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

Name of Center: Horizon Science Academy **Enrollment:** 18 **License ID No. (Reapplications)** 52357

Street: 4801 Franklin AVE **City:** Des Moines Iowa **Zip** 50310 **County:** Polk

Mailing Address: 4801 Franklin AVE, Des Moines, IA, 50310

Director's Name: Brittni Schwartz **Phone Number:** 515-335-1937

On-Site Supervisor(s): **E-Mail:** cannon@hsademoines.org

Date(s) of Visit: 03-01-2024

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

LICENSING VISITS

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

Signed Application (470-0722) Received X **Yes** **No** **NA** **Date Signed:** 01-31-2024

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

Date Inspected: 09-06-2023

Comments : Fire inspections are due at least every three years.

LICENSE TYPE: X **Child Care** **Preschool (ages 3-5 meets three hours or less per day)**

Financial Type: X Profit Non-Profit NA

Accredition: Accredited NAEYC NSACA X Other NA

Program Serves: Infants (0-23 mo.) 2 Years Preschool-Age X School-Age

Get-Well Evening Care Special Needs

SCHEDULE: Year-round X School-Year Summer Only

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

LICENSE CAPACITY	Infants	2 Years	Preschool	School-Age	Capacity
General				42	42
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: Maggie Gibson, SWIV **Date:** 03-04-2024

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

NA

II. IDENTIFY THE AREAS OBSERVED ON THE VISIT:

A semi-unannounced full licensing visit was completed 3-1-24; Director Laura Cannon and site supervisor Brittni Schwartz was also present at times.

Horizon Science Academy Before and After school was given permission to open 11-1-23. This center operates from the same building that the Horizon Science Academy School. The BASP operates from one room and has access to the playground. The director is Brittni Schwartz. The principal of the Academy School is Laura Cannon. Brittni also teaches for the Academy. Brittni meets the requirements of director.

Horizon Science Academy, operates from a room with a capacity of 42 children, with an intention of adding an additional two rooms of pre-k children, each room with a capacity of 21 pushing total capacity to 84 when/if licensing is updated.

Care is offered from 7AM-7:50 AM, and 3:10PM to 5:30 PM. This program is not yet open for summer care and operates during the school year.

Room Observations/Activities: The room has a variety of activities available. Restrooms are just adjacent to the program room. The room was nicely organized and clean.

Nutrition Practices: The program is preparing to apply for CACFP but is currently no on this food program. The children are offered snacks and a drink after school.

Health and Safety: Medication is stored securely in the school office, which is feet from this program room. First aid kit was readily accessible in the program space. Tornado and Fire emergency plans were posted with dialogue and need to have a diagram of the exit plans, on which the director is working. Heating and cooling is inspected by the landlord who had to provided documentation to the program director. Carbon Monoxide detectors are integrated with fire detectors.

Playground: The program was provided a playground checks worksheet to document safety checks, monthly. The playground is enclosed with industrial chain-linking fencing , with natural shade and pea gravel. Discussion took place for the need to add depth to the pea gravel or consider an alternative safety surface. Discussion also took place with regard to the need to shave off the end of bolts under the play structure that could present a danger.

Transportation/Field trips: NA

Administrative Review: The program director and principal were provided with fliers for mandatory reporting, consultant contact and how to access non-smoking signs. Permission to open was posted as required. Five child files were reviewed, with one needing an updated physical and two lacking emergency dental contact information. Three staff files were reviewed; one staff with follow up information needing to be completed; which the director stated was submitted just a day or two after the annual visit.

III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:

This program offers convenience and continuity with Horizon Science Academy and shares some staff.

This program interacts as a team with positive interactions.

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

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 dental: 4
Information lacking: Emergency contact information should include name/contact information for medical and dental care providers for the child.

V. SPECIAL NOTES/RECOMMENDATIONS:

Fliers for mandatory reporting information, consultant contact, handwashing, and non-smoking signs were sent to the Principal and director for their use.

Discussion took place with regard to adding a pre-school program area; for which an additional application may be sought.

A full two-year license is recommended.

*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.