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

Name of Center: Ready, Set, Grow Learning Center **Enrollment:** 52 **License ID No. (Reapplications)** 47826

Street: 101 W 5th St **City:** Alta Iowa **Zip** 51002 **County:** Buena Vista

Mailing Address: 101 W 5th St, Alta, IA, 51002

Director's Name: Mandi Lange **Phone Number:** 712-200-4250

On-Site Supervisor(s): Nikita Anderson **E-Mail:** readysetgrowbv@gmail.com

Date(s) of Visit: 06-16-2023

Licensing Visit X **Unannounced Visit** X **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: 07-10-2023

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	28	27	26	76	157
Summer					0

QRS Rating: N/A

RECOMMENDATION FOR LICENSE:	
X	**FULL** license from 08-01-2022 to 08-01-2024
	PROVISIONAL license from
	DENIAL of initial application
	SUSPENSION of license
	REVOCATION of license

Licensing Consultant: Raymond Salsbury **Date:** 07-05-2023

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

NA

II. IDENTIFY THE AREAS OBSERVED ON THE VISIT:

An unannounced annual visit was made to the Ready Set Grow childcare center on 06-16-23 where I met with the center director, Mandi Lange, and assistant director, Nikita Anderson. Mandi took over as the acting director in 2020 and is qualified for the position based on her training and experience in early childhood care. The program is located in the old elementary school in Alta. The center is operated as a separate non-profit entity overseen by a board of directors but does have a strong collaborative relationship with the school. The program shares space in the building with school administrative offices, a formal preschool operated by the school under the authority of the Department of Education, and other community based programs. The program provides daycare services to infants through school age children. There are approximately 52 children enrolled in the program served by 24 staff. All aspects of the program subject to licensing standards were reviewed during the visit.

The physical layout and design of the center and classrooms remains the same as in prior visits. The center currently makes use of 5 classrooms with the infants being separated into two rooms where the intervening door has been removed as a condition of fire code and a mobile gate is used to limit pass through of the children between the rooms. During the visit the older infants had been moved to another classroom as a temporary arrangement due to the air conditioning unit for the room continually blowing the fuse breaker. The children in that room were using the classroom previously used by the 2 year old children with each subsequent age group being moved to the room used by the next older age group and the older children using the classroom that is used for the preschool program. It was reviewed that the center does need to verify with the Fire Marshal that moving the children between classrooms for temporary operation is allowable as the classrooms have different options for emergency fire evacuation. One other observed change is that the center is not using the lower level area due to prior issues related to water seeping into the area.

Each classroom was observed to be generally well maintained with a few minor repair concerns such as a loose/damaged cabinet doors/hardware, damaged paint and plaster, but nothing that rose to the level of being an immediate concern. Each classroom has a large bank of windows along the exterior walls that provide light, ventilation, a view of the outdoors, and serve as secondary emergency egress in several of the rooms. The infant rooms do have an exterior door that provides direct emergency egress to the outdoors with an open passage between the two rooms. All exits were clear of obstruction and opened easily and freely. Emergency evacuation notices that contain both written and diagram instructions were posted by all exits from all programming spaces and those that are missing need to be replaced. Each classroom has direct access to toilets and sinks from the classrooms. The infant rooms, 2 year old, and 3/4 year old classrooms also have changing stations present the rooms. The required postings for diaper changes were not present in the 2, and 3/4 year old rooms as required. Copies of the required hand washing postings were present in all classrooms by sinks used for hand washing. Window mounted air conditioning units were present in each classroom and electrical cords for those units have been secured so as not to be and entanglement risk. The preschool classroom did have a mounted video screen where the cords were not secured and options for addressing were discussed.

Each room is divided into activity centers through the use of furnishing, shelves, and play structures which have been arranged so as not to create any blind areas. The toys and equipment present in each room and activity center were generally in good repair and appropriate to the ages of the children present. There were a few toys with small parts that

should be removed from the older infant and 2 year old classrooms. It was reviewed that toys with parts less than 1 1/4 inches in diameter and 2 1/4 inches in length can be a choking risk to children under 3 years of age and should be moved to classrooms with older children. Ratio was maintained in classrooms as required by age. A copy of the daily schedule and curriculum were posted in each classroom.

Good interactions were observed throughout the visit with the staff being actively engaged with the children and attending to their needs. Lunch was being served during the visit, and then preparing the children for quiet/nap time. One issue that was observed during lunch was with children who were falling asleep at the table. The staff did attempt to keep the child awake in order to finish lunch which resulted in the child becoming very frustrated and crying. It was reviewed that children are not required to finish a meal and if a child is falling asleep staff should move the chidl to a cot. If a child had not yet finished a meal it could be placed in a refrigerator for the child to have later when they wake up. Good behavior management practices were observed with staff using encouragement and positive recognition for appropriate behavior, and redirection and problem solving when issues did arise.

Good health and safety policies and practices were generally in place. I was not able to observe a diaper change during the visit but the staff were able to recite the proper procedures. Good cleaning practices were observed with staff waiting for children to be out of the immediate area before using chemical cleaners, and fully saturating surfaces when treating them. Chemical cleaners and other items that could contain materials that may pose a risk to children were stored in areas where they were not accessible. Over the counter medications were labeled and stored in areas where they were not accessible to children. First aid kits are maintained in classrooms, and the center office and taken as a whole did have materials sufficient to address most common first aid needs. The center did have information and response plans posted for children with identified allergies. Good hand washing practices were observed with staff and children washing their hands as required, and the staff ensuring that the children washed their hands in an effective manner. Good safe sleep practices were observed for children under 1 year of age. One issue that was observed in classrooms with older children where cots are used is that the cots had been placed out prior to nap time. This resulted in the children playing and walking on cots belonging to other children which increased the risk of disease transmission. It was reviewed that laying cots out as each child is ready to lay down is one option to address this concern.

The center has use of the kitchen space which was observed to be clean. Good food storage and handling practices were observed in the kitchen and classrooms with food items placed in air tight sealable food grade containers once the original packaging seal has been broken. There was no indication of any insect or rodent infestation. A menu is posted which provides a good variety of nutritious meal options for the children. The meal served on the day of my visit did match the planned menu of chicken stir-fry, peaches, and milk. Meals are served in the classrooms. Staff did use food service gloves, and measured scoops when plating food for children. While the staff did not eat with the children supervision was provided at the tables.

The center has a small playground spaced located along the west wall of the facility which is fenced to define separate spaces for a preschool area, and an infant toddler area. The playground does not have any climbing structure but does have ground based play structures. The toys and materials present were observed to be in good repair. Shade in that area is limited to that which is provided by the building during the morning and early afternoon, and a tree that would provide shade in the late afternoon. A small shade structure is present for the infant/toddler playground area. The school did complete installation of a new playground structure for their formal preschool program which is also available for use by the daycare. The equipment was in good repair and appeared to have been properly installed. A unitary pour in place foam product is used for fall surfacing.

In reviewing administrative records all required notices were posted in an area readily accessible and visible to parents and visitors. In reviewing child files a random selection of files were reviewed and compared to the self-audit completed by the center which was found to be accurate. The self-audit identified 21 files that needed an initial or updated physical. In reviewing the employee files the self-audit identified that a significant number of the employees were missing at least one required element. This included some files that did not have documentation of current background checks, physicals, and training. It was noted that the center was still in the process of reviewing the staff files and compiling the self-audit so may have had information that was identified. It was agreed that the center would complete the file review and provide a plan of action on how files would be updated and maintained going forward. One other issue that as noted is the center does use an on-line application, (Brite Wheel) to communicate with parents including the completion of daily sheets for children under 24 months. In reviewing the information the program does have the ability to log all required information but staff were not documenting daily activities or disposition as required. This was identified in the prior report as well and it was discussed that one option would be for staff to use the photo function of the application to provide visual depictions of infant activities and mood. It was reviewed that if doing so staff should take photos of each child both in the morning and afternoon so show any changes in functioning. All inspection logs and certificates were available and current with the exception of Radon Testing which could not be located on the day of the visit. Again this was cited in the prior visit. The center also needs to ensure that a carbon monoxide detector is present on each floor in which child programming is provided.

III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:

The center does have access to the new playground structure which provides the children with a more engaging and dynamic outdoor curriculum option.

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

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.
-- Documentation not present in all files.

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.
-- Documentation not present in all files.

109.9(1)e: All files contain documentation to indicate that ongoing staff training requirements are met, including current certifications in first aid/CPR and mandatory child abuse training.
-- Documentation not present in all files.

109.9(4): Daily written records are maintained for each child under two years of age and include time periods slept, amount of/time food consumed, time/irregularities of elimination patterns, general disposition, and general summary of activities.
-- Daily records did not include information on child activities or disposition as required. -- NOTE: 2nd Year Cited

109.11(7)b: Centers at ground level that use basement area as program space, or have a basement beneath program space: Testing and plan for remedy of radon is conducted.
-- Documentation not present on the day of the visit. -- NOTE: 2nd Year Cited

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.
-- Diapering procedures were not posted by all changing stations as required.

V. SPECIAL NOTES/RECOMMENDATIONS:

A full license will remain in effect at this time. Please provide a written response identifying a plan to correct and maintain those issues cited as not meeting licensing standards and a date of anticipated 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.