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

Name of Center: Little Stars Child Care Center **Enrollment:** 34 **License ID No. (Reapplications)** 51440

Street: 2250 W Ridgeway AVE **City:** Waterloo Iowa **Zip** 50702 **County:** Black Hawk

Mailing Address: 2250 W Ridgeway AVE, Waterloo, IA, 50702

Director's Name: Kelsey Brunson **Phone Number:** 319-883-6747

On-Site Supervisor(s): Drucilla Johnson **E-Mail:** directorlsccc22@gmail.com presidentlsccc@gmail.com

Date(s) of Visit:

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

LICENSING VISITS

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

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

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

Date Inspected: 04-01-2021

Comments :

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 Other X NA

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

Get-Well Evening Care 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	26	22	12	10	70
Summer					0

QRS Rating: N/A

RECOMMENDATION FOR LICENSE:	
	FULL license from
X	**PROVISIONAL** license from 06-06-2022 to 06-01-2023
	DENIAL of initial application
	SUSPENSION of license
	REVOCATION of license

Licensing Consultant: Becky Frost **Date:** 02-07-2023

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

A provisional license is issued. I made a second visit to the program on 08/22/22 and went over all the areas where there were violations and the program has made several corrections. However, since my initial visit several complaints have been received. These concerns will be addressed in a separate report but due to multiple additional violations the program is being put on a provisional license.

A referral was made to Child Care Resource and Referral (CCR&R) immediately to begin supporting the center, but a formal referral will be made with this report and again following the complaint report.

II. IDENTIFY THE AREAS OBSERVED ON THE VISIT:

On 08/01/22 I made an unannounced licensing visit to Little Stars Childcare Center in Waterloo. I met with Deb Nading, the director. It should be noted that Ms. Nading was not the director the day of my visit but she is currently in the director position because the former one is no longer with the program. Ms. Nading has worked in childcare for 27 years. She was previously a paraeducator. She is 6 credits short from having a degree in early childhood education. I also met with Ibrahim Shehata, the childcare board president. The program employs eleven staff members.

The center is in a newly built free-standing building. They were given permission to open on 06/06/22. The program operates 7:00 am until 5:00 pm Monday through Friday and serves infants through school-age children. There are currently 34 children enrolled.

The program operates out of four rooms: infants (Constellation), toddlers/age one (Nebula), two and three-year-olds (Super Nova) and four, five and school-age (Galaxy). An inspection of each room was completed. Windows provide natural lighting. The rooms are decorated with the children's art projects, and posters to assist the children with the learning process, such as the alphabet, shapes, colors and numbers. All rooms were within ratio during my visit.

The centers observed on the day of the licensing visit include library, Lego/blocks, table toys, games, puzzles, transportation, art, dramatic play, writing, playdough, science/discovery, magnets and music. Centers were arranged in a manner that allowed easy movement between activities, but it also allowed for clear supervision by staff members. Materials were in good condition. The materials are located at child level so they were easily accessible to the children.

Each classroom has a bathroom and there are additional bathrooms in the hallway. The infant room, toddler room and four and five-year-old rooms have one toilet and one sink. The two and three-year-old room has two toilets and one sink. There is a changing table in each of the bathrooms and a second changing table in the classrooms for infants and toddlers. Handwashing and diaper changing procedures were posted in all locations. There are also sinks inside each of the classrooms and procedures were posted.

The program uses a variety of resources to develop lesson plans. Ms. Nading is in the process of training lead teachers on how to develop lesson plans. This has been difficult because of staffing issues. The teachers from each of the rooms communicate with one another so that the program is on the same page. Assessments will be completed on the children. The day of the visit none of the rooms had lesson plans available to review but the program continues to train staff and improve on this. Ms. Nading states each teacher is currently preparing lesson plans. A lesson plan must be available for each room that outlines the days activities and learning objectives.

There is a phone in the office. Post emergency numbers with the center's address and phone number near the phone. The program rooms use walkie talkies to communicate with each other within the center. Ms. Nading states many times staff members will text her phone. Staff members should use the walkie talkie to communicate within the center and should avoid being on their phones while they are in work status. The day of the visit the rooms did not have emergency fire and tornado procedures and evacuation diagrams posted by the main program doors and outdoor exits. This has since been corrected. A daily schedule was posted in each room.

The program does not currently participate in the Child and Adult Care Food Program (CACFP) because it has not received their license. They have been in contact with CACFP personnel and plan to be on the program once they receive their license. The program provides breakfast and an afternoon snack to the children. Currently all the children bring their own lunch each day. The program is monitoring the meals brought in to make sure they have all five food components (dairy, meat/meat alternate, vegetables, fruits and grains) and have been made aware they have to supplement the meals if the guidelines are not met. They have sent a letter home to parents telling them the guidelines. This is a no pork center. Currently each room is responsible for deciding what they serve the children for breakfast and snack. Each room must document what is served to the children for breakfast and snack each day and have this information available for review during licensing visits. Not every room had a menu available to review the day of my visit. Ms. Nading states she is in the process of making menus for breakfast and the afternoon snack that all rooms will follow. It would be beneficial to the center to hire a cook that would make menus for the program and prepare the meals and snacks.

In several rooms there were food items that were not stored according to NHSPS guidelines. Once a food item is opened it must be stored in a sealed plastic, metal or glass container and be dated. This has since been corrected.

In the infant room the parents provide the formula, baby food and cereal for the children. Staff members are washing dishes and bottles in the classroom. They were not using the three-step method. This has since been corrected.

I observed the kitchen to be clean and organized. There are three industrial sinks and a dishwasher available for dishes. Currently two rooms return their dishes to the kitchen while the other two rooms wash their dishes in their classroom. You must clean and sanitize the dishes in the classroom using the three-step-method. Ms. Nading has trained staff members on this and this has been corrected. There is a refrigerator in the kitchen and a refrigerator and upright freezer in the pantry. Thermometers were not present during my visit but this has since been corrected. Food items were stored according to NHSPS guidelines in the pantry. There are also refrigerators in each of the classrooms. They did not have thermometers the day of my visit but this has also been corrected.

The program uses Pursue Disinfectant Cleaner to sanitize and disinfect food tables and diaper changing tables. It has a 60 second dwell time. They were using Amway Home Multi-Purpose Cleaner as a sanitizer. This product is not labeled as a sanitizer and cannot be used for that purpose. You can use it as a cleaner in place of soap and water.

I reviewed documentation of monthly fire and tornado drills. The program started on 06/06/22 and had only performed one fire drill. They had not performed any tornado drills. Ms. Nading is aware that fire and tornado drills must be completed each month and has started conducting these as required once she took over as the director.

The program does not currently have a playground but is actively working with CCR&R to come up with a plan and develop one. They have a fenced in space for the playground to the west of the building. The center has a large grassy area to the north of the building that they are currently using for the children to enjoy outside time. They are taking items for the children to play with outside with them. They also take a first-aid kit and a whistle. You should complete monthly playground inspections on the area you are using as a playground.

A radon test was completed in August 2022 and is good for two years. The program has not received the results yet. You will want to check with the company to make sure they received the tests as the results should be back by now. The building is new and has a new furnace system that was inspected prior to opening. A carbon monoxide detector is located on the ceiling of each room. Outlets were protected. The fire marshal inspection occurred on 04/01/21.

The parent information is located on a bulletin board inside the entrance. The mandatory reporter, child care consultant and the handbook availability were posted. The license was conspicuously hung. A no-smoking sign was posted at the entrance.

Staff and children files were reviewed at the time of the licensing visit. I reviewed ten children files. Files must contain emergency contact information for the doctor and dentist of each child. The doctor and dentist's name, phone number and complete street address must be provided. Seven files did not provide adequate emergency dentist contact information and two files did not provide adequate doctor emergency contact information. There were four missing physicals. Three files did not provide information for emergency contact information for next of kin. Three files did not have information on who has permission to pick the child up from the center. There were four missing immunization certificates and two invalid immunization certificates because they were not on the mandated Department of Health certificate. Ms. Nading has sent information to families asking for corrections and additional information.

I reviewed four staff files. It should be noted that three of the files I reviewed are no longer with the program since the licensing visit. Currently only one person in the center has first aid and CPR. This must be corrected immediately. Ms. Nading has been provided the contact information for someone to conduct the training. Please contact this individual and get the training scheduled. Staff members also need to make sure they are providing you with physicals on the mandated HHS employee physical form. All new employees need to complete first-aid, CPR, universal precautions, mandatory reporter and Essentials training within 90 days of hire. Also, all new hires must have a SING background conducted before they start working and fingerprints must be mailed in upon hire. There was an employee who did not have a SING background check nor was she fingerprinted. She no longer works at the center. Ms. Nading continues to work on bringing staff files into compliance.

All volunteers working in the center must have a signed volunteer statement, have an Iowa background check (SING) before starting at the center and fingerprints must be mailed in before they start. There was a volunteer at the center that had fingerprints completed but did not have the SING background check.

I reviewed policy and procedures, staff and parent handbooks. Most of the necessary written emergency procedures and policies were present. You must update the professional development policy specifically outlining the HHS training requirements for new hires within 90 days of hire. Emergency Preparedness Plans have not been completed. A referral will be made to Child Care Resource and Referral (CCR&R) to assist with emergency preparedness plans.

Staff members were observed to be actively engaged with the children. It was a beautiful day and they were outside with the children for quite a while. They were spread out on the grassy area and took activities out for the children to play with.

III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:

There are cameras in each of the rooms that can record and the center has a secured building.

Each room has a large dry erase board to keep notes on each of the children.

The center has a large resource room for staff members that provide several choices to assist with ideas for lesson plans.

Ms. Nading states they have received positive feedback from parents. They are making improvements and the children are eager to be there.

Ms. Nading and the board are working on having open communication. On 09/06/22 there was a three-hour meeting that included Ms. Nading, board members, CCR&R and me to have an open discussion about roles and expectations for staff members, Ms. Nading and the board.

Child Care Resource and Referral (CCR&R) has been working closely with the center to assist in any way possible. I contacted CCR&R as soon as I knew I would be making a formal referral to them regarding emergency preparedness plans. They have been helping Ms. Nading navigate the director role and handling and prioritizing all the duties involved in operating a center.

Ms. Nading has several years of experience as an in-home child care provider. She was also a paraeducator at a school working with preschool children. She has a passion for working with children and is working diligently to bring the center into compliance on all licensing standards.

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

109.4(2)e: Written plan for ongoing staff development that complies with 441 IAC 109.7.

109.6(5)c: Undergo record check process if:It is included in meeting the required child/staff ratio.Has direct responsibility for a child or children.Has access to child or children when no other staff is present.

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.

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.
Number not in compliance: 1

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.
Number not in compliance: 3

109.9(2)a: All files contain sufficient information to allow the center to contact the parent or emergency contact at any time child is in center's care.
Number not in compliance: 3
Information lacking: Three files did not provide information for emergency contact information for next of kin.

109.9(2)b: All files contain sufficient information and authorization to allow the center to secure emergency medical and dental services at any time child is in center's care.
Number not in compliance for medical: 2
Number not in compliance for dental: 7
Information lacking: Files must contain emergency contact information for the doctor and dentist of each child. The doctor and dentist's name, phone number and complete street address must be provided. Seven files did not provide adequate emergency dentist contact information and two files did not provide adequate doctor emergency contact information.

109.9(2)d: All files contain parent authorization of the persons to whom the child may be released.
Number not in compliance: 3

109.9(3): Signed and dated Iowa immunization certificates are on file for each child enrolled.
Number missing: 4
Number invalid: 2

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, or ARNP, and contains health history; present health status including allergies, medications, and acute/chronic conditions; and recommendations for continued care if necessary.
Number not in compliance: 4

109.10(15)a: The center shall have written emergency plans and diagrams for responding to fire, tornado, flood, and plans responding to intruders within the center, intoxicated parents, and lost or abducted children.Shall have guidelines for responding or evacuating in case of blizzards, power failures, bomb threats, chemical spills, earthquakes, or other disasters that could create structural damage to the center or pose health hazards.If center is within 10 miles of nuclear power plant, center shall have evacuation plan. Emergency plans shall include written procedures including plans for- Evacuation to safely leave the facility- Relocation to a common, safe location after evacuation- Shelter in place to take immediate shelter when the current location is unsafe to leave due to the emergency issue- Lock down to protect children and providers from an external situation- Communication and reunification with parents or other adults Responsible for the children which includes emergency telephone numbers- Continuity of operations- To address the individual children, including those with functional or access needs.

109.10(15)b: Emergency instructions, phone numbers, and diagrams for fire, tornado, and flood shall be visibly posted and documented at least once a month for fire and tornado. Records shall be maintained for current and previous year.

109.11(5): Telephone: Working non-pay phone with posting adjacent for emergency numbers for police, fire, and poison control center. Center street address and phone included in posting.List of emergency numbers for children kept near phone.

109.12(1): Program structure that uses developmentally appropriate practices and written program of activities planned to the developmental needs of children served.Program complements but does not duplicate school curriculum.Schedule of program is posted in a place visible to parents.

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.

109.15(4)a: Written policies developed for food brought from home for children under five years of age not enrolled in school and is provided to parent at admission.Food brought from home for children under five years of age not enrolled in school is monitored and supplemented if necessary to ensure CACFP guidelines maintained.

V. SPECIAL NOTES/RECOMMENDATIONS:

A provisional license is issued. I made a second visit to the program on 08/22/22 and went over all the areas where there were violations and the program has made several corrections. However, since my initial visit several complaints have been received. These concerns will be addressed in a separate report but due to multiple additional violations the program is being put on a provisional license.

A referral was made to Child Care Resource and Referral (CCR&R) immediately to begin supporting the center, but a formal referral will be made with this report and again following the complaint report. All HHS licensing standards and procedures must be followed and maintained. If this occurs and the program becomes stable a full license will be issued in the future.

On 11/29/22 an administrative change has been made to name Drucilla Johnson as the on-site supervisor and she will be the person in charge until a director is hired. Ibrahim and Muhammad Shehata are board members who are handling the paperwork at the center until a director is hired.

In February 2023 an administrative change is being made to name Kelsey Brunson as the new director. She started this month. She has a BA in child, adult and family services. She has several years of previous experience in a child care program and has worked in the school system as a paraeducator and behavioral specialist.

*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.