Health and Human Services

# Iowa Department of Health And Human Services

## CHILD CARE ANNUAL EVALUATION

Business Name: Mattie Thrower

Provider Name: Mattie Thrower

Provider No.: 51380

Address: 709 W 12th ST, Cedar Falls, IA, 50613

E-Mail:

County: Black Hawk

Phone Number: 2699309070

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- [ ] Pre-Inspection Date:
- [ ] Approval Date:
- [X] Annual Visit Date: 3/12/2026

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Program Type:

- [X] Registered Child Development Home A (guidelines for ratios on all categories)
- [ ] Registered Child Development Home B
- [ ] Registered Child Development Home C
- [ ] Registered Child Development Home C1
- [ ] Non Registered Child Care Homes accepting CCA

Program Population Served:

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

**1. Basic Overview**

Mattie initially became Registered in 2021 but did not renew her Registration in 2023. She became Registered again in January of 2025. She is not a participant of the IQ4K quality rating system. She does not participate in the Food Program. Mattie shared that she does not plan to care for infants. She is willing to care for children beginning at the age of 2 through school-age. Mattie currently only is approved to use the main level of her home for childcare. She did indicate a plan to possibly take in some kids at third shift and might want to use the upper level for them to sleep. As noted below, she will need to obtain an appropriate fire extinguisher for that level if children use that level at all. Mattie does not use the front yard for outdoor play. It is located on a fairy busy street. She does have some outdoor space out back, but her yard is not fenced. Mattie does not have any pets. Mattie does not have an approved substitute or assistant.

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**2. Identify Observed Strengths Of The Program**

Mattie did not have any children in care on the date and time of this visit. Thus, I was not able to observe interactions.

Mattie shared that she offers a variety of play including reading time, singing and dancing and coloring and painting.

**3. Identify The Aspects That Fall Below The Standard**

110.8(1)a. Emergency numbers posted for police, fire, ambulance, and poison information center.

Mattie could not locate this documentation. She did later find it after searching for some time but it had not been posted.

*Mattie needs to ensure that her emergency numbers for police, fire, ambulance and poison are posted. She needs to post this accordingly and send pictorial verification to HHS.

Number for each child's parent, a person who can be reached when the parent cannot and child's physician is written on paper and readily accessible by the working telephone.

Mattie could not locate this documentation. I did verify she has a form to document her list of children, parental contact, emergency contact and physician for each child.

*Mattie needs to document the above accordingly for her children in care and she needs to send pictorial verification to HHS.

110.8(1)h. Each smoke detector is tested monthly, and a record is kept for inspection purposes.

Mattie did not have any documentation of monthly testing of smoke detectors.

*Mattie needs to ensure that she tests all of her smoke detectors monthly and documents those accordingly.

110.8 (1) p : The provider has written policies about caring for mildly ill children and the exclusion of children due to illness, and informs parents of policies.

110.8 (1) q : The provider has written policies about responding to health-related emergencies.

After searching Mattie did locate that she had these two policies, but she did not know if she had provided that information to the families. There was a spot on the form she uses and there was no parental signature. She also could only fine one form but has more than one child in care.

*Mattie needs to ensure that both of these policies are written and have been provided to the parents.

110.8 (1) r : Certificate of registration is displayed in a conspicuous place.

After some searching, Mattie did find her certificate in another stack of paper with it was not displayed in a conspicuous place.

*Mattie needs to display her certificate so it is visible.

110.8 (3) b : First-aid supplies are available and easily accessible in the home, outdoor play area, in any vehicle used to transport children, and on field trips.

The first-aid kit shall, at a minimum, include adhesive bandages, bottled water, disposable tweezers, and disposable plastic gloves.

Mattie shared that she had a first aid kit in a backpack with a lot of other information, but she could not locate the back-pack. She did find a couple of bandaids, but did not have all the required items.

*Mattie needs to locate her First aid kit and ensure that it has all the require items as listed above. If she cannot locate it, she needs to obtain a new one.

*Mattie needs to send pictorial verification of her First Aid kit with the required items to HHS.

110.8 (4) a : Emergency and disaster plans for fire and tornado are written and posted by primary and secondary exits.

Mattie did not have an emergency and disaster plan at her secondary exit.

*Mattie needs to obtain an emergency and disaster plan for fire and tornado and post this at her secondary exit. She needs to send pictorial verification to HHS.

110.8(40a. Fire and tornado drills are practiced monthly and documentation kept on file for the current year and previous year.

Mattie did not have any documentation for fire and tornado drills. This worker asked her if she ever practiced them and she initially stated she had not. She later stated she does do fire and tornado drills, so this worker is uncertain if she actually practices those monthly or not. I did advise that she needs to be practicing them monthly and documenting them each month.

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110.8 (4) b : Procedures are in place for:
Evacuation to safely leave the facility,
Relocation to a common, safe location after evacuation,Shelter-in-place to take immediate shelter where the child is when it is unsafe to leave that location due to the emergent issue,
Lock down to protect children and providers from an external situation,
Communication and reunification with families,
Continuity of operations, and
Procedures to address the needs of individual children, including those with functional or access needs.

Mattie did have a written Emergency Preparedness Plan. However, in reviewing the plan, it frequently referenced that she had safety items in a backpack that she could not locate. It also referenced emergency numbers on the Refrigerator that she did not have. It referenced that she had multiple First Aid kits in 3 different locations but she could locate any of them. Thus, her written plan is not currently accurate.

*Mattie needs to take appropriate steps to ensure that the documentation she has in her EPP is accurate.

110.9(1)a.
Within six months of becoming registered, children 18 years of age or younger residing in the household must have:
Admission physical exam report.
Immunization certificate.
For school age: Documentation of physical exam completed at time of school enrollment or since that time.

In addition to Mattie, HHS records reflect there are two teens that reside in the home. Mattie did not have a physical or immunization record for either one of them.

*Mattie needs to obtain a physical and immunization record for both of the other individuals that reside in the home

110.9 (1) b : Documentation from the Department confirming record checks have been completed and authorizing or limiting the person's involvement with childcare.

Mattie could not locate this documentation.

*Mattie needs to try to locate this documentation and keep it with her other documentation for future compliance review.

The provider has 2 hours of approved child abuse and neglect mandatory reporter training.

Mattie's certificate of Mandatory Child Abuse Reporter training had expired.

*Mattie needs to update her MCART and send pictorial verification to HHS.

The provider has certification of First aid and CPR

Mattie could not locate her certification of First Aid and CPR.

*Mattie needs to locate her current certification of First Aid and CPR and she needs to send pictorial verification to HHS.

110.9(4) : An individual file is maintained for each child and updated annually or when there are changes.

Mattie had a stack of papers but could not locate a file for the two children she is currently providing care for. She did eventually find some of the documents for one child.

*Mattie needs to ensure that she has a file for each child and that it is updated at least annually.

Each file contains:
110.9 (4) 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.
110.9 (4) b : Emergency information including where the parent can be reached, the name, street address, city, and telephone of the child's regular doctor, and the name, telephone number, and relationship to the child of another adult available in case of emergency.
110.9 (4) c : A signed medical consent from the parent authorizing emergency treatment.
110.9 (4) d : For infants and preschoolers: An admission physical examination, on the first day of attendance, including past health history, status of present health, allergies and restrictive conditions, and recommendations for continued care when necessary. The date of the exam is not more than 12 months before the child's first day of attendance.
For school-aged children: On the first day of attendance, a statement of health status signed by the parent or legal guardian or admission physical examination that is not more than 12 months from the child's first day.
110.9 (4) e : For infants and preschoolers: A statement of health signed by a physician submitted annually.
For school aged children: An annual statement of health condition signed by the parent or legal guardian, annually from date of statement of health or admission physical.

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110.9 (4) f : For each school-age child, record of a physical exam completed at the time of school enrollment or since.
110.9 (4) g : A signed and dated immunization certificate provided by the state Department of Public Health.
110.9 (4) h : Written emergency plans for children with allergies. Must accompany child if away from facility.
110.9 (4) i : Documentation signed by the parent which names persons authorized to pick up the child, their telephone number, and relationship to the child.
110.9 (4) j : Written permission from the parent(s) for their child to attend activities away from the child development home.
110.9 (4) k : Injury report forms to document injuries requiring first aid or medical care.

Mattie did not have a file folder for each child and could not locate a majority of the required documentation.

Mattie had been provided a binder from CCR&R at the time of her Registration last year. This worker did review the binder and it did include all of the required documents for each's file. This worker directed Mattie to those documents to use for creating files for each child.

Mattie did have some documentation in a separate file folder and she had many papers that were not organized in any way.

This worker encouraged her to use the binder and sleeves that CCR&R had provided her as that binder was divided into separate sections and could provide assistance to her in organizing her documentation.

A re-check is not needed at this time. The above corrections should be made within 3 weeks (by 4/2/26) and will be reviewed at the next annual compliance check.
Please send pictorial verification of the items where specifically noted above to christy.weber@hhs.iowa.gov or text to 319-429-0749.

Thank you for your service in providing childcare in your community.

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

NA

**5. Special Notes/recommendations**

Notes:
Mattie stated that she does not transport children currently. She then stated that she does not transport children. This worker did advise her that if she transport childcare children, she does need to have the emergency contact numbers for the children in her vehicle, a First Aid kit in her vehicle and a no-smoking sign in her vehicle. She did reference having those items in a backpack but she could not locate the backpack while this worker was present.
Mattie shared that she does not ever use a swimming pool.
We did discuss safe sleep policies.
We did discuss the number of children she is allowed to care for at one time as a Category A provider.

As part of the 2026 Targeted compliance the Emergency Preparedness Plan was thoroughly reviewed. As noted above, Mattie did have a written Emergency Preparedness Plan; however, in reviewing the plan, it frequently referenced that she had safety items in a backpack that she could not locate. It also referenced emergency numbers on the Refrigerator that she did not have. It referenced that she had multiple First Aid kits in 3 different locations, but she could locate any of them. Thus, her written plan is not currently accurate.
Mattie needs to take appropriate steps to ensure that the documentation she has in her EPP is accurate.
She was encouraged to review it at least yearly to ensure that no changes need to be made.

Recommendations:
Mattie did not yet have anything written in regard to notifying parents in writing that the state does allow parents to submit an exemption for immunizations (either religious or medical) in lieu of the immunization record for each child. This is a new policy effective 7/1/25 so we did discuss this, and she agreed to get that documented accordingly.

This worker was concerned that our visit today was actually scheduled due to Mattie having another job outside of the home and it was difficult to assess the hours she might be home providing childcare. Mattie had notice of this visit, yet was still out of compliance with many Regulations. This worker would recommend she review the annual checklist that this worker provided her last year at the time of her PI. This will provide her knowledge of all the Requirements and Regulations.

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This worker also recommends that she develop a file for each child. This worker did ensure the has the appropriate forms that she needs. She is encouraged to use the binder that was provided to her by CCR&R to keep her documentation organized.

Mattie is over half-way through her 2 year registration period and she reported she has not yet completed any of her 24 hours of training. She is regularly provided information by CCR&R about available training, and she was encouraged to reach out to her local CCR&R support worker for assistance if needed.

Mattie shared that currently she only has 2 children enrolled. She has had difficulty getting children in full- time but this is in part due to the fact she has another job outside of the home during traditional childcare hours, so she is not available on a regular basis to offer childcare. Mattie stated that she might begin to do 3rd shift for a few children. This worker asked where they would sleep if she provided 3rd shift care and she noted she would plan to have them sleep in a bedroom on the upper level of the home. As a current category A provider, she could use the upper level for childcare but only if she obtains a fire extinguisher for that floor. She does have smoke alarms on that level. Mattie later noted that she would like to move up in the Category of providers. This would allow her to take more children. This worker did advise that she really does not have the required floor space to have any additional children. Additionally, as a Category B or C level provider she would not be able to use the upper level for childcare as she does not have the appropriate secondary exit.

HHS Child Development
Home Compliance Worker: Christine Weber Date: 3/16/2026

Non-compliance with any of the mandated regulatory 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.

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 I encourage you to work with Black Hawk County Child Care Resource and referral at 319-233-0804 if you have any ongoing compliance or training needs.