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

Name of Center: Pekin Child Care Center **Enrollment:** 130 **License ID No. (Reapplications)** 23277

Street: 1062 Birch Ave **City:** Packwood Iowa **Zip** 52580 **County:** Jefferson

Mailing Address: 1062 Birch Ave, Packwood, IA, 52580

Director's Name: Ashley Sieren **Phone Number:** 319-695-5127

On-Site Supervisor(s): Gina Swearingen **E-Mail:** ashley.sieren@pekincsd.org

Date(s) of Visit: 04-08-2025

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

LICENSING VISITS

New Application X **Re-Application** **NA**

Signed Application (470-0722) Received **Yes** X **No** **NA** **Date Signed:**

FIRE INSPECTION X **State** **Local** **NA** **Is Fire Inspection Approved?** X **Yes** **No** **NA**

Date Inspected: 11-13-2023

Comments : completed by State Fire Marshall Amy Fratzke, due every 3 years

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 X Other NA

Program Serves: X Infants (0-23 mo.) X 2 Years Preschool-Age X School-Age

Get-Well Evening Care X 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	36	10	40	50	136
Summer					0

QRS Rating: N/A

RECOMMENDATION FOR LICENSE:		
	FULL license from	
X	**PROVISIONAL** license from	05-01-2025 to 05-01-2026
	DENIAL of initial application	
	SUSPENSION of license	
	REVOCATION of license	

Licensing Consultant: Jill Seibert **Date:** 04-09-2025

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

The center will work with CCNCs and CCR&R Consultant on a plan to address each individual violation. Long term solutions should be implemented.

II. IDENTIFY THE AREAS OBSERVED ON THE VISIT:

Pekin Child Care Center has been in operation since 1992. They provide traditional child care, before and after school care, and preschool for approximately 150 children each year. The building is a single story sole occupancy next to an elementary/junior high/high school located in rural Packwood. A modular building has been added to the property which now houses infants only. Director Ashley Sieren was appointed Director in June 2022. She has an AA in Early Childhood Education from Indian Hills Community College and 20 years' experience in 2 rooms of the childcare prior to accepting the Director position. Gina Swearingen was director since the center's opening and is now the On Site Supervisor. Ms. Swearingen has 31 years of experience and a BS in Elementary Education with an Early Childhood Endorsement. Teresa Hixson, also fills in as onsite supervisor has 24 years at the center with a Child Care Technical certificate. Cheryl Deutschle was appointed as an additional OSS in 2021.

The program serves infant- school age children. The center offers 3 classes of the Statewide Voluntary Preschool Program. The center follows school district schedules with daycare available on school in-service days.

Approx. 30 infant/toddlers, 50 daycare, 40 preschooler, and 40 before/after school age enrolled at the center each year.

On 4/8/2024 all program space was observed on an unannounced licensing visit. The visit consisted of classroom and outdoor play area review and observations of activities, ratios, nutritional practices, health and safety practices, playground observation, field trip and transportation practices, and administrative review.

Center Nutrition:

The center kitchen was clean the day of the visit. Food was stored appropriately. Open food was in sealed containers. No expired food was noted. No food was stored on the floor. Thermometers are present in the freezer and refrigerator. Center menus indicate CACFP requirements are not being met. The Director is willing to learn CACFP requirements. However, food is provided by the school. Some school food requirements differ from CACFP requirements for childcare. Information has been provided on this topic in years past by Malia Love (CCR&R). Consultant Love provided information again this year on foods meeting guidelines.

Center Health and Safety:

A new building was added in 2018 serving infants ages 0-1. This building is set up to accommodate infants and may change year to year based on center needs. The day of the visit Safe Sleep practices were being followed. As children are dozing off or showing signs of sleepiness they should be moved to cribs. HHS encourages the center to observe sleep ques and place children in cribs. All staff have had Safe Sleep training and requirements have been covered for the past several years by HHS, IDPH and CCR&R.

Supervision and ratios were reviewed during the visit. In 2019 I asked the center to refine schedules, routines and curriculum so that transitions and other parts of the day are not chaotic. Staff should be assigned specific children to

supervise so that they are reasonably able to know the names and number of children assigned to their care. This has been discussed many times and for the past several years. The 2-5 year old childcare room is now divided in two. Twos and younger three year old children are to be on one side of the room and chidden ages 3-5 on the other side. Staff and administration reported this arrangement works better than the open space. However, this was not the case the date of the visit. Children ages 2 through 5 were combined. This was during nap time and right after.

Staff are to use walkie talkies to communicate when a child is using the restroom coming in from outdoors. The Director indicated this is the typical method or a staff will bring the child in. This could leave the outdoor play area out of ratio. Each and every time a child comes indoors, they must have supervision. The Director indicated she is available each day to intercept children and conduct a handoff from the staff. Malia Love covered this topic again with the center post the HHS visit to assure the center Director and staff are aware of supervision requirements.

Mandi Lauderman CCNC with Iowa Department of Publics Health performed Medications Administration training for the center onsite in March 2022. Medications have pharmacy labels intact and are kept out of the reach of children.

First aid kits are present and contain items to administer basic First Aid. All kits observed were labeled.

Radon testing should be conducted in winter months when the ground is frozen. It is due every five years. The center has conducted testing within the past 5 years with a reading below 4 pci/L.. The center does not contain fuel burning appliances. If they are added a fuel burning appliance inspection is required annually. The center contains carbon monoxide detectors. Ventilation and lighting is adequate.

We reviewed tornado and fire drills. These have been documented on a monthly basis, and documentation is present.

Allergy action plans should be in the rooms where staff can reference them in an emergency. The Director is aware all plans must be signed by parents and a physician. This was also addressed last year.

Center Outdoor Play Area:

A small playhouse is present in the preschool age play area. Staff sit right beside the playhouse in the doorway when children are playing inside the house. First aid kits are taken outdoors, as well as emergency medications. They added fencing in the grassy area 2 years ago.

Playground inspections should be performed and documented monthly. Staff utilize the Child Care Weather Watch to determine if outdoor play is suitable in varying weather conditions. If weather conditions meet standards children should be outdoors playing. CCNC Mandi Lauderman can provide more information on this topic or any other health or safety outdoor issue..

Center Field Trips:

The center goes to Richland library for field trips for school age kids. The school provides the transportation on a school bus. All students attending have signed field trip authorizations. Emergency contacts and medication as well as a First Aid kits are taken on each trip. Field trip ratios are followed. Classes sometimes go on walks around school campus, which is not considered a true field tip. Community members come to the center for presentations as well.

Center Administration:

All required postings were present including Mandatory Reporter information, DHS Center License, DHS Center Consultant Contact information and No Smoking signage. The center has a tracking system for staff and child files. They have less turnover than other centers. Administration feels this is due to center location.

Staff and child files are reviewed annually. Administration keeps detailed staff and child tracking sheets.

Administration is working with parents to secure updated child physicals. Immunization certificates will be reviewed by IDPH. Child files should have signed field trip authorizations and have annual updates on pick up authorizations, emergency contacts and dental and medical information.

Fingerprints (due every four years) and SING checks (every 2) were reviewed.. Professional Development training (Essentials), CPR/1st Aid, Mandatory Reporter training, staff physicals, fingerprints and SING checks are tracked and monitored by Ashley.

Sstaff have been trained on the Emergency Preparedness Plan. They have signed and dated acknowledgement of such. Any new staff must also be trained on the plan.

III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:

Four staff from the program are participating in the WAGES program.

Iowa IQPPS rates the facility.

Five members on a parent advisory board meet 4 times a year and help govern the center.

The center provides vision screening services to the children in cooperation with the local Lions Club.

The center provides hearing screening services to the children in cooperation with the local AEA.

The center has an Emergency Preparedness Kit.

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

1. 109.6(6)c: Center repeats Iowa record checks at a minimum of every two years or when aware of additional child abuse or criminal history that occurs. Five staff did not have SING checks.

2. 109.6(6)d: Center repeats national criminal history checks at a minimum of every four years or when aware of additional history that occurs. Five staff did not have fingerprints done.

109.9(1)b All files contain: A signed copy of DHS criminal history record check or any other permission form approved by the Department of public Safety for conducting an Iowa or national criminal history check.
A copy of Request for Child Abuse Information.
Copies of the results of Iowa records checks conducted.
Copies of national criminal history check results.
Any Department-issued documents sent to the center related to records check.

Three employees had hits on SING or Fingerprint results. These hits must be evaluated by the record check team.

3. 109.7(1): All staff(within first 3 months of employment)Two hours of approved training FOR the mandatory reporting of child abuse. At least one hour of training regarding universal precautions and infectious disease control. Certification in American Red Cross, American Heart Association, American Safety and Health institute or MEDIC First Aid infant, child, and adult cardiopulmonary resuscitation (CPR) OR equivalent certification approved by the department. A valid certificate indicating the date of training and expiration date shall be maintained. Certification in infant, child, and adult first aid that uses a nationally recognized curriculum or is received from a nationally recognized training organization including the American Red Cross, American Heart Association, American Safety and Health Institute or MEDIC First Aid or an equivalent certification approved by the department. A valid certificate indicating the date of training and expiration date shall be maintained. Minimum health and safety trainings, approved by the Department. If significant changes occur to content, the Department may require the training be renewed.

Some staff have been employed at the center more than 90 days and do not have Essentials training. Some staff employed with the center for more than a year do not have updated Professional Development hours required (6). Some files were not available the date of the visit. It is unknown at this time how many staff professional development hours are overdue or not present. IPOWER was referred to to attempt to track down PD hours, but not all employees are listed in the program.

4. 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. Two year old children are being mixed with older children on a daily basis. This is not permissable.

5. 109.8(2)c: Children between 18 months and 3 years of age may be combined, if appropriate to the developmental needs of the child. If a child under 2 years is combined, the staff ratio of 1 to 7 shall be maintained, otherwise staff ratio may be determined by the age of majority of the children in the group. Children under 18 months were being mixed with older children at 3:15 pm. Eleven children were in the room with children under 18 months and children two years and older. This is common practice at the end of the day. This is not allowable. Administration should refer to ratio changes at day's end: 109.8(2)h If ratio reduced to one staff at the beginning and end of center's operation, timeframe does not exceed two hours and occurs only when seven or fewer children are present with not more than four of the children under two years of age and there are no more than seven children in the center.

6. 109.9(1)d: All files contain a pre-employment physical exam report completed within six months prior to hire and at least every three years. Physical exams shall be documented on form 470-5152, Child Care Provider Physical Examination

Report. Some files were not available the date of the visit. It is unknown at this time how many staff physicals are overdue or not present.

109.9(1)e: All files contain documentation to indicate that ongoing staff training requirements are met, including current certifications in first aid/CPR and mandatory child abuse training.
Number not in compliance: 3

7. 109.15(2): Center shall follow minimum CACFP menu patterns for meals and snacks. Menus planned one week in advance, made available to parents, and kept on file with substitutions noted. Avoid foods with high incident rate of causing choking. Snacks sometimes do not meet guidelines, as they are provided by the school.

8. 109.9(2)g Any child with allergies, a written emergency plan. Copy shall accompany child if they leave the premises. All plans should be available for staff to review if an action is listed (i.e. call parents, administer medication or inhaler/epi pen.) Current allergies in the center are peanut butter, oats and gluten.

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. Eight child physicals were outdate or missing.

9. 109.2(1) Application for license. The child care director must complete form 470-4834, Child Care Center Licensing Application and Invoice to apply for a license renewal. Submit the completed application for renewal. The center must submit a completed application and payment prior to license renewal. It is currently overdue.

V. SPECIAL NOTES/RECOMMENDATIONS:

Based upon this review, it is recommended that this center be placed on Provisional licensing status. The center is directed to correct the items listed in Section IV. The director gave me a verbal commitment that the noted rule violations will be corrected. It is important to note, all HHS licensing standards and procedures must be maintained during the renewal period.

The center may reach out to CCR&R Consultant Malia Love or Iowa Department of Public Health Child Care Nurse Consultant Mandi Lauderman and or Tammy Merrill at any time for consultation.

Child Care Resource & Referral offer centers assistance with meeting the DHS regulations, QRS, infant/toddler concerns, room arrangement and environment, developmental concerns, Best Practice information, CDA assistance, or any questions or concerns you may have. Consultant Love met with the new Director in May 2022 to discuss general functioning of the center, IPOWER, and what to look for going into the next school year. She contacted the Director after my visit to assist her with violation correction. She visited the program twice last year. Malia visited again twice this past year (in the fall and again in May 2024 after the HHS visit). Active supervision, menus, and other licensing areas were discussed.

She provided the following the past year:

5/28/24- Followed up on a referral you made around CACFP and Supervision. Went over menus and CACFP resources, discussed supervision and ideas and practices for active supervision. Followed up with CACFP resources, and active supervision resources via email.

6/12/2024-Discussed staff files and what she should keep for former staff, let her know she should keep all training certificates should they come back needing them and any incident reports or complaints filed.

9/19/2024-Did a book reading with the children and while there answered questions for the staff about supervision and mixing age groups.

10/17/2024-During our work on IQ4K requirements, I ran a PD report for all staff and the roles they were linked to in i-Power letting the director know who was not meeting requirements for training hours and matching up with their roles indicated in i-Power and the classroom breakdown they gave us.

1/7/2025- Went over staff i-Power profiles and Professional Development during a visit about IQ4K.

4/4/2025-Set up a visit to meet with the program 4/11/2025 to go over IQ4K. The director was also given a list of staff who are currently not meeting requirements for Professional Development. We will also go over their most recent licensing visit

items

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. CCNC Lauderman conducted an Injury Prevention Checklist. The center followed all recommendations. She conducted PALS training in May 2024. She stated on 4/9/25, "I have visited them a few times, doing handwashing and completing a health and safety checklist for IQ4K. Ashley had reached out and I provided her with some contacts for CPR. I will reach out and visit again in the next couple of weeks."

HHS recommends centers utilize IDPH and CCR&R services. The center is already actively involved with both Child Care Resource & Referral and Child Care Nurse Consultant Malia Love and with the Iowa Department of Public Health Mandi Lauderman working on IQ4K.

It is recommended the child care have access to the preschool room to partially alleviate ratio issues or the program add another building.

*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.