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

Name of Center: Little Irish Preschool & After School **Enrollment:** 11 **License ID No. (Reapplications)** 48414

Street: 1903 S Broadway **City:** Emmetsburg Iowa **Zip** 50536 **County:** Palo Alto

Mailing Address: 1903 S Broadway, Emmetsburg, IA, 50536

Director's Name: Jean Hyslop (Principal) **Phone Number:** 712-852-3464

On-Site Supervisor(s): Chelsi Titus **E-Mail:** jhyslop@e-irish.org

Date(s) of Visit: 01-09-2025

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

Date Inspected: 12-19-2022

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: Infants (0-23 mo.) 2 Years X 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			20		20
Summer					0

QRS Rating: N/A

RECOMMENDATION FOR LICENSE:	
X	**FULL** license from 01-01-2025 to 01-01-2027
	PROVISIONAL license from
	DENIAL of initial application
	SUSPENSION of license
	REVOCATION of license

Licensing Consultant: Raymond Salsbury **Date:** 01-22-2025

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 Little Irish Preschool & After School program on 01-09-25. Jean Hyslop is the school principal and program director, and Chelsi Titus is the preschool lead teacher. Jean has a Masters degree and 20+ years experience in early childhood education, and has been with the program since its inception in 2017. Chelsi had previously been with the program as the associate teacher, and took over as the lead teacher at the start of the 2024-25 school year. Christie Smolik is the assistant teacher with the class. The school had previously provided additional programming but is currently offering only the 3 year old preschool programming. All aspects subject to licensing standards were reviewed during the visit.

The layout, design, and operation of the classrooms used for programming space remains the same as in prior visits. The preschool program is located in a single classroom of the Emmetsburg Catholic School building. High windows provide natural light but no ventilation or view. A secondary emergency exit is located at the rear of the room and exits through a storage space. There is a sink in the classroom to facilitate hand washing. Bathrooms are located outside the room across the hallway. Children are escorted and supervised when using the restroom. The classroom was observed to be clean with no immediate safety concerns noted due to maintenance or design. A phone is present in the room and emergency numbers are posted next to the phone. The curriculum plan is provided to parents via a newsletter that is posted at the main entry to the classroom. The curriculum identifies a general learning focus and specific learning concepts. The planned curriculum focus on the day of my visit was a general theme of Winter/Snow, and a focus on the letter "I", and working on Name Charts for the children. The preschool room has a long narrow design but is arranged to divide the space into activity centers that provide space for the children to play without creating any blind areas.

A good variety of toys and materials were present which were observed to be in good repair and appropriate to the ages of the children. The activity centers are designated by color code which was very effective later in creating an environment that is supportive of providing clear and concise direction to children when assigning them to small group activities. During the visit it was noted that when the children were engaging in small group activity centers the program may benefit from additional choice options. The activity center options available included blocks, art, dramatic play, and table games/toys. The children did rotate between centers at set time intervals but it was still noted that some children became bored with the activity options. It was discussed that offering other center options that include such as reading, math/science, or writing may offer the children options that they would be more interested in and help support cognitive skill development.

Good interactions were observed on the day of my visit. The class did move through the planned schedule with small group activities, large group learning, snack, and large motor play activities. Both teachers were engaged with the children during the small group center play activities, and when presenting the large group activity. Both moved through the room talking with the children about their play, providing guidance to resolve behavioral issues, and recognizing positive behaviors. The teachers did make good use of proactive approaches to behavior management with recognizing positive behavior, using transition activities such as a timer and bell, and providing guided problem solving to help the children identify alternative options. Both teachers use calm and engaging tones when speaking with the children. The teachers did maintain a focus on safety when interacting with the children such as during snack time when a child was holding a pretzel up to their eye Chelsi told the child not to do that because the salt on the pretzel could get in their eye and that would hurt. When children

were observed to be running the teachers told them they needed to walk so that they wouldn't trip and fall.

Due to the limited hours of operation meals are not served but snacks are provided. The parents take it in turn to provide snacks and a list of appropriate suggestions is provided. A limited supply of snack items is kept in the center to supplement as needed. Good food storage practices were observed with most options being prepackaged single serving items. A menu of the snacks provided was maintained and generally the snacks did include credible food options. Snack was provided during the time of the visit and included pretzels, apple sauce, and a choice of either 100% juice or milk. While the teachers did not eat with the children supervision was provided at the table. During the visit one child did drop part of their snack on the floor and the teachers did direct them to throw it away and provided the child with a new serving.

Good health and safety policies are in place. As noted the teachers were attentive to child behavior and providing both guidance and explanation about behaviors that could result in injury. Good hand washing practices were observed with the teachers ensuring the children washed their hands and that they did so in an effective manner following restroom use, immediately prior to snack service, and at other times they became soiled. Hand sanitizer was also available in the classroom but stored where use could be monitored by the teachers. There were no children taking any medications, and due to the limited hours of operation medications are not routinely administered but policies are in place should it become necessary in the future. Information regarding allergy plans are maintained for children who have diagnosed allergies. A first aid kit is maintained in the classroom and had a limited supply of materials to address most common first aid needs. Additional materials are available in the school office. Chemical cleaners, personal items, and other items that could pose a safety risk to children were stored where they were not accessible to the children.

While the school does have outdoor space available the children make use of the school gymnasium for large motor skill activities. Balls, and other items were taken to the gym for the children to play with. The teachers also provided suggestions of activities the children could engage in.

The center did have the required postings for No Smoking, Consultant Contact, and Mandatory Abuse Reporting, but did not have a copy of the License Certificate. In reviewing child files all required information was present with the exception of 3 children that still needed an updated physical. Documentation was present that did identify notices had been sent to the parents regarding the need to provide a current physical. In reviewing staff files Chelsi needed an updated physical, but the file for Christie could not be located. Jean did confirm that the background checks had been completed and she was uncertain why the file was not present. It was reviewed that if the file could not be located the background checks, physical, and other documentation would need to be resubmitted. In reviewing training information for Christie a review of the I-Power training registry showed that the initial training required within the first 90 days of employment had not been completed. All inspection logs and certificates were available and current though the Fire, and Tornado Evacuation Drills had not been logged for the month of December 2024. The center handbook has been previously reviewed and found to contain all required policies.

III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:

The program continues to have very strong support from the community with maintaining a full classroom roster.

Despite the changes with a new teacher the center was able to maintain a strong level of continuity with Chelsi coming back and taking on the role of the lead teacher. Being familiar with the program as an assistant in the prior year allowed for her to easily step into the new role and maintain the strong focus on curriculum and school readiness skills that the center has worked to develop.

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

109.4(6): The child care license shall be posted in a conspicuous place and shall state the particular premises in which child care may be offered and the number of children who may be cared for at any one time.
-- A copy of the license certificate was not posted on the day of the visit.

109.6(6)c: Center repeats Iowa record checks at a minimum of every two years or when aware of additional child abuse or criminal history that occurs.
-- Number not in compliance: 1 Documentation of a renewed record check was not found for Chelsi.

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 The employee file for Christie could not be found on the day of the visit.

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 The employee file for Christie could not be found on the day of the visit.

109.10(1)a: Preschool (for children five years and younger not enrolled in school): Physical exam report submitted within 30 days of admission, was obtained no more than 12 months prior to admission, is signed by a licensed MD, DO, PA, Chiropractor or ARNP, and contains health history; present health status including allergies, medications, and acute/chronic conditions; and recommendations for continued care if necessary.
-- Number not in compliance: 3 Documentation was present that notice had been provided to parents to provide updated information.

109.10(15)b: Emergency instructions, phone numbers, and diagrams for fire, tornado, and flood shall be visibly posted and documented at least once a month for fire and tornado. Records shall be maintained for current and previous year.
-- Documentation of drills being conducted was not maintained for December 2024.

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.