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

Name of Center: Bear Care **Enrollment:** 120 **License ID No. (Reapplications)** 46329

Street: 808 E Lucas ST **City:** Algona Iowa **Zip** 50511 **County:** Kossuth

Mailing Address: 808 E Lucas ST, Algona, IA, 50511

Director's Name: Sara Casey **Phone Number:** 515-341-7226

On-Site Supervisor(s): Sabrina Meraz **E-Mail:** caseys@bishopgarrigan.org

Date(s) of Visit: 01-29-2024

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

LICENSING VISITS

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

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

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

Date Inspected: 02-26-2024

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 School-Age

Get-Well Evening Care Special Needs

SCHEDULE: X Year-round School-Year Summer Only

HOURS:	*Year-round*	*School-Year*	*Summary Only*

LICENSE CAPACITY	Infants	2 Years	Preschool	School-Age	Capacity
General	29	17	47	15	108
Summer					0

QRS Rating: N/A

RECOMMENDATION FOR LICENSE:	
X	**FULL** license from 02-01-2024 to 02-01-2026
	PROVISIONAL license from
	DENIAL of initial application
	SUSPENSION of license
	REVOCATION of license

Licensing Consultant: Raymond Salsbury **Date:** 02-09-2024

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 Bear Care center on 01-29-24 where I met with center directors Sara Casey, and Sabrina Meraz. Both are well qualified for the position based on their experience, and training. The program is located in the Bishop Garrigan Catholic school in Algona and is overseen by the Archdiocese of Sioux City. The center provides daycare and preschool programming for infants and preschool age children, a formal 3 year old preschool program, and after school and summer programming for school age children. There are approximately 120 children enrolled in the center between the various programs served by 35 staff. All aspects of the program subject to licensing standards were reviewed during the visit.

The general layout and design of the program and buildings remains the same as in the prior visits. The program has a campus arrangement using various classrooms of the school building for older children, and the young infant care (birth - 12 months) in a renovated residential home that is on the same property as the school building. The layout of the school building rooms has a large room that is divided into two rooms by a pass-through work area and a small hallway with older infants on one side, and 3 year old children on the other. There are two classrooms on either side that are connected by doorways with 2 year old children in one, and preschool wrap around in the other. The center has two other rooms that have shared usage with one for the formal 3 year old preschool that operates on limited days and shares the space with the 4 year old preschool that is operated under the department of education authority. A final room is used for the after school programming at the end of the day. Each of the classrooms in the school building have windows located along the exterior walls which provide ample natural light, a view of the outdoors, ventilation, and secondary emergency egress. The older infant room also has a secondary emergency exit providing direct egress to the outdoors. A large archway opening connects the infant room to the 2 year old classroom but a barrier is in place to prevent intrusion by the older children. Each room was observed to be clean and arranged so as not to create any blind areas. Bathrooms are located off the main hallway with separate facilities for boys and girls though an additional bathroom is located directly across the hall from the 3 year old daycare room. Children are escorted to the restrooms as needed. The infant spaces and the 2 year old rooms have changing stations, and additional sinks in them to facilitate hand washing.

The young infant space as noted is a renovated residential building. All programming occurs on the main floor though there is a full basement which is used for an emergency storm shelter. The layout has a main area that would have served as a living/dining room space with two alcove rooms off that space which are used for cribs and sleeping areas. Both are accessed via large archway openings and are visible from the main programming room. A changing station is located in what would be considered a back bedroom. A full bathroom is present where the infants hands can be washed. During the visit the water temperature was measured to be 142 deg F and it was reviewed that this needs to be adjusted so that the temperature does not exceed 120 deg F at the spigot. The building has windows along the exterior walls in all rooms. There are several exits including one that was installed with a ramp to provide at grade egress for use with evacuation cribs. The programming rooms were observed to be clean. There were a few minor maintenance issues such as some cribs with loosening hardware and drywall damage but nothing that rose to the level of being an immediate safety concern.

Each room in both buildings had a good selection of toys and materials that were observed to be in good repair and generally appropriate to the ages of the children present. There were some toys that had been labeled as being manufactured

for food vendors as promotional items and these do need to be removed from the center. A daily schedule and copy of the planned curriculum were posted for each classroom in the main school building. The curriculum themes varied between the classrooms but generally consist of a general learning focus theme and specific learning concepts such as an identified letter, number, color, and shape.

Good interactions were observed throughout the visit with all staff being actively engaged with the children either attending to their needs such as changing diapers, or implementing specific curriculum activities. Ratio was maintained in each classroom as required by age with at least 2 staff present in each room. Good behavior management techniques were observed during the visit. The center does make use of positive behavior supports primarily implemented through the schedule and curriculum. By keeping the children engaged and focused on appropriate activities there were very few behavioral issues observed on the day of the visit and those that did arise were easily addressed with simple redirection.

The program does have good health and safety policies but some practices do need to be reviewed. During the time of my visit I was able to observe a diaper changes in both the infant house and the main school building. Changing procedures postings were present at all stations but staff did not wash the infants hands following changing and identified that they have not done so in the past. It was reviewed that children's hands must be washed following every diaper change, and that use of diaper wipes is not an acceptable alternative when soap and running water are available. In addition it was observed that children did not have their hands washed immediately prior to eating as required. With regard to cleaning the center is using an approved disinfectant but staff do need to read and follow the label directions to ensure that they are using the product in an effective manner. When storing chemical cleaners these do need to be placed in areas which are not accessible to children. The center does maintain first aid kits in the classrooms but also has access to the larger stores of materials located in the school office. The center did have children with diagnosed allergies and response plans were maintained for the children in the classrooms. Good safe sleep practices were generally observed in the infant setting for children under 1 year of age. There was however one child observed to be sleeping in a bouncer chair. The staff identified that this was being done at the parent's request due to the child having congestion and difficulty breathing when sleeping. It was reviewed that Safe Sleep does require that for centers to use alternate sleep positioning a note from the child's physician identifying the reasons, manner, and limitations of alternative sleep positioning.

Meals are prepared by the school cafeteria and a menu of planned meals and snacks is posted. A limited supply of snack crackers and other items are stored in cabinets and refrigerators in some of the classroom areas. Good food storage and handling practices were observed during the visit. Lunch was served during the time of my visit and good food service practices were observed. Food service gloves were worn when handling food and food service items. Meals were pre-portioned for the children with the teachers using measured scoops to ensure that each child received a full serving. The teachers did not eat with the children but did provide supervision at the tables during the meals.

The playground is located between the school and the infant house and is fully enclosed by fencing. The playground is intended for the older preschool and school age children. The playground has grassy, paved, and soft play areas. Pea gravel is used in the soft areas for fall surfacing beneath climbing structures and has developed a hardpan layer which will need to be aerated or supplemented in the spring once the ground has thawed. The equipment was generally observed to be in good repair though some of the climbing structures are made of wood and will need to be monitored for weathering and splintering. Mature trees provide shade.

In reviewing administrative records all required notices for consultant contact, mandatory abuse reporting, no smoking, and the center license were posted and readily visible to all parents and visitors in both locations. The center uses a self-audit system to track information in child and staff files. A random sample of both child and staff files were selected for review and compared to the self-audits which was found to be accurate. Based on the review and self-audit 9 child files were identified as needing a renewed physical. In reviewing employee files the center did have systemic issues of employees needing either an initial or a renewed physical, and ensuring that it was on the correct form. Staff training was also an issue for staff completing initial and on-going training. Sara and Sabrina did identify that the program has been exploring options for getting staff training completed including the option of closing the center for a teacher in-service day. All inspection logs and certificates were available and current.

III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:

The program has a very strong focus on curriculum and staff engagement which helps the children develop various skills, but also creates a very positive environment where there were only a few minor behavioral issues.

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

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.
-- Several staff files had missing, expired, or invalid physicals.

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.
-- Several staff had not completed required trainings include the initial training required within the first 90 days of employment, renewal of expired trainings, and on-going professional development.

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: 9

109.10(8): Children's hand washing: Center shall ensure staff assist children in personal hygiene. For each infant or child with a disability, a separate cloth for washing and one for rinsing may be used in place of running water. Children's hands shall be washed:Immediately before eating or participating in food service activity.After using the restroom or being diapered.After handling animals.
-- Children's hands were not washed following diapering as required and this was identified as being common practice. It was reviewed that children's hands must be washed following every diaper change regardless of whether the child touched any contaminated items or not. In addition children's hands were not washed immediately prior to lunch service.

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.
-- The water temperature of the Infant location was measured to be 142 deg F. Water used for handwashing must not exceed 120 deg. F. at the spigot and either heaters need to be turned down, or some other mechanical options such as mixer valves installed. The pea gravel used fall surfacing of the outdoor playground space has developed a hardpan layer and needs to aerated or supplemented to ensure a minimum of 9 inches of loose material.

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 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.