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

Name of Center: The Wolverine Den Child Care Center **Enrollment:** 26 **License ID No. (Reapplications)** 18150

Street: 15 2nd ST NW **City:** West Bend Iowa **Zip** 50597 **County:** Palo Alto

Mailing Address: PO Box 287, West Bend, IA, 50597

Director's Name: Brittney Allard **Phone Number:** 515-887-7777

On-Site Supervisor(s): **E-Mail:** director.wolverineden@gmail.com

Date(s) of Visit: 01-03-2025

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

LICENSING VISITS

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

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

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

Date Inspected: 07-24-2024

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	10	10	20	26	66
Summer					0

QRS Rating: N/A

RECOMMENDATION FOR LICENSE:	
X	**FULL** license from 01-01-2025 to 01-01-2027
	PROVISIONAL license from
	DENIAL of initial application
	SUSPENSION of license
	REVOCATION of license

Licensing Consultant: Raymond Salsbury **Date:** 01-21-2025

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

II. IDENTIFY THE AREAS OBSERVED ON THE VISIT:

An unannounced annual visit was made to The Wolverine Den Child Care Center on 01-03-25 where I met with Brittney Allard who took over the director role in November 2024. Brittney is qualified for the position having worked at the Head Start program in Jefferson, and also completed courses toward a teaching degree with needing only one semester to complete that degree. The program is operated out of the old St. Peter and Paul Catholic Elementary School building in West Bend. The center is operated separately from the school and church as a non-profit program overseen by a board of directors. The school and church is still responsible for maintenance of the building, and also continues to make use of classroom spaces at times when the center is not in operation. No other services or programs are provided in the building during the hours when the center is in operation. The program provides daycare services to infants through school age children. There are currently 26 children enrolled in the program served by 9 staff. All aspects of the program subject to licensing standards were reviewed during this visit.

The physical structure and layout of the building and classrooms remain the same as in prior reports. The center is currently using three classrooms though additional rooms are available for expansion if needed. Each room has a large bank of windows along the exterior walls that provide natural light, a view of the outdoors, and serve as secondary emergency egress. Each room has a toilet and sink located just off the programming space so that children do not need to leave the room. Additional toilets are located off the main hallway though some of those were blocked off as not functioning. Brittney stated that the church has been notified of the need for repairs. Each room also has a second sink available in the classroom. A changing table was available in the infant room, and an old crib with one side rail removed was being used as a changing station in the younger preschool room for those children that were not fully toilet trained. Each room was observed to be clean. The infant room is divided into three areas through the use of tall cubical panels and low shelving units. The panel dividers create a sleeping area that has limited visibility, and the shelving units divide the remaining space into two areas for mobile and non-mobile infants. The issue of the obstructed view sleeping area has been identified in the past and the center has responded to this by placing a chair in a location where staff can fully observe the cribs and having a teacher sit in that location when children are sleeping. The preschool and school age rooms have an open design where activity centers are created through the placement of furniture and play structures. The older preschool room has activity centers that do include options such as an air hockey table. The toys and materials present in each room were observed to be in good repair and appropriate to the ages of the children present.

The center uses a general curriculum theme focus for all classrooms which is posted at the main parent notice board. Each classroom then develops activities to implement that them into their classroom schedule. The general theme at the time of the visit was Christmas, and as an example of implementation the preschool room had specific activities planned for crafts, stories, games, and music, that they would be engaging in throughout the week. Good interactions were observed in each classroom on the day of my visit. The infant room only had two children present at the time of the visit which allowed the teacher in the classroom to be very engaged with the children both in attending to their needs, and playing with them working on skill activities such as walking, and social engagement. The interactions in the preschool room were specific activity focused with serving lunch, and preparing for nap time. In the school age room the children were engaged in self-directed center play with the teacher moving through the room and playing with them. All of the teachers used calm and engaging tones of voice when speaking with the children. Good behavior management techniques were observed with the

teachers providing reminders, using redirection, and positive recognition though there were differences of implementation between the teachers. One example was a child that was having a difficult time following directions in a classroom where the teacher was using a more directive approach that included physical redirection with attempting to lead the child back to the desired activity. Brittney did assist the teacher with using techniques of providing the child options that allowed the child choices of acceptable behavior options.

Good health and safety practices were observed during the visit. I was not able to observe a diaper change on the day of my visit but the teacher in the infant room is a long term employee who has been with the center for several years and has demonstrated good diapering practices in the past, and was able to recount the required procedural steps during the visit. Good hand washing practices were observed for both staff and children. This included situations when children were arriving from school after lunch had been served and the teachers reminding the children who were joining the class to wash their hands before eating. Chemical cleaners, medications, personal items, and other things that could pose a safety risk to children were stored in areas where they were not accessible. Over the counter medications and sun screens are labeled with the name of the individual to whom it belongs. There were no children taking any medications on the day of my visit. The center did have allergy plans in place for those children with diagnosed allergies. First aid kits are maintained in classrooms and the center did obtain new kits with expanded materials necessary to address most common first aid needs. There were no infants under 1 year of age sleeping on the day of my visit but safe sleep requirements were reviewed. It was noted that cots for older children did not have cot sheets or some other bedding which could be removed and laundered and it was reviewed that this is required.

As noted lunch was served during the time of the visit. Meals are contracted through the local adult care facility and brought into the center in coolers for hot/cold temperature holding. The center does have an electric roaster, and refrigerators to maintain hot and cold holding temperatures until meals are served. Refrigerators are present in each classroom and thermometers were present in all refrigeration/freezer units as required. The center does maintain some food at the center and good food storage and handling practices were generally observed for both refrigerated and dry pantry items but there were a few pantry items where bulk packaging bags had been rolled closed. It was reviewed that all food items whether intended for child consumption or not need to be placed in air tight sealable food grade containers once the original manufacturing seal has been broken to reduce the risk of being an attractant to insects and rodents, and spoilage. Meals are served to the children pre-portioned and the staff do provide supervision at the tables. Good food handling practices were observed with the staff wearing food service gloves when plating meals and handling food. Measured scoops were used to ensure that each child received a full portion. A copy of the menu had been posted and did identify a good variety of nutritious meal options. During the visit as noted children were arriving to the center from school during the lunch service. One child did arrive that had eaten lunch at school but identified they were hungry and the staff did make that child a peanut butter sandwich. It was also noted that several children had brought sack lunches from home and while they did appear to have good nutritional content it was reviewed that if the children were preschool age the center would need to supplement those meals as needed to ensure that children did have a credible meal as identified by the Child and Adult Care Food program even if the center were not participating in that program for reimbursement.

The center does have two playground areas with one for older school age children, one for younger infants through preschool age children. The school age playground has a fenced area with climbing equipment, a paved basketball court, and a large open grassy area. Pea gravel is used for fall surfacing beneath climbing structures. Shade is provided by a covered sandbox area, and the climbing structure. The equipment was observed to older and showing wear but was in good condition. The pea gravel used for fall surfacing has developed a hard pan layer especially in high traffic areas such that there is insufficient depth of material. The center will need to assess the fall surfacing in the spring and either aerate, or supplement the pea gravel to ensure a minimum depth of 9 inches of loose material. Use of climbing equipment needs to be discontinued until such time that the fall surfacing has been corrected. The other playground is of newer construction which was completed in 2023 and consists of a fenced area with an awning cover and artificial turf with no climbing structures. During the visit the center was make use of the interior hallways for large motor skills play. Brittney stated that the center was doing this when the weather conditions were not conducive to outdoor play. The equipment and toys present were such that it suggested this has been done on an on-going basis, and included large pedal cars and other items that were a concern for being a hazard for emergency evacuation. It was reviewed that hallways are not approved for programming activities and cannot be used in this manner.

All required notices were posted in an area readily accessible and visible to parents and visitors. Postings for emergency evacuation were present in all rooms. In reviewing administrative records the center did have a self-audit system for tracking required information for child files which was found to be accurate when compared to randomly selected files. The self-audit did identify 13 files needed an updated physical however it was noted that the self-audit identified 38 children despite Brittney identifying that there are currently only 26 children attending the center. In reviewing staff files the center did not have any kind of self audit to track information. When reviewing staff files the first 3 selected all had missing or expired elements including background checks for all 3. Brittney did acknowledge that she had not reviewed employee files and they were not complete. A form identifying all required documentation for staff files was sent to Brittney with instruction to complete and return the information by the end of the week. That information was received on 01-07-24 and identified that of the 9 employees current documentation was missing for 3 Iowa SING checks, 6 FBI fingerprint checks, 3 physicals, 3 1st Aid/CPR, 3 Mandatory Abuse Reporting, and 3 Essentials of Child Care training. Brittney did identify that

she had scheduled appointments for staff to update background checks, 1st Aid/CPR training was scheduled for January 15 for those that needed it, and staff needing physicals. In reviewing required inspection logs and certificates all were current and available with the exception Playground inspections which had not been completed since 2023. It was reviewed that the playground must be inspected and documentation of that inspection maintained monthly. Forms were sent to the center to begin conducting and documenting those inspections.

III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:

The center had a recent change in the director role with Brittney. Brittney does bring a strong background in her education and experience to the center and her role as a director. Brittney does appear to be very motivated to help the center improve and grow as exemplified by both her engagement which was observed in classrooms during the visit, and her quick response to the identified licensing concerns.

Brittney stated that the center has applied for grants to improve the physical facilities for new flooring in the infant/toddler room. The center has also received grants to obtain new equipment, toys, and materials for the children.

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

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, Chiropractor 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: 13

109.11(3)a: Center shall ensure that: Facility and premises are sanitary, safe, and hazard free. Adequate indoor and outdoor space is provided. The outdoor area shall include safe play equipment and area of shade. Sufficient space provided for dining. Sufficient lighting shall be provided. Sufficient ventilation. Sufficient heating. sufficient cooling. Sufficient bathroom and diapering facilities. Equipment, including kitchen appliances, are maintained so as not to result in burns, shock, or injury to children. Sanitation and safety procedures for the center are developed and implemented to reduce risk or injury or harm to children and reduce transmission of disease.

109.11(3)d: Record of monthly inspections of outdoor recreation area and equipment shall be kept.

109.12(4): Sufficient toilet articles are provided for handwashing.Sufficient and safe indoor play equipment, materials, and furniture that conforms with CPSC or ASTM.Play equipment, materials, and furniture meet the developmental, activity, and special needs of the children.Room's arrangement does not obstruct the direct observation of children.Individual covered mats, beds, or cots, and appropriate bedding is provided for all children who nap.Procedures are developed and implemented to maintain equipment and materials in a sanitary manner.Sufficient spacing is maintained between equipment to reduce transmission of disease and allow ease of movement by children and staff to respond to activities and care needs.Sanitary procedures are followed for use and storage of personal hygiene articles.

V. SPECIAL NOTES/RECOMMENDATIONS:

A full license is recommended at this time. Please provide a written response to the licensing consultant identifying a plan of action to correct and maintain those aspects cited as not meeting licensing standards and identifying an anticipated date of compliance. At least one visit will be made to the center during the following year.

*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.