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

Name of Center: ChildCare Discovery Center **Enrollment:** 124 **License ID No. (Reapplications)** 17939

Street: 1405 North 32nd St **City:** Fort Dodge Iowa **Zip** 50501 **County:** Webster

Mailing Address: 1405 N 32nd ST, Fort Dodge, IA, 50501

Director's Name: Tammy McNeil, Courtney McNeil **Phone Number:** 515-576-6771

On-Site Supervisor(s): Lindsey McDonald **E-Mail:** childcarediscovery@yahoo.com

Date(s) of Visit: 04-19-2024

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

Date Inspected: 03-21-2024

Comments :

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 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	24	61	113	64	262
Summer					0

QRS Rating: N/A

RECOMMENDATION FOR LICENSE:	
X	**FULL** license from 06-01-2024 to 06-01-2026
	PROVISIONAL license from
	DENIAL of initial application
	SUSPENSION of license
	REVOCATION of license

Licensing Consultant: Raymond Salsbury **Date:** 04-23-2024

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 Childcare Discovery Center on 04-19-24 where I met with Tammy McNeil who is the owner/director of the center. Courtney McNeil is the acting director, and Lindsey McDonald is the on-site supervisor. All are well qualified for the positions they hold having extensive experience and on-going professional development in early childhood care. The program relocated to a building that was newly constructed and designed as a daycare center in 2022. The center provides both daycare and preschool programming serving infants through school age children. The center discontinued the partnership with the State Wide 4 Year Old Preschool Grant program when their teacher retired but will continue to offer formal preschool programming under the DHS license. There are 124 children currently enrolled in the center served by 29 staff. All areas of the program subject to licensing standards were reviewed.

The general layout and design remains the same as in the prior visits. Construction of the center was completed in 2023 and all areas were observed to be in good repair. The building is arranged with a wing on the west containing classrooms for infants, toddlers, and younger preschool age children. A wing on the south side contains classrooms for the older preschool and school age children, and the center kitchen. A large gymnasium space on the east side of the building is also used for school age children. There is a large conference room area currently being used as a staff lounge and which provides access to an upper level space used as storage and for curriculum planning. These spaces are not currently being used for child programming but the staff lounge could be converted for child programming and would allow for an additional 22 children if needed in the future. Each room was observed to be clean. Each room has a primary entrance that opens onto a hallway which has direct access to the outdoors. All areas of the building have fire suppression sprinklers. All exits were clear of any obstruction and doors opened easily and smoothly. Evacuation notices that include both diagram and written instruction for fire and tornado evacuation were posted by each exit from each programming room. Bathrooms are available directly from each classroom with each restroom designed as a passthrough serving 2 rooms. Each room has additional sinks available in the room to facilitate hand washing. Each classroom has windows along the exterior walls that provide ample natural light, a view of the outdoors, and ventilation. Each classroom is divided into activity centers through the placement of furniture, shelving, and play structures that were arranged so as not to create any blind areas. It is noted that the school age and older preschool classrooms have mobile coat cubbies that are arranged so that they do provide an area of limited line of sight. The staff are aware of the concern and do position themselves to ensure supervision is provided.

The toys and materials were observed to be in good repair and generally appropriate to the ages of the children present. There were a few items and toys with parts that could break off which were less than 1 1/4 inches in diameter and 2 1/4 inches in length. These would be considered choking hazards and need to be removed from classrooms serving children under 3 year of age, and placed in storage where they can be brought out for supervised play for children 3-4 years of age. Additionally it was noted that some classrooms had centers that included electronic equipment such as the light tables in the preschool and school age rooms where the cords were exposed such that they could be an entanglement hazard. Options of moving equipment or securing the cords were reviewed with Tammy. Each classroom has a white board hung outside the room where the daily schedule, planned curriculum, and other notices to parents are posted. Another white board is also present in the classrooms which is used to identify the children and their ages that are present in the classroom. While each classroom does implement their own learning focus the center does have prepared options which are cycled through each year with examples of Farmers, and Carnival. Ratio was maintained in each classroom as required by age. Good

interactions were observed on the day of my visit with all staff providing close and careful supervision of the children ensuring that they were within line of sight and sound at all times. Engagement levels varied between the teachers but all were observed to be involved with the children and attending to their needs. Activities included staff in several classrooms presenting the planned curriculum with reviewing specific learning concepts such as numbers, letters, and shapes. Others were engaged in reading, or playing with the children.

Good health and safety practices were observed during the time of my visit. I was able to observe diaper changes in several of the rooms on the day of my visit. The required changing procedures posting was present by each changing station and all staff followed the posted procedures. The center is not using gloving when changing diapers but has mounted hand sanitizer stations by each station and staff were observed to make use of this between handling soiled and clean items. It was reviewed that staff should use soap and running water for hand washing when it is available and that one option would be to use wet towel or cloth with soap on it rather than leaving the child unattended on the changing table. Good child hand washing practices were observed with the staff not only ensuring that the children washed their hands prior to meals, after restroom use, and other times as needed, but that they did so in an effective manner either supervising the children or providing hand over hand assistance. Good cleaning practices were observed with the teachers waiting for the children to be out of the immediate area before using chemical cleaners. Over the counter and prescription medications were properly labeled, stored, and administration was documented. Prescription medication administration is limited to a few identified staff. Each room is equipped with a first aid kit which is reviewed by the lead teacher and replenished as needed on a monthly basis from a larger supply of materials that are maintained in a storage room. Chemical cleaners, purses, diaper bags, other personal belongings, and other materials that could pose a safety risk to children were stored in areas that were not accessible to the children. Good safe sleep practices were observed during the visit. Appropriate bedding, and spacing was provided for older children making use of cots. Sufficient lighting was maintained in classrooms to allow staff to be able to observe children when they were napping.

The center does have a fully functioning kitchen and meals are prepared on-site. Good food storage and handling practices were observed during the time of my visit both in the kitchen, and the classrooms. A menu was posted and the planned meal was served. Meals are served in the classrooms and brought to the rooms in covered containers. When preparing plates the staff did use measured scoops to ensure that children did receive a full serving of each item. Staff were observed to wash their hands prior to preparing plates. Staff had the option to eat with children or not, but do provide supervision at the tables when the children are eating. The center has a commercial grade dishwasher that makes use of chemical sanitizing. The kitchen was observed to be clean with no evidence of either insect or rodent infestation observed.

The center has 3 playground areas with one for school age, one for preschool, and one for infant/toddlers. Each had climbing structures, and the infant toddler playground had swings available. The equipment was observed to be in good repair. Foam tiles are used for fall surfacing beneath climbing structures. Each playground also has paved, and grassy areas where the children can play. The school age playground has wooden deck with lawn furniture. It was noted that the grassy area of the school space does have uneven ground which is due to areas where the grass seeding has taken root and areas where it has not. This does create a risk for children tripping, or twisting an ankle and while this will even out as the grass continues to grow the staff do need to be aware of this risk and provide supervision as needed when the children are playing. The playground is fully enclosed by a tall fence. Several trees have been planted to provide shade but these are immature and shade is limited. The center does have a large awning shade structure in the infant/toddler area. Tammy stated that they have had portable awnings for the older children as well but due to the location of the center and high wind volume these have been damaged and the center is exploring other options such as constructed gazebos. The center does have a large indoor gymnasium space where the children can play when weather does not allow for outdoor activities.

All required notices were posted in an area readily available and visible to parents and visitors. The center uses both an electronic (Smart Care) and hard copy file system to maintain child and staff files. The electronic system does allow the center to run reports of information that is nearing expiration, or which has expired. Randomly selected hard copy files for both child and staff files were reviewed and compared to the electronic records which were found to be accurate. The self-audit reports produced by the electronic system found all child files to contain all required information with the exception of 9 files that needed updated physical which had recently expired in the previous month which is well within acceptable limits and is not cited as a violation. The self-audit report for the staff files identified all files contained all required information. The center handbooks have been previously reviewed and found to contain all required written policies. All inspection logs and certificates were available and current.

III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:

Tammy identified that the center has partnered with the Fort Dodge Parks & Rec department which will have coaches come to the center to engage in practice sessions for the children participating in the community sports leagues. This will allow more children to participate and reduce the burden on parents who would other wise need to arrange transportation of the children to a practice field.

The center also created a "Selfie wall" where a different backdrop is created each month where children, staff, and families

can take picture. Tammy identified that this has been very popular both with families and classroom teachers.

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

109.12(4): Sufficient toilet articles are provided for handwashing.Sufficient and safe indoor play equipment, materials, and furniture that conforms with CPSC or ASTM.Play equipment, materials, and furniture meet the developmental, activity, and special needs of the children.Room's arrangement does not obstruct the direct observation of children.Individual covered mats, beds, or cots, and appropriate bedding is provided for all children who nap.Procedures are developed and implemented to maintain equipment and materials in a sanitary manner.Sufficient spacing is maintained between equipment to reduce transmission of disease and allow ease of movement by children and staff to respond to activities and care needs.Sanitary procedures are followed for use and storage of personal hygiene articles.
-- Item and toys that are less than 1 1/4 inches in diameter and 2 1/4 inches in length are considered choking hazards and need to be removed from classrooms serving children under 3 years of age. Uncooked beans contain natural proteins that can be toxic if ingested and need to be removed from classrooms.

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.