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

Name of Center: Albia Preschool and Daycare Inc **Enrollment:** 34 **License ID No. (Reapplications)** 23963

Street: 100 N 2nd ST **City:** Albia Iowa **Zip** 52531 **County:** Monroe

Mailing Address: 100 N 2nd ST, Albia, IA, 52531

Director's Name: Klint Sinclair **Phone Number:** 641-932-7835

On-Site Supervisor(s): Madison Kahoe Jensen **E-Mail:** albiadaycareandpreschool@gmail.com

Date(s) of Visit: 08-15-2025

X **Licensing Visit** X **Unannounced Visit** **Off Year Visit** **Administrative Change**

LICENSING VISITS

New Application X **Re-Application** **NA**

Signed Application (470-0722) Received X **Yes** **No** **NA** **Date Signed:** 02-01-2025

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

Date Inspected: 03-20-2023

Comments : conducted by State Fire Inspector Curt Seddon. Due every 3 years. This report was held until an approved fire inspection was procured.

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 X 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	12	18	14	10	54
Summer					0

QRS Rating: N/A

RECOMMENDATION FOR LICENSE:	
X	**FULL** license from 02-01-2025 to 02-01-2027
	PROVISIONAL license from
	DENIAL of initial application
	SUSPENSION of license
	REVOCATION of license

Licensing Consultant: Jill Seibert **Date:** 08-29-2025

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

II. IDENTIFY THE AREAS OBSERVED ON THE VISIT:

Albia Preschool and Daycare Center is located in a single story, metal frame building in a residential area of Albia. The center provides full day child care services for children ages infant through school age (12 years old). The center is owned and operated by a not for profit community corporation. In June 2019 a new Director was appointed (Klint Sinclair). Mr. Sinclair has a BA in Social Sciences with an Education concentration. He also holds an AAS. Director Sinclair had 5 years of childcare experience working in licensed centers in a supervisory/director capacity (Head Start and Son Shine Preschool), and 2 years of other childcare/social services experience. Two years he served as a child care board president. The Director is a long time community member. The center appointed Madison Kahoe as onsite supervisor in May 2021. She maintains an AA in Early Childhood with a Childcare Technician Diploma.

On 8/15/25 I made an unannounced licensing visit to Albia Preschool and Day Care Inc. and met with other staff members. At the time of the visit, staff were actively engaged in providing the child care program to the children. All program areas were observed at that time. Terri Sinclair was staff designated in charge the date of the visit.

The visit consisted of classroom and building area review and observations of activities, ratios, nutritional practices, health and safety practices, playground observation, field trip and transportation practices, and administrative review.

Center Nutrition Practices Observed:

The center prepares and serves breakfast, morning and afternoon snacks, and a noon meal to the children. Meals and snacks are prepared by center staff in the center kitchen and the noon meal is served family style. The center does not have a nutrition aide/cook. Staff indicated they all helped to prepare meals. Posted menus indicate that minimum nutritional requirements are met. The kitchen is large, modern, and adequate in facilities and storage for a center this size. I observed both room temperature and cold food storage in the facility. No open food was found. Dry food and canned goods were stored in cabinetry. No food was stored on the floor.

Thermometers are present in all infant/ refrigerator and freezer units. Temperatures were below 40 degrees for cooling and below zero degrees for freezing. The kitchen was observed to be clean.

The month's menu is posted in the entry way/coat room. Milk is served daily. CACFP program rules appeared to have been met the day of the visit. The Center serves the children meals and sits and eats with the children. Staff should not be in ratio supervising children and preparing meals simultaneously.

Food allergy alerts were observed to be taped to the refrigerator in the kitchen. Food waste containers are covered.

Center Health and Safety:

Prescription and non-prescription medication were reviewed in accordance with licensing regulations, physician directions, and parental consent. Medication is stored in the original bottle and kept in a medicine chest in the Director’s office.

Notation of administration of medication is documented and kept on the refrigerator or on file. All medication is kept out of the reach of children. Emergency medications are not locked so that they are easily accessible. Allergy action plans were discussed and diet modification forms reviewed. One child had an intolerance, but no children in the center have a diagnosed allergy.

Storage and maintenance of a first aid kit compliance were reviewed. First Aid Kits were stored out of reach of the children. Labeled First Aid Kits were found throughout the Center. One kit is mobile that is taken outdoors. A supervised quiet area is provided for ill or injured children in the Director's Office, which is located inside the main entrance and away from the other children.

Environmental testing and maintenance of any necessary detection equipment were reviewed. The annual fuel burning appliances inspection was conducted last February. The Center is on City of Albia water therefore a water analysis is not required. Radon testing is not required as the building is on slab. No crawl space is beneath the building. For best practice efforts testing was conducted last year and results were under 4 pCi/L.. The center was built after 1960, so a lead based paint assessment is not required. The center does contain a non battery operated UL approved carbon monoxide detector.

General regulations regarding safety policies and procedures were reviewed. Individual covered mats, beds, or cots and appropriate bedding are provided for all children who nap. Sufficient spacing is maintained between all cots and or mats to reduce the transmission of disease and allow ease of movement by children and staff. We discussed SAFE Sleep practices in the infant room. No blankets were in cribs. We discussed that children are only allowed to sleep in cribs and not in swings or on pillows, etc. Staff indicated infants do not sleep in anything but their crib.

No plants or pets were observed in the Center. Staff's belongings were out of reach of the children as were cleaners.

The center does not have volunteers. We discussed that if volunteers are considered I could send the Volunteer Form to the Director. Rules have changed within the last year regarding employees under 18. All staff in ratio at the center are at least sixteen years of age. If less than eighteen, they are not the sole provider on the premises. Staff persons under age 18 who are not under supervision of adult only provide care to school aged children

Emergency plans and drills for fire and tornado were reviewed. I reviewed documentation indicating drills had been completed.. All exits to the building were unobstructed.

All lower cabinets had child locks. Toileting supplies were adequate in each room. All electrical outlets were covered or child safe.

General regulations regarding sanitation policies and procedures were reviewed. It should be noted that Center Staff are responsible for cleaning their own area. The center should ensure staff assist children in personal hygiene.

Ratio issues can be addressed by keeping a floating staff on during the program day.

A new security system was installed indoors and outdoors. Cameras are present.

Center Playground:

The outdoor play area is fenced and has areas of natural shade. New equipment has been recently installed per safety requirements. The area features new large, anchored, climbing and activity structures. Two new climbing walls have also been added. Two new slides (a double slide and curly slide) have been added as well. Fall zones beneath the toys are surfaced with new wood chips. The play area has a large open grassy area on the south side of the building. Play equipment and fencing around the play area were observed. Screws on the fence have been capped to avoid possible injury. Plastic border is present with holding in surfacing. Spikes holding down the borders will have to be tamped down to ensure they are not potential tripping hazards.

The outdoor play area should be measured for capacity so that space requirements (every child needs a minimum of 75 feet) is not exceeded when age groups/classrooms are combined for outdoor play.

A Child Care Weather Watch was also posted and is consulted when outdoor play is questionable due to weather conditions.

Center Transportation Arrangements/Field Trips:

The center does not own a vehicle and provides no transportation. The center takes walking field trips only supervised by center staff in the local neighborhood. Increased ratio is followed during the walks. First Aid kits should be taken on walks and a CPR certified staff must be present. The Fire Department conducts a presentation once a year during Fire Prevention week. At least one person on duty in the center, or on field trips is over eighteen. Staff persons under the age of 18 do not provide transportation to children in care.

Center Administrative Records:

Child misbehavior is addressed by positive reinforcement of appropriate behavior, redirection, encouraging self-control, and short time-out periods of age appropriate length. Regulations regarding required notices and postings and required written policies provided to parents in the form of a parent handbook were reviewed. Emergency medical procedures are written and well defined. Dental policies have been added. The Handbook topics included scheduled activities, Infant Care, Nutrition, Civil Rights, Health and Safety, Medication, Emergency Procedures, Infectious Disease Control and an Accident Policy. Handling of bodily fluids should be added in Infectious Disease Control section. A biting policy and limited/unlimited access policies are present in the handbook. Intruder policy, earthquake policy, power outage, structural damage policy are in the EPP.

Written procedures -- for dental and medical emergencies are present. Dental and medical policies are well defined. A doctor and dentist should be listed for each child in case of an emergency. Accident/Injury reports are kept in each child's individual file. One copy goes home with the parent, one copy stays in the child's file. The Director indicated all reports were minor in nature. Incident reports were complete.

Emergency Numbers are posted on an Information Board in the main large room of the Center. The board also contained the Unlimited Access Policy, Emergency Exit signs and directions to exit the building. They were posted near the main large room door. I also observed License Consultant information, the Center's current license, a biting policy and emergency exit postings were also by the main entrance. Mandatory Reporter postings were noted by the entry door. A No Smoking sign was posted on the window next to the front entrance and on the inside of the front door.

Scheduled Activities are posted on the main parent board inside the door and in the classrooms.

The center has posted for Hand, Foot & Mouth Disease as well as Strep Throat in the past which meets posting requirements. The postings are placed on the front door and the classroom doors.

Staff files are reviewed annually including physicals (due every 3 years), Iowa criminal history record checks (due every 2 years), FBI National Fingerprint checks (due every 4 years), valid CPR and First Aid (due every 2 years), Mandatory Reporter (every 3 years) were reviewed for all staff. Also reviewed are documentation and IPOWER to indicate that ongoing staff training requirements are met. Four staff are currently employed at the center. HHS was not able to view staff files the date of the visit because both the Director and OSS were not present. The Director was contacted but not able to come to unlock his office. HHS asked for staff records the last two weeks in August. As of 8/29/25 no staff records or tracking have been provided. The Director must update IPOWER with necessary staff information.

Child files are reviewed annually including information and authorization to allow the center to secure emergency medical and dental services at any time child is in center's care updates (due annually) . Emergency contacts and pick up authorizations should be present for all children. All children have immunization cards on file. Public Health audits annually. Child physicals and statements of health were reviewed in the infant room. Child files are now being tracked digitally and on paper though the Bright Wheel app. They are typically updated in the fall during registration. Parents are also on this app. Five child physicals are overdue. The Director has spoken to parents about getting updated physicals. Immunization audits are conducted by Public Health every fall.

Annual staff emergency training is signed and dated by each employee. The Emergency Preparedness Plan required 10/1/2016 was present. Staff have been trained over all procedures and signed and dated acknowledgement of such last year. They will be trained again this year.. Emergency Preparedness Kits are present in case of evacuation..

III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:

Ratio issues appear to have been solved in 2023. Three unannounced visits were made to the center and each visit proved ratio to be met. Ratio was met in 2024.

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

1. 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.

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.

One toilet in the center does not work. Bleach should be dumped daily and a new mixture given to all classrooms each morning. Several inches of fall surfacing is needed beneath climbing equipment in the outdoor play area. The school age room is getting cluttered, with piles formed (on counter tops and cabinets). The fence is loose outdoors and could pose as an entrapment hazard. Spikes are sticking up from the plastic border outdoors and should be level with the border. The area had many standing weeds.

109.11(8)c All centers: Annual inspection prior to heating season of all fuel-burning appliances to reduce risk of carbon monoxide poisoning and shall install one carbon monoxide detector on each floor that conforms to UL Standard 2034. This was overdue on 8/24, but is scheduled for September..

2. 109.8(2): Ratio maintained in center as required:

Two year old children were mixed with five year old children. This is not allowed.

3. 109.10(14)a: The center and supervisor shall ensure that staff knows names and number of children assigned. Staff shall provide careful supervision. Staff left the room where two year old children are mixed with school age children unattended for a brief period to retrieve food. We discussed that all staff must ensure a floater or OSS/Director cover for them if they have to leave the room. Children cannot be left unattended without staff in the room, even for brief periods of time.

4. 109.6(4)d: Center repeats national criminal history checks at a minimum of every four years or when aware of additional history that occurs. Two staff in ratio the date of the visit had not had fingerprints scanned or rolled. One staff has since left employment. The other staff should not be in ratio until prints are sent in or scanned.

5. 109.7(2) Center directors and all staff have the required contact hours of training. HHS requested staff and child file information on the visit date and the last two weeks of August. As of 8/29/25 these records have not been provided. Staff files must be available for review during HHS visits. IPOWER should also be updated so that PD hours can be viewed. Physicals, SING checks and fingerprint results must be kept on site and available. The Director sent a tracking sheet after hours on 8/29 indicating some staff did not have the required hours of training. VIOLATION

V. SPECIAL NOTES/RECOMMENDATIONS:

Based upon this review, it is recommended that this center remain in Full licensing status. The center is directed to correct deficiencies in a timely manner. The center will continue to monitor day to day practice and adjust accordingly to continue to ensure licensing rule is met consistently throughout the year. It is important to note, all HHS licensing standards and procedures must be maintained during the renewal period. The center was closed one week in August due to staffing issues. The Director is often working in ratio.

HHS encourages you to contact your local nurse consultant Tammy Merrill. 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 for more information. http://idph.iowa.gov/hcci/consultants

CCNC Tammy Merrill has provided the following consultation the past few years:

4/19/2023 Introductory visit with Karen Lauer CCRR. Klint, the director was not present. Infant room staff member, Terri, asked for advice regarding the bottle warmer/sterilizer. She wanted to know if this could be used to thaw frozen breast milk. Advised her not to use because it could destroy nutrients. Emailed director, Klint with information regarding storage and preparation of breast milk and formula. Attached handout from IDPH on Supporting Breastfeeding with information on best practices on how to defrost and warm up milk. Also attached Refrigerator and Temperature logs as none were seen in the baby room. He replied with: the warms are only used to warm up milk to drink or for baby food and that the breastmilk hopefully is being thawed in the refrigerator or with tap water.
6/8/2023 Visit to facility to perform skills test on Amand P. for the Medication Administration Course that she took online. Met with Klint, the director for the 1st time. He discussed the struggle to hire employees and that they had 20 children on a wait list for daycare. He stated that they have a grant that is going to help pay for a separate facility that will house the infants. Scheduled a training per his request for Sept 1 on Safe Sleep for all of his staff on a training day.
6/9/2023 Emailed Klint a list of the other classes that I can teach per his request.
6/28/2023 Phone call from Klint requesting information on air quality and childcare. Emailed him information regarding guidance.
8/7/2023 Received an email from Jill Siebert regarding Albia Daycare. She wanted Klint to reach out to me regarding using peroxide as a disinfectant/sanitizer in which he did. Called and spoke to Klint (he called back). They are using Peroxide 3% with no dilution for cleaning and sanitizing due to its low cost. He had read this was ok during covid and continued to use this product d/t safety and low cost with having pregnant employees. I emailed Heidi Hotvedt regarding this. After receiving the brand name (Rexal and Swan) and NDC, Heidi stated that they are not to use these products because they are not labeled for use as a sanitizer or disinfectant, only as a first aid topical antiseptic. I emailed Klint to have him give me a call as I got another email from Jill asking if I can help him with an Allergy Action plan.
Klint called back. We discussed him not being able to use peroxide. He stated that he would use Microban and bleach and water. Reminded him to mix the bleach and water daily. Discussed Food Allergy Action Plans. They have 2 kids with allergies- one with gluten/whey and one allergic to tomatoes. At the time of Jill's visit, there was a plan for a child for dairy but the allergy has resolved as the child got older. Told him that he needs documentation of this and to remove the allergy plan. They have plans for the other 2 children – Cetirizine is to be used for the tomato allergy as needed and nothing for the gluten allergy as the symptoms are stomach cramping and diarrhea. Per Klint, the plans are now in the file, notebook in the kitchen and in the sheath in the child's room. Talked with him extensively about the new guidelines with epi pens and inhalers and what measures need to be taken. He has none of these needs at this time. Offered to do a chart review at a later date if he would like.
Spoke with Jill on the phone and gave her the above information given to Klint. Emailed a link to the Food And Allergy Action Plan and cc'd Jill for her records. Told Klint that if he had any further questions to please reach out. Will be at his facility in September to do a Safe Sleep Training.
9/1/2023 Taught 11 staff: Back to Sleep/Tummy Time. Talked with Klint after class. Topics of discussion: Food and Allergy Action Plans, parents wanting whole milk fed to child that just turned 12 months out of a bottle instead of a sippy cup, and physical forms for school age children. Scheduled a chart audit for Oct 5, 2023 per Jill Siebert's request. Sent an email for a follow up after visit. Sent an attachment to be used for all food allergies – Food and Allergy Action Plan and Diet Modification Form. Told him that I could not find any information stating it was not ok to have a child 12 months of age still drinking out of a bottle in childcare. I stated as I had said at the visit, I would encourage to continue to offer the sippy cup and to encourage the family to start working on it at home because the child needs repetition. Suggested that he could also check with CACFP program for any guidelines they might have. Also attached a School Age Health/Parent Statement of Health Form for the school age children like we had discussed.

Tammy Merrill RN 9/14/2023

She also offered to assist the Director with staff or child file information in December 2024 after the HHS visit. However, Klint did not accept the assistance. She can also provide consultation on playground surfacing, staff physicals, amber necklaces and allergy action plans and mixing bleach solutions.

This past year she stated, "I visited the center in June with Karen to get a new Business Partnership Agreement signed. I did a training with them last week – Iowa Outdoor Learning Environment. They are having difficulty with having enough staff to operate. I did not look at any records at either of my visits.
Thanks,
Tammy Merrill
Child Nurse Consultant
Jefferson County Public Health
641-472-5929"

HHS encourages you to contact Child Care Resource and Referral consultant Karen Lauer. They offer centers assistance with meeting the HHS regulations, IQR4K, 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 for more information: http://www.iowaccrr.org

TA's
11 with topics: training consultation, support licensing, refer support to other programs along with business policies and practices.
Visits
1 visit with Tammy in June
Consultant Lauer reached out to the program on August 26th offering assistance with the above noted violations.

Karen Lauer
Child Care Consultant
Child Care Resource & Referral of Central Iowa
Orchard Place
klauer@orchardplace.org

*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.