Health and Human Services

Iowa Department of Health And Human Services

CHILD CARE CENTER ANNUAL EVALUATION

Name of Center: Kids World Inc

Provider No.: 7238

Address: 1408 Robbins St, Sac City, IA, 50583

County: Sac

Director's Name: Sydney Phillips

On-Site Supervisor: Kari Friedmann

Phone Number: 7126627259

E-Mail: kwsc@frontiernet.net

HHS Visit Date: 02/09/2026

Licensing Period: 03/01/2025 to 03/01/2027

Fire Inspection:

Date Inspected: 03/29/2023

Comments:

Report Visit Type:

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

License Type:

- [X] Full
- [ ] Provisional

Quality initiative:

Quality Rating: 1

- [ ] Accrediation

Program Duration:

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

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HOURS:	*Year-round*	*School-Year*	*Summer Only*
Sunday			
Monday	5:45 AM to 6:00 PM		
Tuesday	5:45 AM to 6:00 PM		
Wednesday	5:45 AM to 6:00 PM		
Thursday	5:45 AM to 6:00 PM		
Friday	5:45 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	32	16	33	16	97
Summer					0

1. Basic Overview

An announced annual visit was made to the Kids World Inc. child care center on 02-09-26 where I met with center director Sydney Phillips, and assistant director Kari Friedmann. Sydney took over the director role in 2025 and is well qualified for the position having a MS degree in Psychology, and prior experience and on-going training in early childhood care. Kari has been with the program since 2002, and has also completed a CDA degree. This program is located in a free standing building that was designed as a child care center in Sac City. The center leases space to Head Start and while they have a strong collaborative relationship they are operated independently of each other and have separate entrances. The program is operated as a non-profit entity overseen by a board of directors and provides daycare and pre-school programming. The center serves children ranging in age from birth through school age. There are approximately 60 children enrolled in the program served by 15 staff. All aspects of the program subject to licensing standards were reviewed during the visit.

The layout of the building and classrooms remains the same as in prior visits. Classrooms are determined by age groups with the infants on the south side of the building, and the older children on the north side. This arrangement provides direct access to age appropriate playground spaces for each group. The infants are divided into two classrooms by age with children birth to one in one classroom, and infants one to two years of age in another. The older children are also in separated classrooms as determined by age for 2 year olds, 3 year old, 4 year olds, and school age children. Each classroom has a secondary exit providing direct egress to the outside. Each exit door opened easily and freely. The center did install a fob system that restricts return access into the building from these exits. The building does have a large basement area that is used as an emergency storm shelter. Each room has bathroom facilities accessible directly from the classroom. Additional sinks are located in each room to facilitate hand washing. Each classroom has windows along the exterior walls that provide natural light, a view of the outdoors, and ventilation. Each room was observed to be clean with no concerns regarding maintenance noted. Each classroom is divided into activity centers through the placement of furniture and play

structures that were arranged so as not to create any blind areas.

2. Identify Observed Strengths of the program

Good interactions were observed on the day of the visit with all teachers being actively engaged with the children either attending to their needs, or presenting the planned curriculum. This included moving the the daily schedule with serving breakfast, engaging in teacher lead activities, outdoor play, restroom breaks and diapering, and self-directed center play. The center follows a general center wide curriculum plan and the teachers were observed to implement this with reading books to the children, or engaging in craft activities. Each teacher presented a positive attitude with their interactions and how they spoke with children. The center uses positive behavior management techniques such as praise and recognition, redirection, transition activities, and guided problem solving. One example was during a time when Kari was filling in for a classroom teacher and one child had continuing escalating behavior and was not listening. Kari did contact another teacher for assistance with taking that child to her classroom for a break from his peers. The child became upset and did not want to leave at which point Kari spoke with the child about his unacceptable behaviors, positive behaviors he could do instead, and gave the child a second chance to remain in the classroom. This approach was very effective in allowing the child to regain control, and showed a center approach of providing support among teachers rather than requiring them to continue to address problematic behavior on their own where frustrations can build. Ratio was maintained in each classroom as required by age.

Good health and safety policies and practices were observed on the day of my visit. I was able to observe several diaper changes and required practices were followed for each. Good handwashing practices were observed with teachers reminding children to wash their hands, and providing assistance as needed to ensure they did so in an effective manner. Good cleaning practices were observed with the staff waiting for the children to be out of the immediate area before using chemical cleaners, and properly using cleaners to disinfect and sanitize surfaces as appropriate. Chemical cleaners, medications, personal belongings, and other items that could pose a safety risk to children were stored where they were not readily accessible to children. First aid kits are maintained in each classroom and additional materials are present in the center office to replenish as needed. Safe sleep practices were followed for all children under 12 months of age. Older children make use of cots and all cribs and cots had appropriate bedding. There were some toys in the infant and toddler rooms that were observed to have some small parts that need to be removed.

The center does have an on-site kitchen where meals and snacks are prepared for both the daycare, and the head start program that shares space in the center. The kitchen was observed to be clean and well maintained with no indication of insect or rodent infestation. Refrigerators were observed to be clean, had thermometers present. Good storage practices were in place with all foods being stored in air tight sealable food grade containers, labeled, and dated after having been opened, or placed in storage. Menus were posted and identified a good variety of nutritious meal options. The children are served in a large cafeteria space at child sized tables. Good food handling and services practices are practiced with the teachers using measured scoops, and wearing food service gloves. The teachers did sit and eat with the children to provide supervision at the tables.

The center has two playground areas including a toddler/infant playground, and a playground for the preschool/school age children. As noted each classroom has a secondary emergency exit that opens directly on to the playground space appropriate to their age group. The playgrounds contain a variety of surfaces that include pavement, grass, and unitary rubberized foam fall surfacing beneath climbing structures. The equipment is appropriate for the intended age groups in each area and was observed to be in good repair. Shade is provided by the building, patio umbrellas, and other structures. All of the playground spaces are enclosed by fencing which was observed to be in good repair. One issue that was noted was a wooden sitting bench on the toddler playground where the wood of one seat slat was splintering. While not rising to the level of being an immediate safety concern this does need to be repaired, or replaced.

A review of administrative records found all required notices for No Smoking, License Certificate, Consultant Contact, and Mandatory Abuse Reporting were posted in areas readily accessible to parents and visitors. Other required postings for emergency evacuation, emergency contacts, disease notifications, hand washing, daily schedule, curriculum plans, and menu were also present. A random sample of staff and child files were reviewed and compared to the self-audits prepared by the center which were found to be accurate. Based on the self-audit and reviewed files both sets were found to be in substantial compliance with only those documents that had expired within the past month needing to be updated and for which the center had documented when renewal appointments had been scheduled. Daily infant reports were being

completed in electronic format using a communication app but documentation was being completed for daily activities and disposition of the children. The center does have a van that was previously used for providing transportation services but will discontinue that and is looking to sell the vehicle. All inspection logs and certificates were available and current. The center does have a radon mitigation system and tested levels were within acceptable limits. The center handbook was reviewed and several policies had not been included in the most recent update.

3. Identify the aspects that fall below the standard

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.
-- The Parent Handbook was missing several policies, or had policies that needed to be expanded. Policies were needed for Incident Reporting, and Parent/Visitor Access. The policy for required child records needs to be updated to inform parents of the availability of providing a valid certificate of immunization exemption for medical or religious reasons.

109.9(3): Daily written records are maintained for each child under two years of age and include: The time periods in which the child has slept. The amount of food consumed and the times at which the child has eaten. The time of and any irregularities in the child's elimination patterns. The general disposition of the child. A general summary of the activities in which the child participated.
-- Daily infant sheets did not include information documenting Disposition or Activities for children under 24 months of age. Inconsistency of documentation was also noted in the prior licensing visit. It was reviewed that including daily photos in the morning and afternoon would be considered an acceptable alternative providing a visual depiction of mood and activity and showing any changes in functioning during the day.

109.11(2)a: The center will provide sufficient and safe indoor play equipment, materials, and furniture. It must meet the developmental, activity and special needs of the children.
-- Items and toys with parts that can break off which would be less than 1 1/4 inches diameter and 2 1/4 inches length are considered choking hazards and need to be removed from classrooms serving children under 3 years of age.

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

The center was provided a list of all required written policies and guidance on information to consider including in a parent handbook.

It was discussed with Sydney and Kari that they would conduct random reviews of infant daily sheets to ensure that staff are documenting all required information. They would also ensure that staff review the materials in their rooms and remove those items that could be a choking hazard to younger children.

5. Special Notes/Recommendations

A full license will remain in effect 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.

Date: 02/17/2026

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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**.