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

Name of Center: Garner Community Christian Child Care **Enrollment:** 40 **License ID No. (Reapplications)** 48449

Street: 580 E US HWY 18 **City:** Garner Iowa **Zip** 50438 **County:** Hancock

Mailing Address: PO Box 84, Garner, IA, 50438

Director's Name: Cara Fish **Phone Number:** 641-925-1270

On-Site Supervisor(s): **E-Mail:** kidsgc4@gmail.com

Date(s) of Visit: 02-24-2023

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

LICENSING VISITS

New Application **Re-Application** X **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: 11-17-2020

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	14		19		33
Summer					0

QRS Rating: 3

RECOMMENDATION FOR LICENSE:	
X	**FULL** license from 03-01-2022 to 03-01-2024
	PROVISIONAL license from
	DENIAL of initial application
	SUSPENSION of license
	REVOCATION of license

Licensing Consultant: Raymond Salsbury **Date:** 03-01-2023

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

NA

II. IDENTIFY THE AREAS OBSERVED ON THE VISIT:

An unannounced annual visit was made to the Garner Community Christian Child Care center on 02-24-23 where met with the center director, Cara Fish. Cara is well qualified for the position with a Bachelor degree in education, extensive experience, and on-going professional development. The program is located in the Evangelical Free Church in Garner but is operated as a non-profit center overseen by a separate board of directors. The building is an open multiple use facility that has had other programs in operation when the daycare is operating but none were present on the day of my visit. While those programs do have access to common areas such as restrooms and hallways that are also used by the daycare the staff do ensure that there is separation so that there is no intrusion into the programming classrooms, and that the daycare children are supervised at all times. The program provides daycare services to infants through school age children. There are currently 40 children enrolled in the program served by 10 staff. All aspects of the center subject to licensing standards were reviewed.

The general layout of the building and classrooms remains the same as in prior visits. The program is currently making use of three classrooms but has the option to expand into other rooms of the center. Each classroom was observed to be clean with no concerns related to maintenance or design. The infant, 2 year old room, and the room being used as an office have direct secondary egress to the outdoors. The preschool room has multiple exits opening onto the main corridor with one exit that is next to an exterior exit. Each exit was clear of obstruction and opened easily and freely. The preschool room has a folding curtain divider that can be used to separate the space into two rooms but which is generally left open. The two year old room has a counter unit with a wall mounted gate that defines the main programming space from a changing area and bathroom access. Each room either has windows in the egress doors, or installed in the exterior walls that provide natural light and a view of the outdoors. All windows are sealed units that do not open. There is a pass-through restroom between the infant and toddler rooms, and additional restrooms for the preschool classroom are located off the main hallway. A sink is also available in the infant room to facilitate food and bottle preparation.

Each room has an open floor plan with toys and materials arranged along the walls so that there are no blind areas. A good variety of toys and materials present in each classroom with increasing variety for the rooms for the older children. The toys and materials that were present were observed to be in good repair and appropriate to the ages of the children present. The each classroom had a daily schedule and curriculum posted. The general curriculum varies by room and the staff do identify specific activity options throughout the day to support the curriculum. Good interactions were observed in all classrooms with the teachers attending to the children's needs or implementing the planned curriculum. As an example the teacher in the 2-3 year old classroom was engaged in a large group activity of reading to the children, and as she observed they became less interested in the book moved to engaging in a center play activity of the children's choice. Good behavior management techniques were observed during the visit. Some teachers made strong use of proactive techniques such as guided problem solving, and giving the children options to choose from. Others used more response based approaches of giving warnings, and redirecting children to appropriate options.

Good health and safety policies are in place but some practices do need to be reviewed. During the visit I was able to observe a diaper change in which the staff did not de-glove between handling soiled and clean materials, did not wash the child hands following the diaper change, and did not clean and disinfect the changing station following the diaper change

nor had they done so prior to beginning the diaper change. The center also needs to ensure that separate trash containers are present for use with diapers, and other trash. The center uses a hydrogen peroxide based product to disinfect surfaces. When reviewing the product label the required dwell time is 1 minute for most viral infections, 3 minutes for most bacterial, and 5 minutes for fungal infections. The staff do follow good practices with waiting for the children to be out of the immediate area before using chemical cleaners, and storing them in an area where they are not readily accessible. First aid kits were present and contained materials necessary to address most common first aid needs. Over the counter and prescription medications were properly labeled and stored. Required staff to child ratios were maintained in all classrooms. Good safe sleep practices were observed during the visit.

The program makes use of the church kitchen and meals are prepared on-site. Good food storage and handling practices were generally observed but there were a couple dry pantry items in the kitchen that were not properly stored in air tight sealable food grade containers after the original packaging seal had been broken. Meals are served in the classrooms and good food service practices were observed. The teachers did ensure the children washed their hands before eating. The teachers used food service gloves when handling food and plates. A menu is posted and the meal that was planned does meet CACFP guidelines.

The center has a small defined playground areas enclosed with chain link fencing, as well as access to a large open grassy area where the children can play. Some of the retention clips for the fence were missing allowing it to flex away from support posts which can create an entrapment risk and these need to be replaced. The center has obtained a few residential grade dramatic play sets and and small climbing structure. Fall surfacing is needed beneath the climbing structure, as well as increasing the fall zones. Cara did note that the center is moving forward with construction plans for a new center and as a result will not be renovating the current playground space. As a result the climbing structures that would require fall surfacing will be removed later in the spring. Support posts have been installed where an awning can be hung during the summer months for shade. The program does have access to the church sanctuary which is a large open space where seating can be moved to create a space where the children can engage in large motor activities and play when weather conditions do not allow for outdoor play.

In reviewing administrative records all required notices were present and posted in an area that was readily accessible to parents and visitors. The center does maintain self-audits of child and staff files and a random selection of both were reviewed and compared to the self-audits. The self audit for the child files was found to be accurate and identified 3 physicals needed to be renewed. One other issue that was noted in child records was with regard to infant daily sheets. The center does use the ProCare system which does include a parental communication app. When reviewing past documentation staff were not logging daily activities, and were inconsistent in logging daily disposition. The required elements to be logged each day were reviewed and included that staff could use the photo option of the program to show activities and the children's mood. In reviewing staff files all were found to contain all required documentation. The center parent and staff handbooks were previously reviewed and all required policies were present.

III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:

The center does participate in the Quality Rating Scales program which seeks to implement best practice recommendations and has improved their standing so that they are now rated a 3 STAR program out of a possible 5 STAR scale.

The program is moving forward with plans to construct a new facility that will all them to have a dedicated space, and increase the capacity to serve additional children.

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

109.9(4): Daily written records are maintained for each child under two years of age and include time periods slept, amount of/time food consumed, time/irregularities of elimination patterns, general disposition, and general summary of activities.
-- Logs did not include information on daily activities. Documentation of daily disposition was inconsistent with information present for some days, but not others.

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, Chiropractor 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: 3

109.11(3)a: Center shall ensure that: Facility and premises are sanitary, safe, and hazard free. Adequate indoor and outdoor space is provided. The outdoor area shall include safe play equipment and area of shade. Sufficient space provided for dining. Sufficient lighting shall be provided. Sufficient ventilation. Sufficient heating. sufficient cooling. Sufficient bathroom and diapering facilities. Equipment, including kitchen appliances, are maintained so as not to result in

burns, shock, or injury to children. Sanitation and safety procedures for the center are developed and implemented to reduce risk or injury or harm to children and reduce transmission of disease.
-- The outdoor playground is not safe. Missing fence retention clips need to be replaced. Toys that require fall surfacing shall be removed from use.

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 de-glove between handling soiled and clean materials. Children's hands were not washed following diapering. Changing stations were not cleaned and disinfected between changes.

V. SPECIAL NOTES/RECOMMENDATIONS:

A full license will remain in effect 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.