Health and Human Services

Iowa Department of Health And Human Services

CHILD CARE CENTER ANNUAL EVALUATION

Name of Center: Sunrise Child Care Inc

Provider No.: 24847

Address: 525 13th Street Ste 202, Wellman, IA, 52356

County: Washington

Director's Name: Melissa Kaufman

On-Site Supervisor: Juna Gingrich /Glenda McIntire

Phone Number: 3196462890

E-Mail: sunrisedirector@netins.net

HHS Visit Date: 04/16/2026

Licensing Period: 08/01/2026 to 08/01/2028

Fire Inspection:

Date Inspected: 04/01/2024

Comments: due every 3 years, completed by State Fire Marshall Amy Fratzke

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

CHILD CARE CENTER ANNUAL EVALUATION

HOURS:	*Year-round*	*School-Year*	*Summer Only*
Sunday			
Monday	5:30 AM to 6:00 PM		
Tuesday	5:30 AM to 6:00 PM		
Wednesday	5:30 AM to 6:00 PM		
Thursday	5:30 AM to 6:00 PM		
Friday	5:30 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	19	12	17	32	80
Summer					0

1. Basic Overview

Sunrise Child Care occupies a main floor wing specifically constructed for child care at a newly constructed community center in Wellman. The program shares space with the local YMCA and community center. The daycare wing is free from intrusion by constituents of the community center for purposes other than child care. The center is owned and operated by Sunrise Child Care, Inc., a nonprofit, community corporation. The center entered into a cooperative agreement with the city of Wellman and Mid-Prairie Community School District to share space and resources. One room used by the school in years past is now utilized by the daycare. The center offers traditional childcare and before and after school care.

The director is Melissa Kaufman. She began as the Director in July 2014. Prior to coming to Sunrise Ms. Kaufman was the lead teacher of another preschool for 3 years. Ms. Kaufman possesses an Associate of Arts Office Administration degree she earned from Kirkwood Community College - Iowa City, IA and a CDA . The center has been licensed since 1990. Since Ms. Kaufman has taken this position the main Center has improved in numerous ways.

Juna Gingrich is the On Site Supervisor at the center. Ms. Gingrich has 20 years childcare experience. Glenda McInitre has also been appointed as OSS and has served in these positions for 7 years.

On 4/16/2026 I made an unannounced licensing visit to Sunrise Child Care Inc. and met with Director Melissa Kaufman. At the time of the visit, staff were actively engaged in providing the child care program to the children. An onsite supervisor was also present. All program areas were observed during the visit. The center also has several "on call managers" to serve as designated person in charge if the OSS and or Director are not able to be present.

The visit consisted of classroom observations and activities, ratios, nutritional practices, health and safety practices,

CHILD CARE CENTER ANNUAL EVALUATION

playground observation, field trip and transportation practices, and administrative review.

Center Nutrition Practices Observed:

Meals are served family style in the classrooms and posted menus indicate that minimum nutritional requirements are met. The kitchen contains new equipment, sufficient storage for center food, and sufficient dish washing capacity to accommodate a center of this size. The center participates in CACFP. Menus are posted and meet guidelines. They are also posted on the center website. Food storage was adequate. No outdated food items were present, and no food was stored on the floor.

The center administration team manage the kitchen and nutrition for the center. It was observed to be clean on the visit.

Center Health and Safety:

The center administers prescription and non-prescription medication in accordance with licensing regulations, physician directions, and parental consent. Center compliance regarding 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. Tornado and fire drills are conducted monthly and documented. A lead-based paint assessment is not required for buildings constructed after 1978.

If staff are supervising children with special health needs or allergies they should be trained on the child's allergy action plan or health care plan.

Ratio was not met since two year old children were being mixed with children age 5. Positioning of staff so that staff can see all children under their care at all times is practiced. Capacity is followed for each room. The Director has discussed supervision requirements with staff indicating staff must know the names and number of children assigned to their care. I discussed this again this year with the administration team noting the importance of face to name supervision as well as ratio rules and mixing ages of children. The center and supervisor shall ensure that staff knows names and number of children assigned. Staff shall provide careful supervision. Administration understands practices must be in place and implemented daily.

Ventilation is required in restrooms. Ventilation was not operable the day of the visit. Every 15 children should have access to at least one toilet and sink with ventilation.

Center Playground:

The center has a fenced and naturally shaded outdoor play area immediately behind the center. The Childcare Outdoor Weather Watch is consulted when outdoor play is questionable due to varying weather conditions. Playground inspections are conducted monthly. Each child has not had at least 75 square feet of space when outdoors. We discussed this practice should end. The play area should be measured and divided by 75. The number of children allowed in each area should be posted. Stakes holding down the border in the outdoor play area are tamped down so that they are level and not potential tripping hazards. Areas of the fence that are loose or gates that are settling are monitored so that gaps between 3.5-9 inches are not potential entrapment hazards. Caps should be placed back on the fence. A first aid kit is taken outdoors along with emergency medication.

After the visit this year the center measured the outdoor play space. The total was 1,800 square feet/75. This means 24 children can be playing in the area at one time

Center Transportation Arrangements/Field Trips:

The center has a van. If field trips are taken in the future children will have field trip authorizations signed. Emergency contacts and a first aid kit will be taken on each trip. The center will be purchased a new van last year. The van must have inspections conducted annually.

Center Administrative Records:

CHILD CARE CENTER ANNUAL EVALUATION

Child misbehavior is addressed by redirection, and positive reinforcement of appropriate behavior. The center is in compliance with regulations regarding required notices and postings and required written policies provided to parents in the form of a parent handbook. Staff and child records were examined during this inspection. Staff and child records are organized. They are reviewed annually. Child files include updated physicals and immunization, emergency contacts, dental and medical information and pick up authorizations updated annually. A tracking sheet of child physicals and when updates are needed should be utilized. Staff files contain professional development hours, CPR/First Aid training, UP and MR training, an approved physical, SING checks and fingerprint results.

The center has a specific Emergency Preparedness plan for this building. It is reviewed annually with staff, and they sign and date acknowledgement of such (5/6/22). Staff have signed the plan within the past year.

The center is consistently utilizing curriculum expectations, organizational tools, documentation in classrooms and for administrative duties and cleanliness. Mother Goose Time curriculum is utilized to help get the children ready for school. The center posts curriculum/activities for the month at their website.

2. Identify Observed Strengths of the program

Edge cushion for the windows
Resurfaced floors in all rooms
Rocks along playground surface for edging
The center has an excellent board who is aware of the daily functioning of the center. They are well informed and supportive of administration and the program as a whole. Sunrise operates with a Board of Directors which meets monthly to discuss finances and other center interests. The Board consists of community people, business members, parents and the Director who acts as a liaison between staff and parents and the Board.
The center Director works with both CCR&R and CCNC services.

3. Identify the aspects that fall below the standard

1. 109.8(2): Ratio maintained in center as required: Two-year-old children may not be mixed with 5-year-old children or older. The Director and OSS assured HHS this practice would stop immediately. She stated, "We are no longer mixing age groups. We had a managers meeting and reviewed the rule, printed out the section, and highlighted the information and hung it up front so that we could make sure we all were doing the same thing. I cannot state enough how frequently we reference the printout! " CORRECTED

2. 109.9(2)i: 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, Chiropractor, PA, or ARNP, and contains health history; present health status including allergies, medications, and acute/chronic conditions; and recommendations for continued care if necessary. Seven child physicals were overdue. The program is working with parents to secure updated child physicals. IN PROCESS OF CORRECTION

3. 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. Ventilation was not working properly in restrooms the date of the visit. On 5/5/26 the Director indicated this issue had been fixed and that stating a belt was bad in the system. CORRECTED

4. 109.11(4)a: Center must have safe outdoor program area adjacent to the center, with sufficient square footage to accommodate at least 30 percent of the enrollment capacity at any one time at 75 spear feet per child. Outdoor space must: Be free from litter and unsafe materials and free from contamination by the drainage or ponding of sewage or storm water. Include safe play equipment and an area of shade. Include fencing to protect from bodies of water or vehicular traffic. Each

child does not have 75 square feet each at times. The areas will be measured and capacity signs hung. Caps need to be placed on the outdoor fence. The Director and OSS agreed to this plan. The Director stated, "

We did measure the outdoor space. Here's what we learned:
1,800 square feet/75= 24 at a time

We are sticking to one room at a time and have come up with the following schedule and hung on doors for all classes to follow.
8:15-9:20 a.m. Green Room (3, 4, 5 yr old)
10:00-10:45 a.m. Yellow Room (2 yr old) (on 2+ side)
10:00-10:45 a.m. Toddler Room (1 yr old) (on toddler side)
2:45-3:15 p.m. Yellow Room (2 yr old) (on side 2+side)
2:45-3:15 p.m. Toddler Room (1 yr old) (on toddler side)
3:40-4:10 p.m. Green Room (3, 4, 5 yr old)
4:15-end of day Orange Room (school age)"

Over capacity: CORRECTED

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 remain in Full licensing status. The center is directed to correct the items listed in Section IV. The director gave me a verbal commitment that the noted rule violations would be promptly corrected. It is important to note, all HHS licensing standards and procedures must be maintained during the renewal period.

HHS encourages you to contact Child Care Resource and Referral. They offer centers assistance with meeting the DHS regulations, IQ4K, infant/toddler concerns, room arrangement and environment, developmental concerns, Best Practice information, CDA assistance, or any questions or concerns you may have. Tabitha Copeland is the child care consultant for this program. They understand they may access these services at any time. They access her services frequently, as noted below.

Child Care Resource & Referral Consultant Tabitha Copeland serves this center. She provided the following the past year:

1-6-25 addressed iPower questions
1-8-25 discussion to set visit
3-24-25Melissa had questions on the Q&A sheet mentioned on the Child Care Continuum webinar.
6-24-25 call about mixing ratios ages 3-5 in classroom and when leaving grounds. Gave Comm 204 and discussed specific concerns about a child and also about items that I suggested they connect with the CCNC about in regards to health and hygiene for potty training children
6-26-25 Call about iPower supports
7-15-25 on-site book nook visits for all rooms. Spoke to about having a child 5 yrs old who had downs syndrome in the room with infants and called HHS. Child usually has one on one for supervision when outside and person who does that was temporarily on break, staff has found the child is calm in infant room where is younger sibling is so discussed talking to HHS about a ratios exemption for situations with this one child like this. Program discussed with HHS. Follow up was COMM 204 with ratios for mixed ages
8-25-25 call IQ4K discussions and the need to update iPower for process and HHS in general
8-28-25 email rescheduling a visit for IQ4K
9-3-25 email IQ4K questions
9-5-25 On-site for IQ4K, discussed and did intake for Growing Iowa funding
9-15-25 Growing Iowa Contact

CHILD CARE CENTER ANNUAL EVALUATION

1-7-26 call general assistance Growing Iowa (GI) grant info
1-14-26 email general assistance GI grant
1-21-26 email general assistance GI grant
1-23-26 email general assistance GI grant
1-26-26 onsite- general assistance GI grant
1-30-26 email question on regulations, info provided from COMM 204
2-25-26 email general assistance GI grant
3-2-26 email general assistance GI grant
3-16-26 email support for trainin3-24-26 email support forms for HHS requirements for incident/injury supports, forms sent

4-1-26 call general information for upcoming trainings program might be interested in
4-8-26 On-site to support program in HHS visit preparation
4-9-26 email support for trainings sign up for employees

Tabitha Copeland
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Community Action of Eastern Iowa
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The center also consults with IDPH Danielle Pettit-Majewski.

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. Abbie Dierksen is the Child Care Nurse Consultant for the program. The center director has a relationship with Iowa Department of Public Health Child Care Nurse Consultant and has also utilized these services. Child Care Nurse Consultant Toni Krana serves this site. This has provided the following the past year:

10-3-2024 consult on odors in the classroom
01-02-2025 consult on using glass bottles at parents' request
01/08/2025 consult on Flu
01/17/2025 consult on care plans/ new care plans provided
02/04/2025 Medication class completed and test out of 3 staff at center
02/20/2025 consult on the use of owlet monitors at parents' request
03/26/2025 consult additional questions about glass bottle use
04/14/2025 consult on illness postings
06/06/2025 consult on air quality and outdoor play
06/24/2025 consult on potty training regression
09/08/2025 consult on the use of vomit dust at center.

In 2026 she provided some technical assistance but no onsite visits to the program.

Contact information is:
Toni Krana RN, CCNC
Muscatine Public Health
1609 Cedar St.
Muscatine, IA 52761

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CHILD CARE CENTER ANNUAL EVALUATION

563-262-6274
toni.krana@unitypoint.org

TARGETED ASSESSMENT: The Director and I discussed behavioral management techniques. She stated, "• 1) Understand expectations: 2) managing frustrations, 3) monitor performance.
•
• How do you help staff understand the expectation associated with behavior management? To help staff understand expectations, we provide training documentation (see attached Children's Discipline Policy). When a new staff member is hired, we also have a week of "shadow training" where the seasoned staff member goes through a checklist to help new staff members learn appropriate techniques we use in our classrooms (see attached New Staff Training Plan).
• How do you help staff recognize their frustration and respond with de-escalation? If we hear the volume of a classroom increase from the office area, a manager goes to the classroom and observes the room to see if the increased noise level is something the teacher in the room needs assistance with or if the noise is a part of regular routine classroom activities. There are also several natural checkpoints built into our manager checklist where the manager on duty checks in with each teacher about their day to see if there are anything the class may need help with (e.g. curriculum, activities, reading). These pop-in times also give managers an opportunity to evaluate the stress level/frustration level of the teacher and the classroom.

• How do you monitor these skills / expectations? If a teacher indicates they have questions or need assistance brainstorming a challenge, the manager works through the solution in real time in the classroom alongside the teacher. If the teacher indicates a child is continuing to struggle, we'll have the kiddo take a break in the office and talk with a manager about what is going on, set classroom expectations about the situation, and return the child back to the classroom once the situation is de-escalated. If a staff member just seems to need to step away for a bit, a manager will go in and have the staff member take their break or talk with the director to brainstorm solutions."

Date: 05/06/2026

HHS Licensing Consultant: Jill Seibert

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**.