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

Name of Center: Seymour CSD Early Childhood Center **Enrollment:** 20 **License ID No. (Reapplications)** 51992

Street: 100 S Park AVE **City:** Seymour Iowa **Zip** 52590 **County:** Wayne

Mailing Address: 100 S Park AVE, Seymour, IA, 52590

Director's Name: Shannon Starr **Phone Number:** 641-895-6350

On-Site Supervisor(s): Tara Trimble **E-Mail:** tara.trimble@seymourcsd.org

Date(s) of Visit: 06-26-2024

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

LICENSING VISITS

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

Signed Application (470-0722) Received X **Yes** **No** **NA** **Date Signed:** 08-28-2024

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

Date Inspected: 09-30-2022

Comments : due every 3 years, performed by State Fire Marshal

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 X 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	15	10	15	15	55
Summer					0

QRS Rating: N/A

RECOMMENDATION FOR LICENSE:	
X	**FULL** license from 10-01-2024 to 10-01-2026
	PROVISIONAL license from
	DENIAL of initial application
	SUSPENSION of license
	REVOCATION of license

Licensing Consultant: Jill Seibert **Date:** 08-28-2024

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

II. IDENTIFY THE AREAS OBSERVED ON THE VISIT:

Seymour CSD Early Childhood Center is located at in Seymour at the Seymour CSD Elementary School. The program is owned and operated by Seymour School District. It consists of two classrooms within the school building and use of the cafeteria for older preschool or school age children before and after school, on no school days and in the summer. The program has access to the school gymnasium, school library and restrooms.

On 6/26/24 I made an unannounced licensing visit to Seymour CSD Early Childhood Center and met with Director and School Principal Shannon Starr. Two licensing visits were made in 2022 to the program preparing for Permission to Open. The program opened on 10/3/2022. The center Director of this program was Shannon Starr on the date of the visit. Ms. Starr also acts as the Seymour School Principal and exceeds 100 points required to be Director. Tara Trimble was onsite supervisor over this site and has now been promoted to Director. She meets requirements as Director. Prior to accepting the OSS position, she served as a paraeducator at the school since 2012. At times she works in ratio. Director Starr has been promoted to K-12 Principal and remains in the building and is present throughout the day for support.

All rooms are spacious and contain both handwashing and food preparation sinks. Visitors to the center can enter the main school entrance or directly to the classroom. The main entrance doors are locked and anyone visiting must be buzzed in. The preschool room door is shut and locked during the day. All children are signed in and out. Program staff reported that if need be, the program will go on lock-down, just as the school will to assure child safety.

The program offers care to children ages 8 weeks to 3 years old, as well as care to older children before and after school and in the summer. Full and half-day rates are available. The program accepts childcare assistance.

Program Observations:

The classrooms are self-contained. They are bright, clean, and attractive and equipped with a satisfactory variety of child sized furniture, equipment, toys, games, and activities for the children. The curriculum is Creative Curriculum. Interest centers available to the children include: blocks, dramatic play, children's literature, toys and games, puzzles and small manipulatives, music and movement, art, science and discovery, sensory tables..

A parent board is present in the infant room. Books, hard surface toys, and creative dramatics are present in both rooms. Materials were organized and child accessible. The center appears to have an adequate amount of equipment for the children including toys and games, activities that appear to be of high quality.

Center Nutrition Practices Observed:

The program practices family style dining in the classroom. The program is not participating in the CACFP program, but plans to in the future. Menus are posted. Food was stored appropriately in the refrigerator and freezer. Thermometers were present. No food was expired. All open food was stored in sealed bags or containers. All food items being served should meet CACFP guidelines. Some items the school serves do not meet guidelines. Principal Starr worked with food

service on changes that need to be made the past two years.

Kitchen staff do dishes in a commercial grade sanitizer. Program staff wash dishes in the classrooms when needed. Staff mix bleach and water daily.

If any child in the program has food allergies, an allergy action plan must be present. Iowa Department of Public Health Child Care Nurse Consultant can assist the center in developing a plan if need arise.

Center Health and Safety:

Prescription and non-prescription medication procedures at the center are in accordance with licensing regulations, physician directions, and parental consent. A School Nurse is available 5 days a week. At least one staff in the program should have medication administration training.

Regulations regarding storage and maintenance of a first aid kit were reviewed. The labeled First Aid Kits were accessible to adults only. All items included from the latest list issued are in the kit. An ill/injured area is the nurse's office.

Regulations regarding environmental testing and the maintenance of any necessary detection equipment were reviewed. A new carbon monoxide detector was purchased and present. In case it should become unplugged, an alarm is sounded. Radon testing is mandatory. Updated testing is due every five years. The recorded level is below 4 pCiL. The Fuel Burning Appliance Inspection is due annually and conducted annually by the Division of Labor Services. The School is on Rural Water, so water testing is not required. A visual Lead Paint assessment is not required since the building was constructed after 1971. The windows in the school are new and can be opened. Heating is provided by a boiler system (steam heat). Ventilation was not an issue the days of the visit.

General regulations regarding safety were reviewed. The may have volunteers in the future. Volunteers should always be under the direct observation of staff. All volunteers and substitutes shall sign a statement indicating whether or not they have one of the following:
a. (1) Conviction of any law in any state or any record of founded child abuse or dependent adult abuse in any state.
(2) A communicable disease or other health concern that could pose a threat to the health, safety, or well-being of the children.
b. (1) Complete form 595-136 DHS Criminal History Record Check, Form B
(2) Complete Form 470-0643, Request for Child Abuse Information.
(3) Sign a statement indicating the volunteer or substitute has been informed of the volunteer's or substitutes responsibilities as a mandatory reporter.

We discussed space requirements which are 35 square feet of usable floor space per child. Cabinetry has been secured so it is not a potential toppling hazards.

Regulations regarding emergency plans and drills for fire and tornado were reviewed. Drills are recorded monthly per my observation of documentation.

Sanitation policies and procedures were discussed. The program utilized a bleach and water mix and also Clorox Anywhere for sanitizing and disinfecting. Food waste containers were covered.

The program should annually review IDPH recommendations for sanitizing and disinfecting. The program should use an approved disinfectant in the toileting areas vs. a sanitizer for food surfaces.

Regulations regarding staff and child hand washing were reviewed and hand washing posters and adequate supplies noted.

Cribs and cots are spaced at least 2 feet apart when children are sleeping. A plexi glass fence is present to keep older children and younger infants separated if necessary.

Center Playground:

The program utilizes the school outdoor play area for school age children. The program added equipment and space specifically for younger children including commercial climbing equipment. The designated outdoor play area is down the hallway and out a side door of the building. The children may utilize a large grassy area behind the Elementary School as well. The local CCNC may conduct an Injury Prevention Checklist upon request.

All outdoor toys should be inspected prior to spring and toys discarded or repaired if cracked, chipped or missing pedals, handlebars or other issues that could cause injury. Completed playground inspections were present. The Child Care Weather Watch is utilized if outdoor play is questionable due to varying weather conditions.

The First Aid Kit and emergency contacts are taken out each time the children go for walks or utilize the outdoor play area. Outdoor space requirements are 75 square feet per child. This should be followed when children are playing in the shed for gross motor activities.

Center Transportation Arrangements/Field Trips:

The school will provide transportation for the children for field trip purposes in the future. At this time the program will take walking field trips only. Parents sign field trip authorizations when children are enrolled in the program. First Aid kits and emergency contact information, as well as a CPR certified staff are present on walking field trips. Emergency medication and emergency contacts are also taken. Ratio for field trips will be followed.

Center Administrative Records:

Child misbehavior is addressed by Positive Behavior Interventions and Supports which establishes a separate behavior intervention plan for each child depending on the level of the child's social skills. Interventions include verbal reminders of appropriate behavior, direct instruction in problem solving skills, redirection, planned ignoring, positive reinforcement of appropriate behavior, and short time out periods of age appropriate length.

Incident reports are on file. Staff and child records are somewhat complete and well organized. Immunization records and physicals were reviewed. The children are not allowed to participate in the program without either one. Also reviewed were emergency contact/pick up authorization information as well as current medical and dental provider information.

All staff for this program now have current training, physicals and criminal background checks. No staff in the program are under 18 years of age.

Required written policies are provided to parents in the form of a parent handbook. Evacuation of immobile children is in the handbook in the Emergency Preparedness Plan. The handbook also contains a biting policy, limited access policies and unlimited access policies. An Emergency Preparedness Plan for the building has been developed. It is recommended that the center build an emergency preparedness kit in case of emergency. This kit has been partially built. The program has a specific Emergency Preparedness Plan and will train on it annually. They agreed to sign and date acknowledgement of such.

Required postings were present including Mandatory Reporter information, Child Care Consultant posting, No Smoking signage and the DHS License. The program is aware that communicable disease postings must be present when required.

III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:

Ratio is excellent.

The program meets a childcare need in the community.

The program is convenient for parents who have younger children and school age children.

The program consulted with Child Care Resource & Referral prior to opening. This is evident in the number of violations noted.

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

1. 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.
Number not in compliance: 3

2. 3. 109.9(2)b: All files contain sufficient information and authorization to allow the center to secure emergency medical and dental services at any time child is in center's care.
Number not in compliance for medical: 10
Number not in compliance for dental: 10

3. 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. Children were wearing teething necklaces. These could pose as strangulation or choking hazards. They have since been taken off. CORRECTED

4. 109.15(1): Center shall serve each child a full, nutritionally balanced meal as defined by CACFP guidelines. Staff shall provide supervision at table during snacks and meals. Children at center two hours or longer shall be offered food of not less than two hours and no more than three hours apart unless child is asleep. Some foods being served do not meet CACFP guidelines.

The center can reach out to CCR&R for guidance on any of these matters. HHS made a referral to Consultant Greenough on 8/28/24.

V. SPECIAL NOTES/RECOMMENDATIONS:

Based upon this review, it is recommended that this center remain in Full licensing status. The center is directed to correct issues identified above and continue to monitor day to day practice and adjust accordingly to continue to ensure licensing rule is met consistently. It is important to note, all HHS licensing standards and procedures must be maintained during the renewal period.

HHS encourages you to contact your local nurse consultant. Child Care Nurse Consultants work with child care and early education businesses. Businesses may call or send questions to a child care nurse consultant about health and safety policies, health programs, health of personnel, and specific child health or safety issues. Please visit the following website for more information. http://idph.iowa.gov/hcci/consultants.

HHS encourages you to contact Child Care Resource and Referral consultant. They offer centers assistance with meeting the DHS regulations, QRS, infant/toddler concerns, room arrangement and environment, developmental concerns, Best Practice information, CDA assistance, or any questions or concerns you may have. Please visit the following website for more information: http://www.iowaccrr.org Michelle Greenough is your consultant. I emailed Consultant Greenough after the visit asking that she provide guidance on CACFP questions if necessary last 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.