be at least 16 years of age. Volunteers must sign a form including information stating the volunteer has been informed of the volunteer's or substitute's responsibilities as a mandatory reporter. Volunteers should always be under the direct observation of staff. All volunteers and substitutes shall sign a statement indicating whether or not they have one of the following:
a. (1) Conviction of any law in any state or any record of founded child abuse or dependent adult abuse in any state.
(2) A communicable disease or other health concern that could pose a threat to the health, safety, or well being of the children.
b. (1) Complete form 595-136 DHS Criminal History Record Check, Form B
(2) Complete Form 470-0643, Request for Child Abuse Information.
(3) Sign a statement indicating the volunteer or substitute has been informed of the volunteer's or substitute's responsibilities as a mandatory reporter.

We reviewed emergency plans and drills for fire and tornado. Fire and tornado drills had been conducted and documented monthly. These are posted on the board in one classroom.

Staff keep personal belongings in cabinetry. Children do not have access to this area. The facility has no pets or plants accessible to children.

Sanitation policies and procedures were reviewed. Overall the building was clean. Sanitizers and disinfectants were reviewed with CCNC Lauderman. Both rooms should have soapy water. The cleaner being utilized has a 10 minute dwell time and requires rinsing. This is appropriate for childcare and should be used throughout the day. Restrooms were clean and contained an adequate amount of toileting supplies. Each restroom has ventilation as required. All food waste containers were covered. A separate waste container is used for soiled pull ups located in the restroom.

Children do not have access to the kitchen.

Within one year of being issued an initial or renewal license, centers operating in facilities built prior to 1978 shall conduct a visual assessment for lead hazards that exist in the form of peeling, cracking or chipping paint or painted surfaces in need of repair. If these lead hazards are found, it shall be assumed that lead-based paint is present on the surfaces, and the surfaces shall be repaired by an Iowa certified lead-safe renovator before a full license will be issued. The school was constructed after 1978 making it exempt from lead based paint assessments. The program building contains no fuel burning appliances, therefore requires no fuel burning appliances inspections.

Within one year of being issued an initial or renewal license, centers operating in facilities that are at ground level, use a basement area as program space, or have a basement beneath the program area shall have radon testing following the National Consensus Standards as outlined in 641—Chapter 43. Radon testing results were available the date of the visit and below 4 pci/L.

HHS encourages active supervision by breaking the children into assigned groups to a specific staff members. Several suggestions to implement this practice were discussed on the visit.

Center Playground:

The center has a fenced outdoor play area specifically designed for preschool age children. Each child should have a minimum of 75 square feet of space for gross motor activities. Capacity for the area should not be exceeded. The center's

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playground has fencing. There should be no blind spots outdoors so that children can be observed at all times. No blind spots were observed the date of the visit. The are lacks natural shade. The Child Care Weather watch is utilized when outdoor play may be questionable due to weather conditions. Playground inspections were conducted and documented monthly.

Center Transportation Arrangements/Field Trips:

The center has not yet provided transportation. Should they decide to in the future each parent must sign a field trip permission form prior to the trip. A list of child emergency numbers, emergency medications and a first aid kit should be taken each trip.

Center Administrative Records:

Regulations regarding required notices and postings were reviewed by CCNC and HHS. Emergency procedures maps are posted by each door, but these are school wide postings. A schedule is posted in the classrooms. A No Smoking sign is posted inside the main door where parents drop off and pick up children. Emergency numbers are posted including, Fire, Ambulance and Poison Control, mandatory reporter information, as well as the HHS Consultant posting. A copy of Comm 204 isbe present so staff and the Director can refer to it when necessary.

The center had a posting for communicable diseases the date of the visit. Curriculum is implemented daily and lesson plans are on file. Child misbehavior is addressed by positive reinforcement of appropriate behavior, redirection, modeling, and conflict resolution techniques. Required written policies are provided to parents in the form of a parent handbook.

Staff files will be reviewed annually or more often by HHS. Staff files were available the date of the visit and were accessible for the licensing visit. Staff must have CPR, 1st aid, Mandatory child abuse training, universal precautions upon hire, continuing education and professional development hours (due annually). All staff should have updated physicals. These are due every three years. Fingerprints on all staff are mandatory and then due every four years and Iowa Criminal Record checks (2 years). All staff files were present for review.

Child files will be reviewed annually or more often by HHS. Child files were available the date of the visit and provided by the Director. She had a tracking sheet and a system in place to ensure all documentation will be gathered in the future. All children should have current physicals and immunizations on file. All children should have signed medical and dental information, pick up authorizations and emergency contact information.

Annual staff training held on emergency plans should be conducted on the emergency preparedness plan. The plan is present, and specific to the childcare and has been signed and dated by all staff acknowledging training of such.

2. Identify Observed Strengths of the program

The program meets a need in the community.

3. Identify the aspects that fall below the standard

109.9(2)h: Signed and dated valid Certificate of Immunization, Certificate of Immunization Exemption, or Provisional Certificate of Immunization, provided by the department must be on file for each child enrolled as required by Iowa Administrative Code 641—7.

109.13(1 and 2): Center shall serve each child a full, nutritionally balanced meal as defined by CACFP guidelines.Staff shall provide supervision at table during snacks and meals.Children at center two hours or longer shall be offered food of not less than two hours and no more than three hours apart unless child is asleep.Menus shall be made available to parents and kept

on file with substitutions noted.Avoid foods with high incident rate of causing choking.

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

5. Special Notes/Recommendations

***This is an administrative change noting an increase in capacity. The before and after school program has increased by ten. A modular building has been added for two year olds and under.

The center will continue in full licensing status. The center is directed to correct violations and maintain compliance throughout the year. It is important to note, all HHS licensing standards and procedures must be maintained during the renewal period. The Director indicated she would continue to work with parents to get immunization cards and physicals. She agreed to improve menu items and keep a current menu.

IHHS recommends the center consult with Child Care Resource and Referral on a continual basis. They offer centers assistance with meeting the HHS regulations, IQ4K, infant/toddler concerns, room arrangement and environment, developmental concerns, Best Practice information, CDA assistance, or any questions or concerns you may have. Please visit the following website for more information: http://www.iowaccrr.org/who_we_are/region_5. CCR&R can make many suggestions and help implement changes.

The program worked with CCR&R and IDPH prior to opening. This is evident with the low number of violations upon opening. Consultant Malia Love reported the following:

Hello,
Below is the TA provided the Little Tigers Childcare in Marengo.

7/28/2025-On site, did a walk-through of the space, discussed postings and requirements, went over SING and background checks. Went over paperwork and provided resources.

8/4/2025-Emai, assistance with i-Power and Moodle accounts provided a TA document for both.

8/6/2025-Email,Answered questions about FieldPrint for fingerprinting

8/7/2025-Phone, Answered questions about uploading documents into i-power, went over initial permission to open items still needed, and discussed CCA. I also referred them to speak with the CCNC Mandi about cleaning products and health and safety items.

8/13/2025-On site, I met with the program director and we went through the HHS licensing checklist for the program, reviewed staff files and the child files they currently have. We discussed the items she still needed to get into place for her initial permission to open. We did a walk through of the play space and then reviewed a couple staff i-Power profiles to look over potential points for on site supervisor roles. While there I sent her fillable child file forms, all of the staff file forms, and a couple of the missing postings that she needed.

8/20/2025-Phone,I spoke with the program about initial permission to open, the oss and having a back up oss. We went over i-power and how to have staff do their own role requests.

9/4/2025-On site, I met with the program and did a walk through of the two classrooms now that children are present. We discussed how things were going and about staff files, and child files. The program was feeling confident that they had everything.

9/15/2025-Emai, provided program with contact information to get their program name updated in i-Power and with HHS

9/17/2025- On site, discussed CCA issues and getting the program their own EIN number. We also went over the staff CCA

pilot program and how that worked.

9/24/2025-Followed up with program after licensing visit to let them know about age mixing and ratios should they wish to include 2 year olds in their program.

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Serving 19 Counties

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IHHS encourages you to contact your local nurse consultant with IDPH on a continual basis. Child Care Nurse Consultants work with child care and early education businesses. Businesses may call or send questions to a child care nurse consultant about health and safety policies, health programs, health of personnel, and specific child health or safety issues. The center Child Care Nurse Consultant is Mandi Lauderman. She stated the following, "I visited and met with Taylor on Thursday, August 14. I provided her with a folder of HCCI resources that I always give to new programs. We discussed several things, including their medication administration policy, emergency medications and emergency drills, injury prevention items in both the classroom space and the outdoor play space. We also discussed cleaning, sanitizing, and disinfecting. I advised the program to have something in their policy that all diaper creams have a note from the physician, since there are so many versions that can be purchased over the counter that state they are medicated. We briefly discussed child health records. She stated she is also working with Malia. I stressed the importance of ratio and supervision at all times, and the need to consider visual ability as they set up their room. We had a lengthy visit. I'm sure there were other things we discussed. Taylor seems very receptive to working with both the CCNC's and CCR&R. I encouraged her to reach out with any additional questions and hope to make a follow up visit mid to late October once we have completed all of our audits". CCNC's also send monthly emails "Quality Care For Kids".

Date: 10/15/2026

HHS Licensing Consultant: Jill Seibert

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**.