



Iowa Department of Human Services

Kim Reynolds
Governor

Adam Gregg
Lt. Governor

Kelly K. Garcia
Director

08/20/2019

Cheryl Mathis
515 Cedar ST
Burlington, IA 52601

Dear Child Care Provider:

This letter is in regards to the compliance visit at your Registered Child Development Home A conducted on 08/19/2019. Iowa Code Chapter 237A and 441 Iowa Administrative Code, Chapter 110, describes specific requirements that must be met by a Registered Child Development Home. You are not a participant in the voluntary Quality Rating and Improvement System. The following areas were out of compliance at the time of the visit:

441 IAC 110.7 **Provider Requirements**

441 IAC 110.8 Standards. Conditions in the home are safe, sanitary, and free of hazards.

441 IAC 110.8(2) **Use of Outdoor Space**

441 IAC 110.8(2) "a" A safe outdoor play area shall be maintained in good condition throughout the year. The play area shall be fenced off when located on a busy thoroughfare or near a hazard which may be injurious to a child, and shall have both sunshine and shade areas. The play area shall be kept free from litter, rubbish, and flammable materials and shall be free from contamination by drainage or ponding of sewage, household waste, or storm water.

441 IAC 110.8(2) "b" When there is a swimming or wading pool on the premises:
1. A wading pool shall be drained daily and shall be inaccessible to children when it is not in use.
2. An aboveground or in-ground swimming pool that is not fenced shall be covered whenever the pool is not in use. The cover shall meet or exceed the ASTM International (formerly known as the American Society for Testing and Materials) specification intended to reduce the risk of drowning by inhibiting access to the water by children under five years of age.
3. An uncovered aboveground swimming pool shall be enclosed with an approved fence that is non-climbable and has a minimum height of four feet.
4. An uncovered in-ground swimming pool shall be enclosed with a fence that is non-climbable and is at least four feet high and flush with the ground.

441 IAC 110.8(5) **Safe Sleep**

441 IAC 110.8(8) Activity Program. There is an activity program and it promotes self-esteem and exploration.

a. Activity program includes active play.
b. Activity program includes quiet play.
c. Activity program includes activities for large muscle development, such as running, climbing and riding toys.
d. Activity program includes activities for small muscle development, such as coloring, puzzles, finger plays and play dough.
e. Play equipment and materials in a safe condition, for both indoor and outdoor activities which are developmentally appropriate for the ages and number of children present.

441 IAC 110.9(1)**A provider file is maintained and shall contain the following:**

441 IAC 110.9(1)“ a”

A physician's examination report for the provider and all members of the provider's household aged 18 years or older. Acceptable physical examinations shall be documented on Form 470-5152, Child Care Provider Physical Examination Report. All children residing in the household must have medical documentation outlined in 110.9(4) “d”, 110.9(4) “f”, and 110.9(4) “g”

441 IAC 110.9(4)

Children's Files. An individual file for each child shall be maintained and updated annually or when the provider becomes aware of changes. 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
 1. The date of the physical examination shall not be more than 12 months before the child's first day of attendance at the child development home.
 2. The written report shall include past health history, status of present health, allergies and restrictive conditions, and recommendations for continued care when necessary.
 3. 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 physical examination report.
 4. The examination report or statement of health status shall be on file before the child's first day of care
- e. For children under the age of 6, 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 enrolled in school, a statement of health status signed by the parent or legal guardian may be substituted for the physician statement.
- f. For each school-age child, on the first day of attendance, documentation of a physical examination that was completed at the time of school enrollment or since.
- 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. Documentation that is signed by the parent and 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.
- j. Written permission from the parent for the child to attend activities away from the child development home.
- k. Injury report forms documenting injuries requiring first aid or medical care
- l. 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:

Cheryl needs to pick up branches, stick pile and minor trash in her outdoor play area. Cheryl needs to cover her grills (x2) and remove lighter fluid from the area in addition to her Tiki torch fuel canisters.

Cheryl needs to drain her above ground pool with water in it. The water needs to be completely drained and the pool removed from the area. Cheryl signed a safety plan with the department during today's visit to comply with this expectation.

Cheryl needs to show documentation of a current physical for Kamron, Karon and Anaia on the Childcare Provider Physical Examination Report form.

441 IAC 110.9(4) Children's Files. An individual file for each child shall be maintained and updated annually or when the provider becomes aware of changes. The file shall contain:

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. Need for T.S., K.L.

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. Need for K.L.>

A signed medical consent from the parent authorizing emergency treatment. Need for K.L. Need doctor's information on the form for R.S., K.S., T.S.

An admission physical examination report signed by a licensed physician or designee in a clinic supervised by a licensed physician

The date of the physical examination shall not be more than 12 months before the child's first day of attendance at the child development home.

The written report shall include past health history, status of present health, allergies and restrictive conditions, and recommendations for continued care when necessary. Need physical for R.S., K.S.

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 physical examination report. Need school-aged health status form J.M.(6), T.S.

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. Need updated physical for E.D.(4).

For each school-age child, on the first day of attendance, documentation of a physical examination that was completed at the time of school enrollment or since. Need enrollment physical for T.S.

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. Need for T.S. Need signature and date on the form for R.S., K.S. Need update for E.D.(4).

A list that is signed by the parent and 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. Need for K.L. Need date signed by parent on form for T.S. Need parent signature and date on form for R.S.>, K.S.

Written permission from the parent for the child to attend activities away from the child development home. Need for K.L.

Suggestions for Improvement:

Recommendation:

Based on the items out of compliance listed above, you will be required to have a recheck or follow up visit to your home either on or after 10/9/19.

[] 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 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.

Based on the items out of compliance listed above, you will be required to have a recheck or follow up visit to your home.

Please do not hesitate to contact me at DHS at (319) 208-5521/creckli@dhs.state.ia.us if you have any questions regarding this letter.

Sincerely,

Chad Reckling

Social Worker II

Machelle Pezley

Social Work Supervisor

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

As you plan your future trainings to meet your 24 hours of training requirement, please remember that you can access the approved training by going to http://www.dhs.state.ia.us/Consumers/Child_Care/Professional_Development.html

You may also access training at: <https://ccmis.dhs.state.ia.us/trainingregistry/>

All providers need to maintain compliance with rules set out in Iowa Administrative Code, Chapter 110, which includes: 441 IAC 110.5(1): Check with the appropriate authorities to determine how the following local, state, or federal laws apply to you: • Zoning code • Building code • Fire code • Business license • State and federal income tax • Unemployment insurance • Worker's Compensation • Minimum wage and hour requirements • OSHA • Americans with Disabilities Act (ADA).