Health and Human Services

Iowa Department of Health And Human Services

CHILD CARE CENTER ANNUAL EVALUATION

Name of Center: Wee Wildcat Day Care

Provider No.: 7240

Address: 300 S Berwick St, Schaller, IA, 51053

County: Sac

Director's Name: Jackie Wandrey

On-Site Supervisor:

Phone Number: 7122754266

E-Mail: jwandrey@rvraptors.org

HHS Visit Date: 08/31/2026

Licensing Period: 11/01/2025 to 11/01/2027

Fire Inspection:

Date Inspected: 03/24/2026

Comments:

Report Visit Type:

- [ ] PTO
- [X] Licensing Visit
- [ ] Drop In
- [ ] Administrative Change

License Type:

- [X] Full
- [ ] Provisional

Quality initiative:

- [ ] Accrediation

Program Duration:

- [X] Year-Round
- [ ] School Year
- [ ] Summer Only

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HOURS:	*Year-round*	*School-Year*	*Summer Only*
Sunday			
Monday	6:00 AM to 6:00 PM		
Tuesday	6:00 AM to 6:00 PM		
Wednesday	6:00 AM to 6:00 PM		
Thursday	6:00 AM to 6:00 PM		
Friday	6:00 AM to 6:00 PM		
Saturday			

Program Population Served:

- [X] Infant(0-<24 Months)
- [X] Toddler
- [X] PreSchool
- [X] School Age
- [ ] All Ages

LICENSE CAPACITY	Infants	2 Years	Preschool	School-Aged	Capacity
General	20		12	33	65
Summer					0

1. Basic Overview

An unannounced annual visit was made to the Wee Wildcat daycare program on 08-31-26 where I met with center director Jackie Wandrey. Jackie is well qualified for the position with extensive experience and training in early childhood care having been with the center since it opened in 2008. This program is located in the Schaller Crestland elementary school. While having a strong collaborative relationship with the school the program is operated independently of the school and overseen by a separate board of directors. The program provides daycare services to infants through school age children. There are currently 41 children enrolled in the program served by 6 staff. All areas of the center subject to licensing standards were reviewed during the visit.

The general layout and design of the program remains the same as in the prior year. The program makes use of 2 classrooms with one for infants, and one for preschool and school age children. The center does have an on-going exception to policy allowing the mixed age groups for the non-infant classroom. Each classroom was observed to be clean with no immediate safety concerns noted due to design or maintenance. Each room has sinks in the room that allow for hand washing. Both rooms have changing stations present in the room, and the school age room also has a bathroom directly available from the programming space. Each room has a large bank of windows along the exterior walls that provide ample natural light, ventilation, and a view of the outdoors. The infant and school age rooms have a shared intervening door between them, and there is a door providing direct emergency egress to the outdoors in the school age room. All emergency exits opened easily and freely, and were clear of obstruction. The infant room uses low storage chests to further divide the room in to an active programming space, and an area used for feeding, and diapering. The mobility of the chests also allows the room to be reconfigured to create a space for non-mobile infants if needed. Activity centers are created through the placement of furniture and play structures that are arranged so as not to create any blind areas. Both classrooms were observed to be clean with no immediate maintenance issues noted.

CHILD CARE CENTER ANNUAL EVALUATION

2. Identify Observed Strengths of the program

Programming & Interactions:
The center does have an established lesson plan which does identify a general focus theme and specific learning concepts with activities to implement them. Good interactions were observed on the day of the visit with all staff being actively engaged with the children. In the mixed age group classroom this included the children moving between self-directed center play, large group activities, and lunch. In the infant room the teacher was very engaged with the children sitting and playing with them but also reinforcing learning by identifying items, colors, and textures. Each of the teachers presented with very positive attitudes and had very strong relationships with the children. The teachers used conversational tones and positive word choices when speaking with the children recognizing positive behaviors, and using simple suggestions and redirection to address any negative or inappropriate behaviors.

Health & Safety:
Good health and safety practices were generally observed during the time of my visit. I was able to observe a diaper and while the required procedures posting was present the teacher in the classroom did not wash the child's hands, nor was the changing station cleaned immediately following the diapering. It was reviewed that child must have their hands washed following every diaper change, and it is recommended that the changing station be cleaned immediately following diapering as waiting to do so prior to a diaper can result in staff forgetting and the station not being cleaned or cleaned ineffectively. Good handwashing practices were observed for older children with the staff escorting them to restrooms and providing supervision and assistance as needed. Chemical cleaners medications, personal belongings, and other items that could pose a safety risk to children were stored in areas where they were not accessible to children. There were some toys with small parts that could break off which would be a choking hazard in the combined age classroom and it was discussed that the staff will need to ensure that heighted supervision is provided ensure that younger children are not mouthing items. The center has a first aid kit stocked with materials necessary to address most common first aid needs, and also has access to the school nurse for more extensive health issues if needed. There were no children under one year of age attending but good safe sleep practices have been observed in the past. Older children make use of cots and appropriate bedding is available. Ratio was maintained in the center as required by age. S

Nutrition:
The center makes use of the school cafeteria for meal preparation but a limited number of food items are kept in the classrooms and good food storage practices were observed. The children do eat in the cafeteria at separate tables from the regular school children, and the staff sit and eat with the children during meals to provide supervision. I was able to observe lunch service and good food handling practices were observed with staff wearing food service gloves, pre-portioning meals, and replacing items that were dropped. A copy of the planned menu is posted and the meal served on the day of my visit did include healthy food options. The teachers did eat with the children to model good eating habits and to provide supervision at the tables.

Playground:
There are three playground spaces at the school that the center can make use of that include one with large school age climbing structures, a preschool space with a smaller climbing structure and crawling tunnel, and a grassy natural play area. The natural playground, and the preschool playground are both fenced and the fencing was observed to be in good repair. The climbing structure of the preschool area was observed to be in good repair. A unitary fall surfacing covers the entire play surface in the preschool playground. Large mature trees provide shade.

Administration:
A review of administrative records found all required notices for No Smoking, Consultant Contact, License Certificate, and Mandatory Abuse Reporting to be present and posted in an area readily visible to parents and visitors. Other required notices for emergency evacuation, emergency contacts, handwashing, diapering, daily schedule, and planned curriculum were also posted as required. Staff and child files were reviewed and found to contain all required documentation with the exception of 2 child files that needed a renewed physical which had recently expired. All required inspection logs and certificates were available and current. The center parent handbook was reviewed and several policies needed to be added or expanded to include all required information.

3. Identify the aspects that fall below the standard

CHILD CARE CENTER ANNUAL EVALUATION

109.4(1): Written policies on: Enrollment and discharge. Field trips and non-center activities. Discipline/Behavior/Biting. Nutrition.
Health and safety policies. Transportation if applicable. Assurance people do not have unauthorized access to children at the center.
Protecting children's confidentiality.
-- Written policies were missing or need to be expanded to include all required element for Health (safe sleep, response plans), Incident Reports (change in functioning, sexualized behavior), Access, and Confidentiality.

109.12(4)b: Each infant and toddler shall be diapered in a sanitary manner as frequently as needed at a central diapering area. Diapering, sanitation, and hand-washing procedures shall be posted and implemented in every diapering area. There shall be at least one changing table for every 15 infants.
-- Infants hands were not washed following each diaper change. The changing station was not cleaned and disinfected following diapering.

4. Any corrective action plans, provisional license, and safety plans-steps to get into compliance

A list of all required policies with suggestions for implementation was provided to the center.

The center does have the required changing procedures postings and consultation was provided reviewing those procedures.

5. Special Notes/Recommendations

A full license will remain in effect at this time. Please provide a written response to the licensing consultant identifying either corrections or a plan of action to correct 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.

Date: 09/02/2026

HHS Licensing Consultant: Ray Salsbury

Non-compliance with any of the mandated regulatory requirements listed above may lead to the cancellation or revocation of your Child Care License. Please take steps necessary to completely address each of the violations noted above.

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 **https://iowaccrr.org**.