



Iowa Department of Human Services

Kim Reynolds
Governor

Adam Gregg
Lt. Governor

Kelly K. Garcia
Director

04/09/2019

Ornette Cratton
705 S Central AVE
Burlington, IA 52601

Dear Child Care Provider:

This letter is in regards to the compliance visit at your Registered Child Development Home A conducted on 04/09/2019. 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 110.7 **Provider Requirements**

441 IAC 110.8 Standards. Conditions in the home are safe, sanitary, and free of hazards.

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)“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)“k” A provider operating in a facility built before 1960 shall assess and control lead hazards before being issued an initial child development home registration or a renewal of the registration. To comply with this requirement, the provider shall:

1. Conduct a visual assessment of the facility for lead hazards that exist in the form of peeling or chipping paint;
2. Apply interim controls on any chipping or peeling paint found, using lead-safe work methods in accordance with and as defined by department of public health rules at 641—Chapters 69 and 70, unless a certified inspector as defined in 641—Chapter 70 determines that the paint is not lead-based paint; and
3. Submit Form 470-4755, Lead Assessment and Control, as verification of the visual assessment and completion of interim controls, if necessary.

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(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 110.9

Files

441 IAC 110.9(1)

A provider file is maintained and shall contain the following:

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. 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 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 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. A 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.
- j. Written permission from the parent for the child to attend activities away from the child development home. The permission shall include:
 1. Times of departure and arrival.
 2. Destination.
 3. Persons who will be responsible for the child
- 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:

Ornette needs to update her emergency contact sheet for her daycare children.

Ornette needs to practice her monthly fire and tornado drills with her daycare children and test her smoke detectors on a monthly basis and document when this has occurred. Data is missing for October through December 2018 and all of 2019.

This worker observed what appeared to be cracking and peeling lead based paint on the exterior painted walls of Ornette's covered entry way/front step area of her home. Ornette will need to apply lead abatement procedures and complete a new Lead Paint self assessment form when completed that documents this work.

Ornette needs to place all chemicals and items present in her bathroom area that are labeled "Keep Out of Reach of Children" in a child locked or inaccessible area.

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. Need for M.D.

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. Need for M.D., H.H., S.H.

A signed medical consent from the parent authorizing emergency treatment. Need for M.D., H.H., S.H., Z.H., D.H., M.H., A.H.

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. Need physical for H.H., S.H.,

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. Need school-aged health status form for M.D.

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. Need enrollment physical for M.D.

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. Need for M.D., S.H.

A 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. Need for M.D., H.H., S.H.

Written permission from the parent for the child to attend activities away from the child development home. Need for M.D., H.H., S.H.

Suggestions for Improvement:

Recommendation:

Based on the items out of compliance listed above, you will be required to have a recheck or follow up visit to your home either on or after 5/29/19.

[] Is the recommendation to terminate a provider agreement or revoke a registration?

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.

Based on the items out of compliance listed above, you will be required to have a recheck or follow up visit to your home.

Please do not hesitate to contact me at DHS at (319) 208-5521/creckli@dhs.state.ia.us if you have any questions regarding this letter.

Sincerely,

Chad Reckling

Social Worker II

Machelle Pezley

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 563-324-3236

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).