Iowa Department of Human Services

CHILD CARE CENTER COMPLAINT

Name of Center: Danville Early Learning Center **Enrollment:** 50 **License ID:** 38069

Street: 419 S Main ST **City:** Danville **IA** **Zip Code:** 52623 **County:** Des Moines

Mailing Address: 419 S Main ST

Mailing City: Danville **IA** **Zip Code:** 52623

Director's Name: Shawn Perkins **Center Phone Number:** 319-392-4627

On-Site Supervisors: LuAnn Walker **E-Mail Address:** luann.walker@danvillecsd.org

Date of Complaint: 03-17-2025 **Date of Visit:** 03-19-2025

[ ] Scheduled **[X]** Unannounced **[ ]** NA

[X] Non-Compliance with Regulations Found **[ ]** Compliance with Regulations Found

RECOMMENDATION FOR LICENSE

[X] NO CHANGES to licensing status recommended

[ ] PROVISIONAL license from **to**

[ ] SUSPENSION of License

[ ] REVOCATION of License

Complaint Details:

Did this complaint result in a serious injury? ☐ Yes ☒ No

Did this complaint result in a death to a child? ☐ Yes ☒ No

Summary of Complaint:

It is alleged that an unknown staff member at Danville Early Learning Center did not provide adequate supervision of a 4 year old resulting in another child (3 years old) touching his penis. There is no information staff were aware of the concern and then did not provide adequate supervision ongoing. The reporter has concerns with ratio being followed.

Licensing Rules Relevant to the Complaint:

109.8(2)b Combinations of age groupings for children between 3 and 5 years of age may be allowed with a staff of 1 to every 12 children.

109.10(16)a The center and supervisor shall ensure that staff knows names and number of children assigned. Staff shall provide careful supervision.

Inspection Findings:

The determination of this report was made by a review of practice at the center, a review of staff training records, observation of the program space, and statements given by parent of the child, childcare staff and administration.

This incident was self-reported by the program on 3/3/25. Shawn Perkins, Director contacted HHS reporting concerns from a parent regarding inappropriate sexual behavior with a preschool age boy. She indicated staff were questioned about this and had no knowledge of the incident.

HHS spoke with mother of the child. She indicated this occurred on 3/3/25. She indicated she emailed the director and asked for her to call so they could discuss the issue. She reported her main concern is the toddlers may have had time alone for this to happen. The child also told his mother a female did this and provided her name. She indicated the school verified there is a three-year-old female in the same room with the child who also attends the program. She indicated the superintendent interviewed the child. Mother reported the child did name a 3-year-old female child in the interview. She indicated the child disclosed it happened by a table and toys (which there is a table in the daycare room with toys near it).

Mother of the child indicated she was supposed to get a follow up action plan from the daycare on what they were going to do to prevent this from happening again. She reported the child was emotional and timid in going to daycare since this happened. She reported she has not heard back from anyone at daycare.

HHS conducted an unannounced complaint visit on 3/20/25. All staff present indicated they had no knowledge of inappropriate sexual activity occurring in the center. They indicated children are never left alone together. Staff did report the environment can be chaotic at times due to staff calling in frequently or not showing up to work as scheduled.

1. 109.10(16)a The center and supervisor shall ensure that staff knows names and number of children assigned. Staff shall provide careful supervision. No staff indicated they were aware that two preschool age children had inappropriate sexual contact with one another. NO VIOLATION

2. 1 09.8(2)b Combinations of age groupings for children between 3 and 5 years of age may be allowed with a staff of 1 to every 12 children. The day of the unannounced complaint visit children were combined ages two through school age. Children were at rest time laying on cots in the same classroom watching a screen. The lighting in the room was such that this worker could not clearly see all children. This is not permissible. VIOLATION

These issues were discussed with both OSS Walker and Director Perkins.

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Special Notes and Action Required:

HHS has repeatedly requested supervision groups be assigned and classroom students be broken down into smaller groups. This ensures each staff member is observing the children they are assigned to at all times. This also ensures all children are engaging in age-appropriate activities throughout the day. HHS requested the lighting in the room be turned up so that every child can be observed at all times. It is important that staff maintain clear visuals on each child.

HHS requested CCR&R visit the program on 3/4/25 after the program self-reported. CCR&R Consultant Tabitha Copeland provided the following information regarding the visit she conducted on 3/7/25:

This is a brief recap of our visit Friday and the information covered. During our visit you shared that the voluntarily program has reduced the number of children to ensure ratios can be met at all times but hat you are hoping that once you can hire reliable staff you hope to increase again.

Supervision: Currently your classes are utilizing direct care by having the children separated into groups in the rooms and each staff's group is on a white board at the front of the room. The staff is then in charge of doing name to face at transitions and throughout the day for their group. When visiting the PreK room that is generally 3-4 yr olds this could be seen on the board.

The room seems arranged in a way that if staff are actively engaged in groups and position themselves correctly would allow supervision. You stated only one child is allowed into the rest room at a time and staff are actively supervising restroom breaks to ensure this. I have attached some information on direct care, an article on what supervision is and supervision at a glance sheet to support staff in continuing to understand requirements. Please share them with staff and review them with them to ensure understanding of requirements as such practice gives them a chance to ask questions and reduces your program liability as a whole.

Policies that might be useful: As a general conversation we discussed the program having or updating their supervision policy to ensure staff understanding and follow through. Also discussed updating discipline policy as a precaution and to decrease liability as you plan to hire new people. Attached are the IQ4K guidance sheets on policies to assist you in thinking of things that might need to be addressed. I also attached the Sample Staff policy book available on CCRR site under center directors' resources

Discussion about connecting with BrightWheel CCC coach to see how the system could be used to reflect the supervision that is being done and the direct care methods used.

For reverence Supervision:
COM 204 pg. 60 " Be mindful that your first and foremost obligation is providing care and supervision to children. Therefore, the one staff person should remain actively involved with the children, and not be attending to duties such as cooking or doing general maintenance or cleaning"

PG 115 "Supervision: Adults should remain on the same level of the building as the children at all times. Because of the reduced activity levels and interaction among children and adults, you should take precautions to prevent the occurrence of sexual abuse. The opportunities for one adult to be left alone with children for an extended period of time should be limited."

Pg 120 Supervision during meals "Supervision: If appropriate to the age of the children served, staff are encouraged to sit at the table with the children in a family-style fashion and eat the same foods. Doing so not only provides for more prompt responses in the event of a choking emergency but also allows staff to prevent unsafe eating practices, such as children overstuffing their mouths, feeding each other, fighting over food, etc. In addition, meal times offer an opportunity to discuss exploration of new foods, engage children in social conversation, teach serving and eating techniques, and model appropriate table manners."

Training:
Recommendation that all staff take the Active Supervision training offered online April 1st at 630 pm or at the earliest time they can and complete the Take-back form for discussions later with director. Covers :Active supervision, name to face, and transition planning to ensure the safety of children throughout the day while at the program and when traveling away from the program.

To generally support Staff's annual training needs attached is the training schedule for Reg 5 and statewide along with a list of Anytime online trainings for your use.

We will connect in April for a visit to go over paperwork, site book, files and a HHS preparation walk through. I will email you the first week of April. Attached are some things that might be useful as you work on paperwork, files and other office things

Please let me know if you are in need of anything else.
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Consultant Copeland will visit the program again in upcoming weeks ensuring changes have been made with ratio and lighting.

Consultant's Signature: **Date:**

Jill Seibert 03-20-2025