Health and Human Services

Iowa Department of Health And Human Services

CHILD CARE CENTER ANNUAL EVALUATION

Name of Center: Little Clippers Child Development Center

Provider No.: 28603

Address: 809 Buck St Ste B, Tiffin, IA, 52340

County: Johnson

Director's Name: Amanda Rairden and Jenni Wombacher

On-Site Supervisor: Bailey Ackman

Phone Number: 3195454033

E-Mail: littleclippers@southslope.net

HHS Visit Date: 12/16/2025

Licensing Period: 02/01/2026 to 02/01/2028

Fire Inspection:

Date Inspected: 07/19/2024

Comments: Does Comply.

Report Visit Type:

- [ ] PTO
- [X] Licensing Visit
- [ ] Drop In
- [ ] Administrative Change

License Type:

- [X] Full
- [ ] Provisional

Quality initiative:

Quality Rating: 1

- [ ] Accrediation

Program Duration:

- [X] Year-Round
- [ ] School Year
- [ ] Summer Only

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HOURS:	*Year-round*	*School-Year*	*Summer Only*
Sunday			
Monday	7:00 AM to 5:30 PM		
Tuesday	7:00 AM to 5:30 PM		
Wednesday	7:00 AM to 5:30 PM		
Thursday	7:00 AM to 5:30 PM		
Friday	7:00 AM to 5:30 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	52	34	26	30	142
Summer					0

1. Basic Overview

An unannounced annual visit was made to the Little Clippers Child Development Center on 12/16/25 where I met with the center director Amanda Rairden. Amanda has a Bachelor's Degree in Elementary Education. She started the center in 2009. Jennie Wombacher is the assistant director, has an Associate's in Liberal Arts, and started in 4/2010. The center provides full range child care programming serving infants to school aged children. The center is open year around with hours of operation of 7:00am to 5:30pm. There are currently 135 children enrolled in the center served by 38 staff. All aspects of the program subject to Licensing Standards were reviewed during the visit.

The program is located in a commercial building that completed construction in 2024 and was designed as a child care center. All classrooms are located on the ground level and are designated by age group. Each classroom was observed to be clean with no concerns noted due to maintenance. Each classroom has windows along the exterior walls that provide ample natural light, a view of the outdoors, and ventilation. Each classroom has direct secondary exits to the outdoors. It was noted that the emergency exit for one of the infant room was sticking a bit which may have been due to environmental weather changes and while the door was still able to be opened will need to be monitored. Each classroom had restroom facilities available directly from the classroom. Each room is divided into activity centers through the placement of furniture and play structures which are arranged so as to not create any blind areas.

2. Identify Observed Strengths of the program

All staff were actively engaged with the children attending to their needs and implementing the planned curriculum. This included engaging in direct care activities such as assisting with diapering/toileting, reading to the children, playing with the children, and serving meals. With presenting the planned curriculum teachers engaged in activities such as reading books,

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participating in music/movement activities, doing planned crafts, or joining the children in their play. All of the teachers were observed to speak to the children using positive and encouraging tones of voice and word choices. Good behavior management practices were observed with the teachers using proactive approaches of routines, and reminders of expected behavior. As noted there were teachers engaging in large group teacher lead activities and while there were some children that were not interested in activity the teachers did encourage them to join the group but did not require it. During the visit parents were observed to arrive with children and the teachers did take time to greet the children and their parents as a means to exchange information, assess the children's health, and welcome them to their class. Ratio was maintained in each classroom as required by age.

Good health and safety practices were observed during the visit. I was able to observe several diaper changes and the staff did follow the required procedures. Good handwashing practices were observed for both children and staff. The teachers did remind children to wash their hands following diapering/restroom use, before meals, and other times they became soiled such as when a teacher sent a child to wash their hands after blowing their nose. Medications were stored where they were not accessible to children. It was noted that some medications had been labeled on the packaging rather than the product container and it was reviewed that this could result in confusion if the container was separated from the packaging. It was also noted that there was a supply of stock medication for fever reducers and it was discussed that these should not be used for children. It was reviewed that if parents wanted their children to take medications they should provide them to ensure that it was product they approved of. During the visit one child was observed to fall and the teacher in the classroom did an excellent job of responding with assessing the child for injury and providing comfort both emotionally with holding the child, and offering a cold pack. The center did have response plans posted in classrooms for children with identified health concerns, and notices for disease exposure. Good cleaning practices were observed with the staff using disinfectant and sanitizer products properly, and waiting for children to be out of the immediate area before using chemical cleaners. Safe sleep practices were observed to be followed though it was noted that a white noise machine was hung on an outer rail of one crib. It was reviewed that this should be moved and staff did immediately move it to an area where it still provided comfort to the child, but was not attached to the crib.

The center has a full kitchen on site where meals and snacks are prepared. A copy of the planned menu was posted and provided a good variety of nutritious meal options. Good food handling practices were observed with staff wearing food service gloves and using measured scoops when portioning meals. Good food storage practices were observed for refrigerated items, but several dry pantry items were not properly stored in air tight sealable food grade containers. It was reviewed that rolling/folding and using tape or clips to close bulk packaged items is not sufficient. The staff did immediately begin repackaging those items when this was identified. Meals are served in the classrooms with the teachers sitting at the tables to provide supervision. One teacher was observed lap feeding an infant under 6 months of age a bottle and was following requirements to ensure the child was held and fed in an upright position.

The center does have a playground space which was not fully reviewed due to weather conditions and snow cover. The equipment did appear to be in good repair. The playground is enclosed by chain link fencing which appeared to be in good repair.

In reviewing administrative records all required notices for No Smoking, License Certificate, Consultant Contact, and Mandatory Abuse Reporting were posted at the main entrance where they were readily visible. Other required postings for diapering, handwashing, daily schedule, curriculum disease exposure, and emergency contacts were also present. A random sample of child files were reviewed and found to contain all required documentation. The center does have a self-tracking system to identify what information is needed. Response plans were present for children with identified health concerns and were posted in classrooms. The center uses an electronic communication application to share information with parents including infant daily sheets. That system does support taking photographs of children and attaching them to individual files. The staff were using this as a visual method to document daily activities and disposition for children under 2 years of age and it was reviewed that if using this approach photos needed to be taken of each child each day both morning and afternoon to show changes in functioning. A random sample of staff files were also reviewed and found to contain all required documentation. All inspection logs and certificates were available and current with the exception of fuel burning appliance inspections which were expired.

3. Identify the aspects that fall below the standard

With regard to concerns of indoor toys there were several items or toys with small parts that could easily break off which would be considered choking hazards. Children under 4 years of age are prone to mouthing toys and items and objects less than 1 1/4 inches diameter and 2 1/4 inches length are considered choking hazards. Choking hazards must be removed from

classrooms serving children 2 years of age and under, and should be placed in storage where they can be brought out for supervised play for children that are 3 years of age.

With regard to the Annual inspection of fuel burning appliances the center did have a new heating system that was installed a little over a year ago which would have been inspected at the time of the installation, but no follow-up inspection had been completed since that time. It was reviewed that all fuel burning appliances need to be inspected each year.

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

The staff serving children in classrooms under 4 years of age did identify that they would review the materials in their classrooms and remove those toys with small parts that can break off.

Amanda stated that she would contact their HVAC provider and schedule a renewed inspection.

5. Special Notes/Recommendations

A full license will remain in effect at this time.

Date: 12/21/2025

HHS Licensing Consultant: Ray Salsbury

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**.