Health and Human Services

Iowa Department of Health And Human Services

CHILD CARE CENTER ANNUAL EVALUATION

Name of Center: Kid Zone Fort Madison

Provider No.: 51912

Address: 5445 AVE O, Fort Madison, IA, 52627

County: Lee

Director's Name: Dianne Petersen

On-Site Supervisor: Bailey Jarvis, Lauren Simpson

Phone Number: 3193762844

E-Mail: dpetersen@greatriverhealth.org

HHS Visit Date: 07/06/2026

Licensing Period: 09/01/2026 to 09/01/2028

Fire Inspection:

Date Inspected: 10/04/2024

Comments: conducted by Joey Herren Ft. Madison Fire Department, due annually

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	12	16	25	25	78
Summer					0

1. Basic Overview

Kid Zone Fort Madison child care center is a new center (2022). Kid Zone is located in Southeast Iowa Regional Medical Center, Fort Madison Campus is located in an administration area remodeled specifically for child care. The center is owned and operated by Great River Medical Center. They are an employer sponsored center. Enrollment is limited to children of employees at Southeast Iowa Regional Medical Center but may expand to the community. The director is Dianne Petersen.. Ms. Petersen possesses a Child Development Associates. She began employment at sister site Kids Zone in Burlington in 2010. Dianne directs both programs. She is typically in Fort Madison a couple or few days a week and at West Burlington the other days. Bailey Jarvis is onsite supervisor. She has several years experience working in childcare centers. Lauren Simpson is another OSS. Either an OSS or the Director are typically present throughout the day.

GRHS is governed by a Board of Directors. Community members served on the board. Before and After school care is provided as well as full day care when school is not in session or on in service days, Winter and Spring breaks and holidays that the center is open. The Center offers childcare ages 6 weeks through 12 years including preschool and a school age program. The Center opens from 6:00 am to 6:30 pm Monday thru Friday. The building is secured by a locked door. You must have a badge to activate the door.

On 7/6/26 all program space was observed. The center was in ratio. I met with people designated in charge and later met with Bailee Jarvis, OSS. The areas discussed, reviewed and noted consisted of classroom observations and activities, nutritional practices, health and safety practices, playground observation, field trip and transportation practices, and administrative review. The center utilizes Easy Care to track staff and child file information.

Program Observations:

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The center consists of an infant room for younger infants with capacity of 10. This room has an attached, shared bathroom with mobile infants (advanced infants). This room has a capacity for 12. Breastfeeding is encouraged. Mothers are encouraged to nurse their babies at the center. The infant classrooms prepares and serves bottles and infant meals in the classroom. Infant Sheets are updated throughout the day. The sheets met all requirements, including activities for the day. The infant rooms have a hand washing sink and a food prep sink. The program also contains a threes room, a preschool age classroom and after school room. Blinds in the infant room do not open, this is not a hazard but should be corrected.

The two year old room has capacity for 14 children. The 3&4 year old room capacity is 16. The Preschool Room/School Kids has a capacity of 18. Each classroom was remeasured in 2022 to ensure capacity was correct.

The center also has a medium sized, modern kitchen, staff break room, and director's office. The children do not have access to these areas. All classrooms are clean, bright, attractive, and equipped with a satisfactory variety of child sized furniture and equipment, toys, games and activities for the children. The classrooms are largely self-contained.

Center Nutrition:

The center serves breakfast, snacks, and a noon meal to the children. Meals and snacks are prepared in the hospital kitchen and served by childcare staff. Most snacks are ready to serve with no preparation by childcare staff like fruit, cheese, crackers.. Meals are served family style and menu patterns appear to meet minimum nutritional requirements. The Center is a part of the CACFP Food Program. The center rotates menus every four weeks. I observed both dry and cold/freezing food storage on both visits. No food was stored on the floor. Each classroom was clean.

Center Health and Safety:

Prescription and non-prescription medication storage was in accordance with licensing regulations, physician directions, and parental consent. Staff and child hand washing, storage and maintenance of a first aid kit, emergency plans and drills for fire and tornado, environmental testing and the maintenance of any necessary detection equipment, and general regulations regarding safety and sanitation policies and procedures were reviewed. Each classroom was clean. A Daily Cleaning check list that is in each room and is completed by staff.

Each room has its own first aid kit stored in the rooms backpack for easy access and portability. Kits are labeled. Parents fill out a medication form when medication needs to be administered at the Center. Only the director, supervisors or lead teachers are approved to administer non-emergent medication. Extra copies of Accident reports and Health reports are in every room. Allergy information is posted in the kitchen, the rooms where the children are spending the day and on the room roster. Medical condition and allergy
conditions lists are present with the children's pictures included. Allergy Action Plans are present for each child with allergies. Each plan is kept in a binder in the room with the child so that staff know how to respond in an emergency.

The center has a larger first aid kit in the staff room closet that remains locked. Emergency routes are posted in the main hall and in the rooms. Hand washing procedures are posted near every hand washing sink. Chemicals are stored in rooms inaccessible to children. Further, the center should use only chemicals approved for childcare.

Radon testing was present with a level under 4 pCi/L. Updated testing is due every five years. The program is heated and cooled by a geo thermal system. Carbon monoxide detectors are hard wired in throughout the building. The center is on city water.

Tornado and fire drills are conducted and documented monthly per my observation of documentation.

Ill or injured children are taken to a special illness/sick room. A medical advisor for health policy is an MD or DO in pediatrics or family practice is present on site at all times in the adjoining hospital. A Licensed LPN or RN on duty at all times children are present. The Get Well Room has the following in place: A written health policy consistent with NHSPS and approved and signed by the owner or board and medical advisor prior to start of business and shall address procedures in the following areas: Policy addresses medical consultation, emergencies, triage policies, storage and administration of medications, dietary considerations, sanitation and infection control, categorization of illness, length of enrollment periods, exclusion policy, employee health policy. Reportable disease policy. Any change in health policy was approved by medical advisor and submitted to HHS. Written summary of health policy given to parents when child enrolled.

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All children receive a brief evaluation by LPN or RN upon arrival. Summary of health status provided to parent at end of day that includes:

Admitting symptoms.
Medications and time administered.
Nutritional intake.
Rest periods.
Output.
Temperature.

The Get Well Center is aware of the following changes in licensing rule for Get Well Rooms:
Minimum ratio: 1:4 for infants and 1:5 for children over age two. All staff that have contact with children: Minimum of 17 clock hours of special training in caring for mildly ill children. Current certifications in file. Within one month of employment: Training includes four hours in infant and child CPR and four hours in pediatric first aid; one hour in infection control.
Within 6 months of employment: Training includes six hours of care of ill children and two hours in child abuse identification and reporting.

40 square feet of program space per child. Sink in every child-occupied room. Grouping of children allowed by categorization of illness without regard to age and in separate rooms with full walls and doors.

Center Playground:

The center has separate fenced and naturally shaded outdoor play areas for toddlers and preschool/school age children. The play area is surrounded by a concrete barrier with fencing on top of it. It is easily accessible and on the side of the building.

The playground has enough room to ensure all children playing in the area have at least 75 square feet each of space for gross motor activities. A first aid kit, emergency contacts, emergency medications are taken outdoors with the children. The Childcare Weather Watch is utilized when outdoor play is questionable due to varying weather conditions.

Playground inspections were conducted and documented monthly. The playground provides 75 square feet for each child for gross motor play.

Center Transportation Arrangements/Field Trips:

The hospital owns a mini-van for transporting children to and from school and on field trips. Children are transported by center staff members. Currently this is only taking place once a month to and from school. Children are transported properly in a seat belt, car seat, or booster seat according to current Iowa regulations. Parents may be required to supply a booster or car seat as needed for their child if field trips involving use of transportation are a part of the program. Staff will be sure that car seats, booster seats and seat belts are used properly and each child is properly secured before setting the vehicle in motion. Children are prohibited from eating, drinking, standing during transport. An updated vehicle inspection will be kept in the DHS Binder. Both staff conducting transports have valid driver's license on file.

Children will never be left unattended in a vehicle, even for brief periods. All children will be accompanied by an adult to/from the vehicle to insure safety.. Drivers will be legally-licensed and shall not be under the influence of any chemical substance that may alter their ability to drive safely. Drivers will be First Aid and CPR certified if another staff member present is not. Drivers will have evidence of a safe driving record for the previous 5 years. Transportation must be reserved ahead of time and is on a first come first serve basis.

A consent form is sent home to inform parents of any planned field trips. The form requires a parents or a legal guardians signature authorizing their child participation in the field trip. At least one staff person with current First Aid and CPR certification will accompany children on offsite activities. At least one staff member will have a cell phone in case of emergency on all off-site activities.

The hospital conducts monthly inspections on the van.

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Center Administrative Records:

The center utilizes positive discipline "that will encourage your child's self-esteem. Intimidation, ridicule, physical or corporal punishment will not be allowed.. Guidance and discipline are based on developing the child's positive self- image and self-control. Children are encouraged to use problem-solving skills and become independent thinkers and decision makers. Caregivers positively redirect inappropriate behavior. Brief, simple explanations are given for acceptable behavior. The staff is trained to give directions in a positive manner, and care is taken to prevent a child from developing a negative self-image. If it is necessary to administer discipline a disciplinary report will be sent home.

Regulations regarding required notices and postings and required written policies are provided to parents in the form of a parent handbook.

Staff and child files are complete and well organized. Inspection reports are kept in a notebook and on the computer. Accident and injury reports will be clearly documented and signed by parents. When a child is suspected of having a communicable disease or condition such as, but not limited to, chicken pox, German measles, infectious hepatitis, measles, mumps, lice, ringworm of the scalp, scarlet fever, whooping cough, diphtheria or meningitis, the Center posts at the desk so that parents are aware. Child files include updated physicals, immunization records, emergency contacts, pick up authorizations, dental and medical information.

CCNC Hayes performed an immunization audit for the program each fall.

Staff are not able to start work until a physical has been completed. All staff are current on fingerprints (due every 4 years), SING checks (2 years), Mandatory Reporter training (3 years), CPR/1st Aid training (every 2 years) and professional development (due annually).

Annual emergency training is conducted. Emergency numbers including 911 and Poison Control are posted near telephones in each room. Staff have been trained on the plan and will sign and date acknowledgement of such.

2. Identify Observed Strengths of the program

The center is new.

The center Director has many years experience.

3. Identify the aspects that fall below the standard

1. 109.11(3)a: Center shall ensure that: Facility and premises are sanitary, safe, and hazard free. Sufficient lighting shall be provided. Sufficient ventilation. Sufficient heating. Sufficient cooling. Equipment placed in the program area is maintained so as not to result in injury to the children.

Infants are too close together sleeping. Cribs should be pulled out three feet apart. Some children on cots need to be moved 3 feet apart. The lighting in the one year old room during nap is not adequate and children cannot be observed easily if a medical emergency were to occur. Staff were laying down in two rooms. One staff had her eyes closed. The refrigerator in the kitchen was leaking water. This is only a hazard for staff since children do not enter this area. The OSS agreed to procure a plug in carbon monoxide detector. if the geothermal system has a fuel burning appliances back up. A piece of climbing equipment in the outdoor play area is not commercial. The OSS agreed to remove it.

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

5. Special Notes/Recommendations

Based upon this review, it is recommended that this center continue in Full licensing status. Any ongoing or future issues

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should be immediately corrected as they arise. If the center has questions or concerns about meeting licensing rule, they may contact HHS or CCR&R. It is important to note, all HHS licensing standards and procedures must be maintained during the renewal period.

HHS encourages you to contact your local nurse consultant. Child Care Nurse Consultants work with child care and early education businesses. Businesses may call or send questions to a child care nurse consultant about health and safety policies, health programs, health of personnel, and specific child health or safety issues. Please visit the following website: http://idph.iowa.gov/hcci/consultants Your CCNC is Amy Hayes. CCNC Hayes provided the following the past year: 10/8/2024-Onsite training of Back to Sleep-Tummy to Play, Reducing the Risk of SIDS & Promoting Active Tummy Time. Monthly newsletters and updates of various topics provided.

HHS encourages you to contact Child Care Resource and Referral. They offer centers assistance with meeting the DHS regulations, QRS, infant/toddler concerns, room arrangement and environment, developmental concerns, Best Practice information, CDA assistance, or any questions or concerns you may have. Please visit the following website: http://www.iowaccrr.org/_we_are/region_5/ Your Child Care Resource Consultant is Jodi Norton CCR&R Supervisor.

Kid Zone Fort Madison- provided TA around safe sleep, supervision, mixed ages and behavior. On-site consultation for classroom management and training.

Jodi Norton
Child Care Consultant Lead
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• How do you help staff understand the expectation associated with behavior management? Staff take PBIS. We also instruct staff on proper behavior management and it is a part of our staff handbook and onboarding.

• How do you help staff recognize their frustration and respond with de-escalation? PBIS training for all leaders. Leaders take their staff through hot button discovery. Staff are told during onboarding that everyone can become frustrated. When they do, ask for help. Someone can help cover to give them a break to compose themself.

• How do you monitor these skills / expectations? Annual evaluation, staff meetings, observations and communication with leaders.

Date: 07/14/2026

HHS Licensing Consultant: Jill Seibert

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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**.