

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

Name of Center: Wee Wisdom Preschool **Enrollment:** 20 **License ID No. (Reapplications)** 28277

Street: 710 Valley Dr **City:** Carlisle **Iowa Zip** 50047 **County:** Warren

Mailing Address: PO Box CC, Carlisle, IA, 50047

Director's Name: Kay Peck **Phone Number:** 515-989-0519

On-Site Supervisor(s): **E-Mail:** rjudkins@mchsi.com

Date(s) of Visit: 01-17-2019

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

LICENSING VISITS

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

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

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

Date Inspected: 01-21-2016

Comments :

LICENSE TYPE: **Child Care** **Preschool (ages 3-5 meets three hours or less per day)**

Financial Type: **Profit** **Non-Profit** **NA**

Accreditation: **Accredited** **NAEYC** **NSACA** **Other** **NA**

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

Get-Well **Evening Care** **Special Needs**

SCHEDULE: **Year-round** **School-Year** **Summer Only**

HOURS:	<u>Year-round</u>	<u>School-Year</u>	<u>Summer Only</u>
LICENSE CAPACITY	Infants	2 Years	Preschool
General			23
Summer			0

QRS Rating: N/A

RECOMMENDATION FOR LICENSE:	
X	FULL license from 02-01-2018 to 02-01-2020
	PROVISIONAL license from
	DENIAL of initial application
	SUSPENSION of license
	REVOCACTION of license

Licensing Consultant: Melinda Larson, Child Care Licensing Consultant

Date: 01-18-2019

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

II. IDENTIFY THE AREAS OBSERVED ON THE VISIT:

Wee Wisdom Preschool has been in operation since 1968. Kay Peck is the owner and director. The preschool is located in the lower level of Kay's home. Kay has a two year education degree. She was a substitute teacher in the public school system prior to starting the preschool.

Kay was present today and assisted with the visit. The assistant was working today, along with a volunteer. There were sixteen children in attendance today.

III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:

Kay and Mary have worked together for many years, teaching young children together in this preschool. The preschool has many learning centers that are well supplied with age appropriate toys.

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

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.

Staff are overdue for SING checks. Kay sent in their information and will be following up on this.

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.

Mary is overdue for the federal record check. This is going to be done.

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 occurs every 5 years. If significant changes occur to content, the Department may require the training be renewed. Mary hasn't completed Essential training. She will be completing this.

109.7(2): Center directors and all staff have the required contact hours of training.
Number not in compliance: 1

Mary didn't have enough professional development hours in 2017.

109.10(11): Smoking and use of tobacco products shall be prohibited in the center and every vehicle used to transport children. Prohibited in outdoor play area during hours of operation. Nonsmoking signs shall be posted at every entrance and in every vehicle used to transport. Signs shall include: Telephone number for reporting complaints. Internet address to DPH. The center didn't have a No Smoking sign up.

V. SPECIAL NOTES/RECOMMENDATIONS:

*Note: If you are the Child Care Center Director and you feel something is unclear or unjustly cited, please contact me (phone 515-725-2635; email mlarson@dhs.state.ia.us) so that we may discuss the issue. If necessary, I can make a notation in your record. You may also send a letter that will be included in your licensing file noting any disagreement you may have with this report. If you have the need for any additional information discussed during my visit, please contact me and I will forward the information to you. Thank you.

*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.

*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.

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