Health and Human Services

Iowa Department of Health And Human Services

CHILD CARE ANNUAL EVALUATION

Business Name: Abeer Issa

Provider Name: Abeer Issa

Provider No.: 52322

Address: 1562 24th ST, Des Moines, IA, 50311

E-Mail:

County: Polk

Phone Number: 5155253991

- [ ] Pre-Inspection Date:
- [ ] Approval Date:
- [X] Annual Visit Date: 8/18/2026

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)
- [ ] Toddler
- [ ] PreSchool
- [ ] School Age
- [X] All Ages

1. Basic Overview

Abeer Issa has been a registered childcare provider since November of 2023. Abeer is currently a category "A" Child Development Home Provider. This category allows the provider to have 6 preschool children with an additional 2 school aged children in care at one time. Abeer does not have an assistant or substitute for her program. Abeer does not provide transportation for her families in her care. Abeer identified she is available 7 days a week 24 hours a day for childcare.

2. Identify Observed Strengths Of The Program

Abeer's home is clean, sanitary, and appropriate for childcare. The home has dedicated spaces which are furnished with children's furniture, toys, books, and cribs. There are toys and objects which encourage children to develop large and small motor skills. The provider follows a structured routine which children can predict their environment and activities. The

children have group activities, free-play, and access to media depending on age of children in care. There is an outside space the children can access when the weather allows. Abeer has completed her required trainings as reviewed by the Registration Unit. Abeer has completed Safe Sleep training; this worker reviewed the policy with her and gave her an informational flyer. Abeer will implement the practice when she has children 12 months or younger in her care. Abeer uses separation and redirection as her primary behavioral interventions when needed. Corporal punishment is not practiced in the Child Development Home. Children in Abeer's care will receive regular meals and snacks as appropriate.

3. Identify The Aspects That Fall Below The Standard

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, andProcedures to address the needs of individual children, including those with functional or access needs.
110.9 (3) e : Certification or other documentation that minimum health and safety training as identified in 110.10(1)“a” has been completed within three months or prior to providing substitute care, whichever occurs first.
110.9(4) : An individual file is maintained for each child and updated annually or when there are changes. 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.
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) 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.

1. An Emergency Preparedness Plan needs to be completed and easily accessible. This worker has made referral to your Child Care Resource and Referral Worker to assist you with completing the plan.
Have procedures in place for the following:
• Evacuation to safely leave the facility
• Relocation to a common, safe location after evacuation
• Shelter-in-place to take immediate shelter where you are when it is unsafe to leave that location due to the emergent issue
• Lock down protocol to protect children and providers from an external situation
• Communication plan and plans for reunification with families
• Plans for the continuity of operations
• Procedures to address the needs of individual children, including those with functional or access needs

2. Each child in care needs to have an individual child file containing specific demographic, medical, consent, and release information. A referral to your CCR&R Worker to assist you in creating the child files.

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

None.

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5. Special Notes/recommendations

I encourage you to work with your Child Resource and Referral Worker (Heather Sheesley 515-360-7308) with any compliance or training efforts.

Send this worker a copy of the completed Emergency Preparedness Plan within 30 days of receiving this letter.

The other correction needs to be completed by 10/11/2026 and will be reviewed on your next annual compliance check.

6. ADDENDUMS:

- Addendum1: Hi Jake,

  I am meeting with Abeer Issa and we just completed her emergency preparedness plan. I also gave her 2 child file packets and will be mailing her more to get completed the other children in her care. She has physicals and immunizations on file and just needs the other forms it appears. She plans to get them completed as soon as possible.

  Email received from the Child Care Resource and Referral Worker, Heather Sheesley on 9/15/26.

This Addendum is approved by supervisor on 9/16/2026

HHS Child Development
Home Compliance Worker: Jake Aringdale Date: 8/19/2026

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