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

Name of Center: Kids Spot Daycare **Enrollment:** 66 **License ID No. (Reapplications)** 16081

Street: 114 N Michigan ST **City:** Lake City Iowa **Zip** 51449 **County:** Calhoun

Mailing Address: 114 N Michigan ST, Lake City, IA, 51449

Director's Name: Allison Mernka, Rebecca Smith **Phone Number:** 712-464-3053

On-Site Supervisor(s): **E-Mail:** kidsspot@wccta.net

Date(s) of Visit: 06-27-2024

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

Date Inspected: 09-27-2023

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	21	14	23	14	72
Summer					0

QRS Rating: N/A

RECOMMENDATION FOR LICENSE:	
X	**FULL** license from 08-01-2024 to 08-01-2026
	PROVISIONAL license from
	DENIAL of initial application
	SUSPENSION of license
	REVOCATION of license

Licensing Consultant: Raymond Salsbury **Date:** 07-09-2024

I. IF CURRENT LICENSE IS PROVISIONAL, IDENTIFY THE CORRECTIVE ACTIONS

II. IDENTIFY THE AREAS OBSERVED ON THE VISIT:

An unannounced annual visit was made to the Kids Spot Daycare on 06-27-24. Allison Mernka took over as a co-director of this program in late 2020, and was joined by Rebecca Smith who became a co-director in early 2023. Both are well qualified for the position based on their experience and on-going training. This center is located in an old medical office that has been renovated in Lake City and is operated as a non-profit program overseen by a board of directors. The center provides daycare to infants through school age children. There are approximately 66 children enrolled in the program served by 15 teachers 8 of whom are full time, and 7 part-time/summer help. All aspects of the program subject to Licensing Standards were reviewed during the visit.

The general layout and design of the building and classrooms remains the same as from the last visit when a substantial remodel and construction of an addition was completed. The rooms are based on age groups with younger infants in the remodeled infant room, and older infants in the room previously used by the 2 year old. The 2 and 3 year old children make use of larger open central room spaces. The preschool, and school age children make use of the classrooms in the new expansion. Windows along the exterior walls provide natural light, a view of the outdoors, and ventilation. With the construction of a new school age room the center is no longer using the lower level classroom that had previously served as a school age space and which is now be used for storage and emergency storm shelter. The center will need to ensure that with using that area for storage sufficient clear space is also maintained to allow the children room to shelter if needed. Secondary exits providing direct access to the outdoors was added to all classrooms and all exits were clear of obstruction and opened easily and freely. Restrooms are directly available from all classroom spaces. All classrooms were observed to be clean with no issues related to maintenance observed. Each room makes use of furniture and play structures to define activity centers which are arranged so as not to create any blind areas.

The available activity centers increase in both options and complexity in classrooms as age groups progress with all rooms having options of large/small manipulatives, books, art/crafts, and music/media. Older classrooms include options such as dramatic play, math/science, and group learning. Activity centers were well supplied with toys and materials that were in good repair and appropriate to the ages of the children present. Several of the classrooms had new equipment such as the school age room which had a new dramatic play kitchen center. A copy of the daily schedule and planned curriculum was posted for each room. Good interactions were observed with staff in all classrooms with the teachers implementing the planned curriculum such as the preschool room where the teacher did a group learning activity, read a book, and then the children transitioned to a small groups cutting/craft activity. Ratio was maintained in each classroom as required by age. Good behavior management techniques were observed with staff using routines, reminders, positive recognition, and redirection to promote positive behavior and interactions.

Good health and safety practices were generally observed but some practices do need to be reviewed. During the visit I was able to observe a diaper change and while the teacher did follow the general procedures she did not deglove between handling soiled and clean materials, and also did not use a baby wipe despite the child having a wet diaper. Prescription, and over the counter medications were stored in areas where they were not accessible to the children, and while were labeled with the name of the individual to whom it belonged some were written on the packaging rather then the container which could result in confusion if the two become separated. Chemical cleaners, medications and other items labeled as

keep out of the reach of children were stored in areas where they were not readily accessible but a staff purse was left in an area where children would have access. Purses, and diaper bags also need to be stored where they would not be accessible as they frequently have materials that can pose a safety risk to children. Good cleaning practices were generally observed with the staff waiting for children to be out of the immediate area before using chemical cleaners. First aid kits are maintained and do need to be replenished to ensure that they contain materials necessary to address most common first aid needs including a first aid guide. Safe sleep was followed for children under 1 year of age but monitoring the amount of time children are allowed to lap sleep before being transitioned to cribs is recommended.

Meals are prepared on site in a small kitchen area. Good food storage and handling practices were observed in the kitchen during the time of my visit. All food items were stored in air tight sealable food grade containers after having been opened, and were labeled. The center does need to monitor pantry storage on the lower level as there was evidence of rodent dropping in the pantry area and on the shelving units. There was no indication of damage to any of the stored food packages, and it was confirmed that the center does have a pest management service. Cleaning of the area and continued monitoring will help to ensure that any new activity is quickly identified. A menu is posted and identifies a good variety of nutritionally appropriate meals. Meals and snacks are served in the classrooms. I was able to observe lunch service and while the teachers did not eat with the children supervision was provided at the tables.

The center playground has a large climbing structure which was observed to be in good repair. A unitary pour in place foam rubber product is used for fall surfacing and does cover the full of the playground. The playground is fully enclosed by chain link fencing. In addition to the climbing structures there was a variety of toys including balls, push toys, riding toys, etc. which were observed to be in good repair. Awning shade structures have been installed.

In reviewing administrative records all required postings for no smoking, consultant contact, mandatory abuse reporting, and the center license were hung in an area that was readily accessible to all parents and visitors. Emergency evacuation postings with both diagram and written instructions for fire and tornado were not posted by all exits from all programming spaces. The center is using the Playground data management and communication program for record maintenance. This program does allow the center to run reports and track information that is missing or expired. A random sample of files were selected for review and compared to the the entered data which was generally accurate. The center identified 5 child files that needed a renewed physical. A review of half of the staff files compared to the self-audit completed by the center was found to have some inconsistency but in favor of the center. The self-audit identified 1 file that needed documentation of current Iowa SING background check, but when reviewing that file current documentation was present but the tracking sheet had not been updated. Inspection logs and certificates were available and current for all required elements.

III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:

This center has continued to work to update the facilities and program. This includes completing grants and acquiring new toys and materials to implement the curriculum plans.

The center has also striven to return to a level of stability following the completion of the renovations. This has been successful as evidenced by the retention of staff, and implementation of the planned curriculum.

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

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: 5

109.10(9): First aid kit: The center shall ensure that a clearly labeled first aid kit that is sufficient to address minor injury or trauma is available and accessible to staff at all times when children are:In the center.In the outdoor play area.On field trips.
-- First aid kits needed to be replenished to ensure all items necessary to address common first aid needs are present including a first aid manual or guide.

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.
-- Postings were present by all exits from all programming spaces as required.

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 issued cited as not meeting licensing standards and anticipated date by which corrections will be completed. 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.