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

Name of Center: Kidstop Childcare Center **Enrollment:** 32 **License ID No. (Reapplications)** 35155

Street: 304 S Summit AVE **City:** Bancroft Iowa **Zip** 50517 **County:** Kossuth

Mailing Address: PO Box 132, Bancroft, IA, 50517

Director's Name: Bobie Blocker **Phone Number:** 515-885-2379

On-Site Supervisor(s): **E-Mail:** kidstopdaycare@hotmail.com

Date(s) of Visit: 02-29-2024

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

LICENSING VISITS

New Application **Re-Application** X **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 X School-Age

Get-Well Evening Care 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	14	13	17	18	62
Summer					0

QRS Rating: N/A

RECOMMENDATION FOR LICENSE:	
X	**FULL** license from 03-01-2023 to 03-01-2025
	PROVISIONAL license from
	DENIAL of initial application
	SUSPENSION of license
	REVOCATION of license

Licensing Consultant: Raymond Salsbury **Date:** 03-13-2024

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 the Kidstop Childcare Center on 02-29-24 where I met with center director Bobie Blocker. Bobie took over as the director of the program in 2018 and is well qualified for the position with a BA in Education/Psychology and many years of experience in early childhood education and care. The center is located in several classrooms of the old St. John Catholic School in Bancroft which now also serves as a community center on the other side of the building. The owners of the building are also seeking to renovate the second floor above the daycare for use as residential apartments, or other commercial space but these are not in use at this time. The program is overseen by an independent board of directors and is operated as a non-profit center. There are currently 32 children enrolled in the program served by 10 staff. The center provides services for infants through school age children, and also provides a formal preschool class that offers 3 year old preschool and participates in the 4 year old State Wide Voluntary Preschool Program. All aspects of the program subject to licensing standards were reviewed.

They general layout of the facilities, classrooms, and operation of the program remains the same as in prior visits. The center is currently using 4 classrooms with three for child care and one for the formal preschool class. Each classroom has an open floor plan typical of school classrooms with a large bank of windows along the exterior walls. The windows provide ample natural light, a view of the outdoors, ventilation, and also serve as secondary emergency egress for the children in the school age and preschool classrooms. The infant and toddler classrooms have doors that provide secondary direct egress to the outdoors. The issues with the emergency exits being difficult to open have been addressed such that they opened fully and with little effort. Sinks are present in the infant room and toddler room to facilitate hand washing for diaper changes. Diaper changing stations are present in both rooms, and in the main restroom. The required changing procedures postings were present by all changing stations. Restrooms are located down the hallway from the classrooms for the older children and children are escorted to the bathroom as needed. Activity centers are created through the placement of shelving, furniture, and play structures which are arranged so that they provide the children with room to play and move while not creating any blind areas.

The activity centers present in each room vary by age with more options being presented that are appropriate for the children in the room. Examples include large and small manipulatives, reading, art/crafts in each room but classrooms for the older children also include dramatic play, sand/water/experience tables, light tables, math, and science. Each activity center was stocked with toys and materials that were observed to be age appropriate and in good repair. A copy of the daily schedule and curriculum were posted for each classroom. The curriculum plan is different for each room such as the two year old room with a focus of "Bugs". Good interactions were observed in each classroom with the staff being actively engaged with the children implementing the planned curriculum or otherwise attending to their needs. The staff were observed to use positive behavior management techniques such as transition activities, redirection, and helping the children identify positive choices.

Good health and safety practices were generally observed. During the visit I was able to observe a diaper change and during the change the teacher did not deglove between handling soiled and clean materials, nor were the infant's hands washed following the diapering. In talking with the staff they did confirm that the practice is to wash the hands of older children but not the younger infants. It was reviewed that all children must have their hands washed following diapering/restroom use

regardless of age or if they touched contaminated surfaces. It was also reviewed that if a child cannot be held or stand to wash their hands at the sink that a separate wet paper towel or cloth with soap can be used to wash and rinse the children's hands but that diaper wipes are not an acceptable alternative. Good cleaning practices are in place with the center using a 3 step process of soapy water, clear water rinse, and disinfectant. Chemical cleaners, purses, diaper bags, medications, and other items that could present a safety risk to children were stored in areas where they were not readily accessible to children. The center does maintain first aid kits in the classrooms which contain a limited supply and larger stores are maintained in the center office. The center did not have any children that were currently taking any medications or had identified allergies but policies are in place should these concerns be present in the future. Safe Sleep practices were followed in the center for children under 12 months of age. It was noted that one crib did have toys attached to exterior of the railings and while the crib was not in use at the time of the visit the staff did confirm that it is used for a child when sleeping. It was reviewed that even though the toys are attached so that they were on the exterior of the crib it would still be a safe sleep violation and they need to be removed. Cots are provided for older children and did have appropriate bedding.

The center has a full kitchen and meals are prepared on site. The center does participate in the Child and Adult Care Food program. The kitchen was observed to be clean with no indications of insect or rodent infestation. Good food storage, handling, and preparation practices were observed. A copy of the menu is posted and a good variety of nutritious meals were planned. Meals are served in the classrooms with the teachers providing supervision at the tables. Lunch was served during the time of my visit and the teachers did wear food service gloves and used measured scoops when serving. The lunch served did include corndogs and while the teachers were cutting them for the younger children they were cutting them in cross sections resulting in disk shaped pieces. It was reviewed that items with round elongated shapes such as hotdogs need to be cut on the long axis so that disk shapes are eliminated as a means to reduce the risk of choking incidents. The staff did further cut the the corndogs before serving to the children.

The center is currently in the process of having renovations and repairs made to the gymnasium which also necessitated heavy equipment accessing the building from the playground space. As a result the playground is not being used, nor is the gymnasium. The center was making use of the interior corridors for children to engage in large motor skills as weather conditions were not conducive to outdoor play. It was discussed that while licensing standards does not allow for corridors to be used as programming space it was understood that this was being done as a short term option due to extenuating circumstances but that the hallways need to be cleared of obstruction following play, and the center should look to other options such as going for walks to use of public parks as much as possible.

All required notices were posted in areas that were readily visible to parents and visitors. A random selection of staff and children's files were reviewed and compared to the self-audits maintained by the center which were found to be accurate. Based on the review and self-audit all child files contained all required documentation with the exception of 1 file. Staff files were generally found to be in compliance with all required documentation with the exception of one employee that had not completed the required Mandatory Reporter Training within the first 90 days of employment as required, 1 needed a current physical, and 1 needed an FBI Fingerprint background check. The center handbooks have been previously reviewed and found to contain all required written policies. All required inspections logs and certificates were available and current.

III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:

The center seeks to implement best practice recommendations with participating in the QRS program in the past and working toward completing the IQ4K program.

The center has continued to seek grants to replace and acquire additional materials in classrooms. This is most notable in the school age room where the center has removed some of the older equipment especially that such as a residential sofa, television monitor, and some dramatic play structures that required large amounts of space without providing much programming. To replace that equipment the center has acquired new dramatic play materials, math/science equipment, and created a soft calm down/safe area.

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

109.7(1): All staff(within first 3 months of employment)Two hours of approved training FOR the mandatory reporting of child abuse.At least one hour of training regarding universal precautions and infectious disease control.Certification in American Red Cross, American Heart Association, American Safety and Health institute or MEDIC First Aid infant, child, and adult cardiopulmonary resuscitation (CPR) OR equivalent certification approved by the department. A valid certificate indicating the date of training and expiration date shall be maintained.Certification in infant, child, and adult first aid that uses a nationally recognized curriculum or is received from a nationally recognized training organization including the American Red Cross,American Heart Association, American Safety and Health Institute or MEDIC First Aid or an equivalent certification approved by the department.A valid certificate indicating the date of training and expiration date shall be maintained.Minimum health and safety trainings, approved by the Department. If significant changes occur to

content, the Department may require the training be renewed.
-- Number not in compliance: 1

109.9(1)b: All files contain:A signed copy of DHS criminal history record check or any other permission form approved by the Department of public Safety for conducting an Iowa or national criminal history check. A copy of Request for Child Abuse Information.Copies of the results of Iowa records checks conducted.Copies of national criminal history check results.Any Department-issued documents sent to the center related to records check.
-- Number not in compliance: 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: 1

109.12(5)b: Infants diapered in a sanitary manner as needed in central diapering area.One changing table for every 15 infants/toddlers needing diaper changes.Diapering, sanitation, and handwashing procedures posted and implemented in central diapering area.
-- Staff did not deglove between handling soiled and clean diapers. Infants hands were not washed following diaper changes.

109.15(2): Center shall follow minimum CACFP menu patterns for meals and snacks.Menus planned one week in advance, made available to parents, and kept on file with substitutions noted.Avoid foods with high incident rate of causing choking.
-- Corndogs were served on the day of the visit and when cutting them staff cut cross sections that created disk shaped pieces. Hotdogs and similarly shaped foods need to be cut along the long axis to eliminate disk shaped pieces.

V. 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.

*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.