



Iowa Department of Human Services

Kim Reynolds
Governor

Adam Gregg
Lt. Governor

Kelly K. Garcia
Director

07/03/2019

Laura Watts
312 S Parkview DR
Eldridge, IA 52748

Dear Child Care Provider:

This letter is in regards to the follow up at your child care home conducted on 07/02/2019. Iowa Code Chapter 237A and 441 Iowa Administrative Code, Chapter 120, describes specific requirements that must be met by a child care home that has a child care assistance provider agreement. The following areas were out of compliance at the time of the visit:

441 IAC 120.9 **Children's Files**

441 IAC 120.9(2)

The file shall contain:

- 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.
- b. Emergency information including, at a minimum, where the parent can be reached, the name, street address, city and telephone number of the child's regular source of health care, and the name, telephone number, and relationship to the child of another adult available in case of emergency.
- c. A signed medical consent from the parent authorizing emergency treatment.
- d. An admission physical examination report signed by a licensed physician or designee in a clinic supervised by a licensed physician
- e. For children under the age of six, a statement of health condition signed by a physician or designee submitted annually from the date of the admission physical. For a child who is five years of age or older and enrolled in school, a statement of health status signed by the parent or legal guardian may be substituted for the physician statement.
- f. Documentation signed by the parent which names persons authorized to pick up the child. The authorization shall include the name, telephone number, and relationship of the authorized person to the child.
- g. A signed and dated immunization certificate provided by the state department of public health. For the school-age child, a copy of the most recent immunization record shall be acceptable.
- h. For any child with allergies, a written emergency plan in the case of an allergic reaction. A copy of this information shall accompany the child if the child leaves the premises
- i. Written permission from the parent for the child to attend activities away from the child development home.
- j. If the child meets the definition of homelessness as defined by section 725(2) of the McKinney Vento Homeless Education Assistance Act, the family shall receive a 60-day grace period to obtain medical documentation.

Findings:

Lisa Hilsenbeck, Child Care Compliance Auditor, completed a follow up visit on 7/2/19 checking the following regulations:

441 IAC 120.8(1)"i" Laura needs a no smoking sign posted in the transport vehicle. The transport vehicle was not at the child care home during the compliance visit. The transport vehicle will be viewed at the follow up visit. Laura reports she does not transport.

441 IAC 120.8(1)"n" Laura needs an updated pet record for Gabby documented on required form 470-5153 (Veterinary Health Certificate). Viewed an updated pet record for Gabby documented on required form 470-5153 (Veterinary Health Certificate).

441 IAC 120.8(3)"b" Laura needs a first aid kit in the transport vehicle. The transport vehicle was not at the child care home during the compliance visit. The transport vehicle will be viewed at the follow up visit. Laura reports she does not transport.

441 IAC 120.9 Children's Files

Laura needs an updated intake/enrollment form for EH, JW, RW, AW(8), AW(4). Viewed an updated intake/enrollment form for EH, JW, RW, AW(8), AW(4).

Laura needs an updated emergency medical treatment authorization form for EH, JW, RW, AW(8), AW(4). Viewed an updated emergency medical treatment authorization form for EH, JW, RW, AW(8), AW(4).

Laura needs an updated physical for RW, AW. Viewed an updated physical for RW.

Laura needs a school age parent statement for JW, AW(8). Viewed a school age parent statement for JW, AW(8).

Laura needs an immunization record for RW, AW(8), AW(4). Viewed an immunization record for RW, AW(8).

Laura needs an updated pick up list for EH, JW, RW, AW(8), AW(4). Viewed an updated pick up list for EH, JW, RW, AW(8), AW(4).

Laura needs an updated travel/activity form for EH, JW, RW, AW(8), AW(4). Viewed an updated travel/activity form for EH, JW, RW, AW(8), AW(4).

Items of non-compliance after the follow up visit:

441 IAC 120.9 Children's Files

Laura needs an updated physical for AW.

Laura needs an immunization record for AW(4).

Suggestions for Improvement:

Recommendation:

Laura needs to send non-compliance paperwork to Glenda Currier (gcurrie@dhs.state.ia.us) by 7/17/19.

[] Is the recommendation to terminate a provider agreement or revoke a registration?

Non-compliance with any of the mandated requirements listed above may lead to the cancellation of your Child Care Assistance Provider Agreement. Please take whatever steps are necessary to completely address each of the violations noted above. It is essential you correct all above-mentioned violations.

Based on the items out of compliance listed above, you will not be required to have a recheck or follow up visit to your home.

Please do not hesitate to contact me at DHS at 563-690-5422 or gcurrie@dhs.state.ia.us if you have any questions regarding this letter.

Sincerely,

Glenda Currier
Social Worker II

Machelle Pezley
Social Work Supervisor

07/03/2019

Always Remember:

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 563-324-3236