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

**Name of Center:** Little Sprouts Daycare LLC **Enrollment:** 45 **License ID No. (Reapplications)** 51622

**Street:** 121 N Dodge ST **City:** Algona Iowa **Zip** 50511 **County:** Kossuth

**Mailing Address:** 121 N Dodge ST, Algona, IA, 50511

**Director's Name:** Samantha Elbert (owner) **Phone Number:** 515-341-5041

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

**Date(s) of Visit:** 08-08-2024

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

**LICENSING VISITS**

**New Application** **Re-Application** X **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:** 06-16-2023

**Comments :**

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

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

**Accredition:** Accredited NAEYC NSACA Other X NA

**Program Serves:** X Infants (0-23 mo.) X 2 Years X Preschool-Age 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 | 17 | 25 | 10 | 78 |
| Summer | | | | | 0 |

**QRS Rating:** 1

| RECOMMENDATION FOR LICENSE: | |
|---|---|
| X | **FULL** license from 10-01-2023 to 10-01-2025 |
| | **PROVISIONAL** license from |
| | **DENIAL** of initial application |
| | **SUSPENSION** of license |
| | **REVOCATION** of license |

**Licensing Consultant:** Raymond Salsbury **Date:** 08-09-2024

**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 Little Sprouts Daycare on 08-08-24 where I met with Samantha Elbert who is the owner and director of the center. Samantha is well qualified for the director position based on her education, experience, and on-going training in early childhood care. Samantha is also a Registered Nurse. The program is located in a free standing building in Algona that has been remodeled for use as a child care center. The center was given permission to open in 2021. The center provides programming serving infants through school age children. There are currently 45 children enrolled in the center served by 12 staff. All aspects of the program subject to Licensing Standards were reviewed during the visit.

The physical structure and layout of the building remains the same as identified in the prior visits. The building is located in the downtown area of Algona and does have some attached outdoor space. The building has two levels with infants and toddlers on the upper level, and older children on the lower. Windows along the exterior walls provide natural light, a view of the outdoors, and ventilation for all classrooms on the main level with the exception of the space used for older mobile infants which is an interior room. The lower level has three classrooms though only two are used for programming during the school year. During the summer one room is used for the 3 year old children, one for the 4-5 year old children, and one for the school age children. The classrooms used for 3 year olds and school age children during the summer have windows on the upper part of that wall that provide natural light, and the other classroom is an interior space that makes use of artificial lighting. Each room has secondary exits from the room. All exits were maintained to be clear of obstruction, and opened easily and freely. Restrooms are located off a main corridor, and an area accessed through the director office on the upper level. The restroom off the main corridor has both a regular, and toddler sized toilet. On the lower level restrooms are also located off main corridors. Additional sinks are located in each programming space to allow for hand washing. Changing stations are located in the infant and toddler rooms with the required changing procedures posting present. There were no concerns regarding construction or maintenance noted. Each room has a open floor plan with activity centers created through the placement of furniture and play structures that are arranged so as to not create any blind areas. The variety and complexity of activity centers increases in classrooms as the age of the children increases.

All classrooms have options of large/small manipulatives, art/crafts, and reading. Older age classrooms also add options of dramatic play, group learning, math/science, and music/media, and light tables. The toys and materials and those that were present were generally observed to be in good repair and appropriate to the ages of the children. There were some toys in classrooms with the infants and toddlers that contained small parts which could break off and present a choking hazard. Items and toys with parts less than 1 1/4 inches diameter, and 2 1/4 inches in length need to be removed from classrooms with children under 3 years of age, and should be monitored for children 3-4 years of age who may still be prone to mouthing items. Additionally some toys were beginning to near the end of their useful life with wear and minor damage and should be repaired or replaced. Daily schedules were posted in the classrooms. The program uses a center wide curriculum to identify learning concepts and activities. It was noted that while both the schedule and curriculum were posted much of the focus appeared to be child interest self directed play. While many centers have a less structured program during the summer months continuing to follow a schedule and curriculum does help to ensure that children learn and maintain skills, and also helps to reduce boredom and behavioral issues. Ratio was maintained in each classroom as required by age. Good interactions were observed during the visit with all staff being engaged and playing with the children

or attending to their needs. The teachers in each classroom used positive behavior management approaches such as redirection, and speaking to children in calm tones using positive word choices. This approach was successful in that there were no significant behavioral concerns observed during the time of the visit.

Good health and safety practices were generally observed. During the visit I was able to observed several diaper changes in different classrooms and while staff did follow the posted procedures each missed some element such that the center is likely overestimating the effectiveness of disease transmission practices. As examples one staff did not wear gloves but did not wash her hands or use a hand sanitizer between handling soiled and clean items. Another did not wash the child's hands before returning the child to the programming area but waited until after having washed her hands. One staff was observed to wipe changing stations dry immediately after spraying the disinfectant such that it did not have sufficient time to dwell, and one staff was observed to use the same towel to wipe changing stations for several uses. Over the counter medications were labeled with the name of the individual to whom it belonged. Chemical cleaners, medications, first aid kits, purses and other items that could present a safety risk were stored in areas that were not accessible to children. The center does maintain first aid kits in each classroom and in the office and taken as a whole are equipped with materials necessary to address most common first aid needs. Safe sleep practices were being followed in all classrooms with infants under 1 year of age. Cots with appropriate bedding were available for older children.

The center has an outdoor playground which contains a soft surface area making use of rubber mulch, a paved area, and an area for sand play. There was one small climbing structures present on the playground which was placed over the rubber mulch. It was reviewed that if the center is using general landscaping rubber mulch that does not identify specific ASTM Performance Standards certification that the depth of material should be increased to a minimum 6 inches depth. There are a variety of balls, riding toys, a crawling tunnel, and other items for the children to play with. Due to the commercial nature of the location the space is fully enclosed by a tall wood fence which was observed to be in good repair. Shade is provided by an extended overhang, and the building but is limited based on the time of day, and seasonal positioning of the sun. The center also makes use of off site activities and facilities such as going to local parks, the library, and movies.

The center does have a kitchen and meals are prepared on site. Good food storage practices were observed with items placed in air tight sealable food grade containers after the original packaging seal had been broken. The kitchen was observed to be clean with no evidence of insect or rodent infestation noted. Good food preparation and handling practices were observed with the staff washing their hands before handling food and using food service gloves. Meals are pre-portioned by staff and served in the classrooms with children being provided additional servings if they are still hungry. Supervision is provided at the tables. A planned menu is posted and was followed on the day of my visit. The center has removed most of the items previously identified as not being credible but a couple items were observed such as hotdogs that were not 100% beef. While the center is participating in the Child and Adult Care Food Program (CACFP) those guidelines are still required to be met. Information regarding determining credible food options was provided to the center.

In reviewing administrative records all required notices were posted in an area that was readily visible and accessible to parents and visitors. The center uses the Bright Wheel application to communicate with parents and maintain child records. The center does provide staff members with a cell phone to be used during work hours to access the app, and to make phone calls if needed. Good documentation of daily infant reports was maintained with the staff using photographs as a way to identify the daily activities and disposition of the children. The Bright Wheel app, and hard copy files are used to maintain enrollment information about children and staff but the center also maintains hard copy documentation. When reviewing child files a random sample of 6 files were reviewed and each was complete though one had a copy of a physical which was not dated by the medical provider. In reviewing staff files a random sample of 4 files were reviewed and again found to contain all required information thought one file contained a physical that while having just been completed was not on the required form and would be considered invalid. All
inspection logs and certificates were available and current.

**III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:**

Samantha identified that the center does have several staff who have now been with the program for 1 or more years. This has helped to create stability, and improve programming as staff receive additional training and become more knowledgeable about the center philosophy and approach to child care.

The center has continued to see growth over the past couple of years with completing renovations, increasing child enrollment, and acquiring materials.

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

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.
-- Toys with parts less than 1 1/4 inches diameter and 2 1/4 inches length are considered choking hazards and need to be removed from classrooms serving children under 3 years of age. Toys and materials that are damaged should be repaired or replaced.

109.12(5)b: Infants diapered in a sanitary manner as needed in central diapering area.One changing table for every 15 infants/toddlers needing diaper changes.Diapering, sanitation, and handwashing procedures posted and implemented in central diapering area.
-- Single elements were missed in several diapering procedures including not degloving/washing hands between handling soiled/clean materials, not washing infant hands before returning them to programming spaces, not pre-cleaning surfaces before applying disinfectants.

**V. SPECIAL NOTES/RECOMMENDATIONS:**

A full license will remain in effect 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 next 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.