Health and Human Services

Iowa Department of Health And Human Services

CHILD CARE CENTER ANNUAL EVALUATION

Name of Center: Newman Childcare & Preschool

Provider No.: 22029

Address: 2050 S McKinley, Mason City, IA, 50401

County: Cerro Gordo

Director's Name: Hillary Kehm

On-Site Supervisor: Nichol Ott - asst. dir, Shyanne Pyer- on-site supervisor

Phone Number: 6414230168

E-Mail: hkehm@newmancatholic.org

HHS Visit Date: 10/09/2026

Licensing Period: 12/01/2026 to 12/01/2028

Fire Inspection:

Date Inspected: 09/03/2024

Comments:

Report Visit Type:

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

License Type:

- [X] Full
- [ ] Provisional

Quality initiative:

Quality Rating: 3

- [ ] 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	6:00 AM to 6:00 PM		
Wednesday	6:00 AM to 6:00 PM		
Thursday	6:00 AM to 6:00 PM		
Friday	6:00 AM to 6:00 PM		
Saturday			

Program Population Served:

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

LICENSE CAPACITY	Infants	2 Years	Preschool	School-Aged	Capacity
General	37	18	199	70	324
Summer					0

1. Basic Overview

An unannounced annual visit was made to the Newman Childcare and Preschool on 10-09-26 where I met with center director Hillary Kehm. Hillary took over as the director in May 2024 and is well qualified for the position. Hillary has been with the center since 2017 serving as an assistant director, has a BA degree in psychology, and extensive on-going professional development training. Nichol Ott was appointed as the assistant director, and Shyanne Pyer the on-site supervisor and both are also well qualified for the positions based on there experience and training. This program is housed in a space that is adjoined to the Newman Catholic School in Mason City overseen by a board of directors and operated as a non-profit organization. The center provides full range daycare, and formal 3 and 4 year old preschool. There are approximately 205 children currently enrolled in the center served by 58 employees. All aspects of the program subject to licensing standards were reviewed during this visit.

The general layout and design of the center remains the same as in prior visits. The center makes use of 8 classrooms for the daycare which are determined primarily by age and designated by Color names. The program also makes use of 2 classroom spaces of the connecting wing of the main school building for the formal preschool programs. The infant area consists of 4 classroom spaces though all have a 3 wall design and are connected by open corridors. Three of the spaces have half walls that separate the programming space from areas with staff supplies and changing stations. The remaining classrooms of the daycare setting are individual rooms though they do share common restroom facilities, and two of the rooms are accessed by a connecting doorway from the other classrooms. Each of the rooms have a secondary exit providing direct access to the outdoors. All exits were observed to be clear of obstruction and opened freely. Each room has restroom facilities either located in the classroom or access to shared restroom facilities directly from the classroom. Each room has additional sinks in the classrooms to facilitate hand washing. Rooms with younger children also have changing stations located in the classrooms. With the exception of a divided infant room and the preschool rooms located in

the school building all of the rooms have windows that provide natural light, a view of the outdoors, and ventilation. Each room has a large open floor plan that is divided into activity centers though the placement of low shelves, furniture, and play structures which were arranged such that they do not create any blind areas. As part of the activity center arrangements the center had taken steps to stabilize shelving units either by attaching anchors, or buttressing against other structures.

2. Identify Observed Strengths of the program

Programming & Interaction:
The center uses the Creative Curriculum to develop lesson plans. Each classroom had a copy of the planned daily schedule and curriculum posted.
All staff were observed to be actively engaged with the children either presenting the planned curriculum activities, or attending to direct care needs.
The center behavior management approach is to make use of proactive methods of engagement with the children that recognize positive behaviors, review expected behavior, and redirection.
All staff were observed to be very positive in their interactions with the children using calm tones and positive messages.
Ratio was maintained in each classroom as required by age with at least 2 teachers present in each room. In issue that was noted is that teachers in one classroom did send children out to get a drink of water at a fountain in another classroom. While the children were still in the direct line of sight and sound of staff at all times there was no communication between the teachers letting them know that there was essentially a transfer of care, nor did the teacher step to the door where they could continue to watch the children. The children did return to the classroom without incident and while not rising to the level of being cited it does increase the risk of children being unaccounted for.

Health & Safety:
I was able to observe several diaper changes and changing procedures postings were needed by several stations. While staff generally followed good procedures it was noted that very young infants did not have their hands washed following diapering and the staff identified that was a common practice due to the difficulty of holding them at the sink. Options to ensure hand washing were reviewed.
Good cleaning practices were observed with staff using sanitizing products for tables and toys, and disinfecting products for changing stations in a manner that was consistent with the label directions.
The staff did wait for children to be out of the immediate area before using chemical cleaners.
Chemical cleaners, medications, personal belongings and other items that could pose a safety risk to children are stored in areas that are not readily accessible to the children.
First aid kits are maintained in each classroom and were generally limited in nature in supplies and needed to be replenished. Taken as a whole and including additional supplies in the office and for restocking the center does have the materials necessary to address most common first aid needs.
Safe Sleep practices were observed in the infant rooms for children under 1 year of age.
Older children make use of cots and during the visit it was noted that the center provides 2 blankets for each child one of which is used as a cot cover that can be removed and laundered as needed, and the other for children to cover with.
Good practices were observed for children lifting children to changing stations, cribs, and other equipment with staff in the very young infant area providing head and neck support.
The toys and equipment in each classroom were generally appropriate to the ages of the children present however one toy in one of the infant rooms did have small parts that could break off which would be a choking hazard. This was removed and staff were directed to review the remaining materials removing those items that could pose as a choking hazard from classrooms serving children under 3 years of age.
During the visit one handwashing sink was noted to have water temperatures that exceeded 120 deg. F at the spigot with just the hot water tap turned on. It was reviewed that this needed to be adjusted and Hillary did arrange for a maintenance technician to address that during the time of the visit. The temperature was measured to have been adjusted to within acceptable limits before the visit was concluded.

Nutrition:
The center uses the school kitchen but employs a separate cook and supplies for meal preparation.
Good food storage, handling, and preparation procedures were generally observed on the day of my visit. All foods were observed to be properly stored. Food is transported in hot/cold holding cafeteria carts in covered containers and staff wear gloves, and use measured scoops when serving.
The staff did not sit and eat with the children but did provide supervision at the table.
A copy of the planned menu was posted and the meal served was consistent with the planned menu.

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Playground:
The center has an attached playground which is more suited to the preschool age children, and also has access to the school playground area when not in use by the school for the school age children. While the school does have control over the school age playground the center does make use of that equipment and reports any damaged items to the school for repair and restrict children from using that element.
The preschool playground is maintained by the daycare and has two climbing structures, and a storage shed where additional toys and materials are stored. The climbing structures and equipment were observed to be in good repair.
Unitary foam fall surfacing is in place around climbing structures.
Shade is provided by a large awning.
The playground is enclosed by the building and fencing. Several retention clips that secure the fence to support posts were missing allowing the fence to flex out and away from the poles and the playground creating a significant entrapment risk that needs to be corrected.

Administration:
Required notices for No Smoking, License Certificate, Mandatory Abuse Reporting, and Consultant Contact information were posted in an area that was readily accessible and visible to all parents and visitors. Other required postings for emergency evacuation, emergency numbers, handwashing, daily schedule, and planned curriculum were also posted as required.
The center uses a combination of electronic and hard copy file maintenance systems, and does have a self-audit tracking system to maintain files which was found to be accurate when compared to randomly selected files. The selected files, and self-audit documentation showed the center records to be in substantial compliance.
All required inspection logs and certificates were available and current.
The parent handbook was reviewed and found to have several required policies that either needed to be added or expanded to ensure that all required elements were present.

3. Identify the aspects that fall below the standard

109.4(1): Written policies on: Enrollment and discharge. Field trips and non-center activities. Discipline/Behavior/Biting. Nutrition. Health and safety policies. Transportation if applicable. Assurance people do not have unauthorized access to children at the center. Protecting children's confidentiality.
-- Written policies need to be added or expanded to include all required elements are present for Health & Safety (immunization exemptions, response plans), Incident Reporting, Staff Orientation & Training, Access (sex offenders), Confidentiality, Emergency Plans (intoxicated/impaired individual).

109.11(4)a: Center must have safe outdoor program area adjacent to the center, with sufficient square footage to accommodate at least 30 percent of the enrollment capacity at any one time at 75 spear feet per child. Outdoor space must:Be free from litter and unsafe materials and free from contamination by the drainage or ponding of sewage or storm water.Include safe play equipment and an area of shade.Include fencing to protect from bodies of water or vehicular traffic.
-- The fencing that encloses the center had several retention clips used to connect the fence to the support posts missing which allowed the fence to flex away from the posts creating a significant entrapment risk and which need to be replaced.

109.12(4)b: Each infant and toddler shall be diapered in a sanitary manner as frequently as needed at a central diapering area. Diapering, sanitation, and hand-washing procedures shall be posted and implemented in every diapering area. There shall be at least one changing table for every 15 infants.
-- Young infants did not have their hands washed following diapering and staff identified this is common practice due to the difficulty of holding children at the sink. It was reviewed that all children must have their hands washed with soap and water following diapering and the option of using a soapy wetted paper towel was an acceptable alternative. It was clarified that use of diaper wipes is not acceptable due to not having an incorporated detergent. In addition several of the changing stations did not have the required diapering procedures postings present.

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

A list of required written policies with suggestions for implementation was provided to the center.

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The center did take immediate steps to correct the excessive hot water temperatures, and Hillary stated she would arrange for maintenance of the damaged fencing as well.

Requirements and options for infant hand washing were reviewed.

5. Special Notes/Recommendations

A full license is recommended 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 next year.

Date: 10/12/2026

HHS Licensing Consultant: Ray Salsbury

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**.