Health and Human Services

Iowa Department of Health And Human Services

CHILD CARE CENTER ANNUAL EVALUATION

Name of Center: Pella Christian Early Childhood Education

Provider No.: 51925

Address: 216 Liberty St, Pella, IA, 50219

County: Marion

Director's Name: Teresa Beyer

On-Site Supervisor: Brenda Huisman

Phone Number: 6416289024

E-Mail: creationstation@pceagles.org

HHS Visit Date: 10/03/2025

Licensing Period: 03/01/2024 to 03/01/2026

Fire Inspection:

Date Inspected: 09/08/2022

Comments: this report was held until an updated inspection was provided

Report Visit Type:

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

License Type:

- [X] Full
- [ ] Provisional

Quality initiative:

Quality Rating: 1

- [ ] Accrediation

Program Duration:

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

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Program Population Served:

- [ ] Infant(0-<24 Months)
- [ ] Toddler
- [X] PreSchool
- [ ] School Age
- [ ] All Ages

LICENSE CAPACITY	Infants	2 Years	Preschool	School-Aged	Capacity
General			93		93
Summer					0

1. Basic Overview

Pella Christian Early Education has been in operation since 1997. The center became licensed with HHS in August 2022. The school has secured entrances. The preschool currently uses four classrooms. The preschool also has a playground. Teresa Beyer is the director. Brenda Huisman is the on-site supervisor. They qualify for these positions and are teachers within the program. The program is held in a school building providing preschool and extended care during the school day for four and five year olds. The program is held in a school building providing full day child care for infant to school age children. The building is not specifically constructed for child care, but rather is set up as a school. The building is in a residential area of central Pella. Pella Christian School is the owner of this center.

Program Observations:

An unannounced licensing visit took place on 10/3/25. All program areas were observed at that time. Staff were attending trainings the date of the visit. This building has 4 classrooms serving preschool/school age children. The rooms are divided up to keep children of differing ages separate. The center is clean, bright, attractive and equipped with a satisfactory variety of new child sized furniture, equipment, toys, games, and activities for the children. The classrooms are not self-contained. Approximately 30 children are enrolled in the preschool program.

Center Nutrition Practices Observed:

School staff prepare all meals and snacks are provided by the center. The center provides morning snack and afternoon snack. Children who attend all day get a lunch from the school. The snack menu was reviewed. They have improved the past year. Meals are served family style and posted menus indicate that minimum nutritional requirements are not all being according to CACFP requirements.

Thermometers are in the refrigerator and freezer units per requirements now. Temperatures were below recommendations of 40 degrees or below for cooling and zero degrees or below for freezing temperatures. I observed dry food storage. No food was observed on the floor. Food was stored in cabinets. All food items were kept in sealed containers. One percent milk is served. The Director is aware CACFP approved foods must be served.

Center Health and Safety:

The program is aware that all children must be supervised by sight throughout the day. They are not allowed to go to the restroom without a staff being present near the door when utilizing school restrooms.

The following must be adhered to: All volunteers shall be at least 16 years of age and shall: Have signed statements

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indicating no conviction of any law in any state or record of founded child or dependent adult abuse. Signed statements indicating no communicable disease or other health concerns that poses a threat to children.

Volunteers can be utilized to assist in maintaining ratio when staff need breaks. They should sign a statement indicating they have been informed of responsibilities as mandatory reporters. They must undergo record check process if:

The individual is included in meeting the required child/staff ratio.
Has direct responsibility for a child or children.
Has access to child or children when no other staff is present.

Administration of prescription and non-prescription medication in accordance with licensing regulations, physician directions, and parental consent were reviewed. We discussed that children with allergies or asthma must have an Action Plan on file, posted in the room with the child and available to employees. At least one child currently enrolled in the program have diagnosed medical condition. The plan is kept in the go bag that is taken with the children around the building and outdoors. The school nurse can administer medication if available. Staff supervising the children with plans should also be trained on how to administer emergency medication. Brenda Huisman (OSS) is trained on medication administration and is in the preschool area daily.

Storage and maintenance of a first aid kit is reviewed annually. Kits should be labeled and contain all items on the checklist from IDPH. The center contains an ill/injured area (the nurse's office). Children are kept comfortable in this area until parents are able to pick them up.

We reviewed environmental testing and the maintenance of any necessary detection equipment. The center contains 2 battery operated carbon monoxide detectors which are working and inspected once a month and documented. These have been replaced with UL approved, non-battery operated units. Radon testing will be conducted. When testing results are received they should be rate of less than 4 pCi/L. This was discussed last year. Testing is due every five years and should be conducted in the winter. The building was constructed after 1971 there for a lead based paint assessment is not required. The building is on city water therefore water analysis is not required. The school is heated and cooled with a boiler. Any fuel burning appliances in the building require annual fuel burning appliance inspections. Air is forced through ceiling vents. Thermostats are located in each room. Ventilation and air quality was adequate on the visit.

Overhead lighting is provided by fluorescent lighting and the center contains five large windows in each room providing natural lighting. Windows can be opened to assist in air quality.

General regulations regarding safety policies and procedures were reviewed. Hand washing and food prep sinks should be designated and not used interchangeably.

Each child in the program should have 35 square feet of usable floor space. The rooms are designed to allow adequate space for all activities. Square feet and or capacity does not appear to be an issue in classrooms. All program areas were clean during the visit. Some students must use a restroom down the hallway due to not having a connected restroom. A hand washing sink is present in each room and in the restrooms.

Volunteers must go through a training in order to serve as volunteers. The form they sign should include information they the volunteer has been informed of the volunteer’s or substitute's responsibilities as a mandatory reporter. Volunteers should always be under the direct observation of staff. All volunteers and substitutes shall sign a statement indicating whether or not they have one of the following:
a. (1) Conviction of any law in any state or any record of founded child abuse or dependent adult abuse in any state.
(2) A communicable disease or other health concern that could pose a threat to the health, safety, or well being of the children.
b. (1) Complete form 595-136 DHS Criminal History Record Check, Form B
(2) Complete Form 470-0643, Request for Child Abuse Information.
(3) Sign a statement indicating the volunteer or substitute has been informed of the volunteer’s or substitute's responsibilities as a mandatory reporter.

We discussed and reviewed emergency plans and drills for fire and tornado. The center has a concrete, partially underground tornado shelter on center property large enough to protect all children and staff in the event of a tornado. Fire and tornado drills are documented monthly. Staff keep personal belongings in cabinetry. Children do not have access to this

area.

The facility has no pets or plants.

Sanitation policies and procedures were reviewed. Overall the building was clean. Restrooms were clean and contained an adequate amount of toileting supplies. Each restroom has ventilation as required.

Children do not have access to the kitchen.

Center Playground:

The center has a fenced and naturally shaded outdoor play area. Each child should have a minimum of 75 square feet of space for gross motor activities. Capacity for the area should not be exceeded. The center's playground has fencing. There is mulch for surfacing. There are areas of grass and concrete.

The Child Care Weather watch is utilized when outdoor play may be questionable due to weather conditions. Playground inspections are conducted and documented monthly.

Center Transportation Arrangements/Field Trips:

The center does provide transportation and takes field trips with school buses. The children take walks in the community so each parent signs a field trip permission form. They are in each child's file. A list of child emergency numbers and a first aid kit should be taken each trip.

Center Administrative Records:

Child misbehavior is addressed by positive reinforcement of appropriate behavior, redirection, modeling, and conflict resolution techniques. Required written policies are provided to parents in the form of a parent handbook. The handbook was given to me on the visit.

Staff files are reviewed annually. Per records staff are up-to-date on cpr, 1st aid, Mandatory child abuse training, continuing education and professional development hours (due annually). All staff have updated physicals. These are due every three years. All fingerprints are current (every four years) and Iowa Criminal Record checks (2 years).

Child files are reviewed annually including current physicals and immunizations on file. All children have signed medical and dental information, pick up authorizations and emergency contact information.

Annual staff training held on emergency plans were conducted in August this year. The Director developed the new Emergency Preparedness Plan for this center in 2024.

Regulations regarding required notices and postings are present. Emergency procedures maps are posted by each door. A schedule is posted in the classrooms. A No Smoking sign is posted inside the main door where parents drop off and pick up children. Emergency numbers are posted including, Fire, Ambulance and Poison Control.

The center posts communicable diseases on the front door when necessary. A class schedule is posted. Curriculum is implemented daily and lesson plans are on file.

2. Identify Observed Strengths of the program

The center's classrooms are well furnished. The center has worked with CCR&R for consultation.

3. Identify the aspects that fall below the standard

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:

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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. Gates have gaps between 3.5-9 inches and could serve as entrapment hazards. Screws on the fence should be cut less than two thread bolts or capped so they are not potential puncture hazards. The fire inspection is currently overdue. HHS requested an approved inspection from DIAL within the past three years after the visit. As of 10/20/25 a new inspection has not been received. An approved fire inspection should be submitted to HHS.

2. 109.11(8)b: Centers at ground level that use basement area as program space, or have a basement beneath program space: Testing and plan for remedy of radon is conducted. A canister should be sent in. A radon mitigation cannot be used as testing. This was discussed in 2024.

3. 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. Any fuel burning appliances in the building should have annual inspections.

4. 109.13(1 and 2): Center shall serve each child a full, nutritionally balanced meal as defined by CACFP guidelines. Staff shall provide supervision at table during snacks and meals. Children at center two hours or longer shall be offered food of not less than two hours and no more than three hours apart unless child is asleep. Menus shall be made available to parents and kept on file with substitutions noted. Avoid foods with high incident rate of causing choking. Some items on the menu are not CACFP approved for preschool age children.

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.

IHHS encourages you to contact your local nurse consultant with IDPH. 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. CCNC Mandi Lauderman Nurse Consultants (Iowa Department of Public Health) serves as CCNC for this center. The center is responsible for contacting CCNC Lauderman for consultation regarding health and safety issues such as hand washing, outdoor play area regulations, toppling or tipping hazards, childcare safe cleaners, allergy or action asthma or other health care plans, etc....

IHHS recommends the center consult with Child Care Resource and Referral. They offer centers assistance with meeting the DHS regulations, QRS, 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. Your Consultant is Karen Lauer. She is available to assist with questions or concerns related to curriculum, supervision, transitions, behaviors, etc... The Director reached out to CCR&R Consultant Brenda O'Holloran in 2024 and asked for consultation services prior to the HHS visit. Supervisor Leann Andre reported the following for the past year on 10/15/25: We (CCRR) have had several visits with Pella Christian—once in January, then July, and a few touch bases in September and October. I have been over to fingerprint new staff and talk with Theresa. Our IQ4K Specialist is going there this afternoon to meet with them about IQ4K. They also applied for Growing Iowa and met with Karen Lauer. This is best practice and is duly noted.

CCR&R and IDPH should be consulted throughout the year. The Director agreed to access Iowa Department of Public Health Child Care Nurse Consultant to arrange a Health and Safety Checklist.

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Date: 10/20/2025

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**.