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

Name of Center: Kiki's Kids Learning Center and Preschool **Enrollment:** 55 **License ID No. (Reapplications)** 41140

Street: 1858 Hayes LN **City:** West Point Iowa **Zip** 52656 **County:** Lee

Mailing Address: 1858 Hayes LN, West Point, IA, 52656

Director's Name: Nicole Fraise **Phone Number:** 319-470-0352

On-Site Supervisor(s): Anna Searsen **E-Mail:** nikifraise@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:** 07-03-2025

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

Date Inspected: 07-23-2025

Comments : conducted by State Fire Inspector Damien Dawson, due every 3 years

LICENSE TYPE: X **Child Care** **Preschool (ages 3-5 meets three hours or less per day)**

Financial Type: X Profit 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	6	15	15	15	51
Summer					0

QRS Rating: N/A

RECOMMENDATION FOR LICENSE:	
X	**FULL** license from 08-01-2025 to 08-01-2027
	PROVISIONAL license from
	DENIAL of initial application
	SUSPENSION of license
	REVOCATION of license

Licensing Consultant: Jill Seibert **Date:** 08-25-2025

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

II. IDENTIFY THE AREAS OBSERVED ON THE VISIT:

Kiki's Kids Learning Center and Preschool is newly constructed and is located in a rural area between West Point, Franklin and Donnellson, Iowa. The center is located on a gravel road and around the center are three houses. Nicole's residence is adjacent to the center. This center opened in 2017. It serves children ages 6 weeks to school age. Three rooms area available for care on the ground level floor of the building. It contains a kitchen area, a staff restroom and an office. A basement is available for expansion if necessary in the future.

On 8/15/25 I made an unannounced licensing visit to Kiki's Kids Learning Center and Preschool and met with OSS Searson and the Owner's mother Shawn Fraise. Director/Owner Nicole Fraise was present. Nicole(Niki) Fraise has an AA in Early Childhood Education. She has 10 years' experience working in licensed centers and had her own in home daycare across the street from the facility for two years. OSS (Anna Searson) was promoted in April 2024.. She's been employed full time at the center for the past 7 years. The Director is present at the center from 6AM to 4-5ish PM. Both are in ratio frequently.

On the visit all program areas were observed. 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:

Menu items should be specific and recorded daily. According to menus the program serves each child a full, nutritionally balanced meal as defined by CACFP guidelines. Staff provide supervision at table during snacks and meals. The Director printed out food labels for foods being served, showing that they meet CACFP guidelines. The kitchen was clean on the visit as was the pantry and refrigerator.

Allergies are posted on cabinets when identified. Children requiring allergy action plans have these in the files and posted.

Lunch is prepared by program staff. The kitchen area is inaccessible to the children. It must be blocked off at all times so that children may not enter. Refrigerators are clean and contain thermometers. A thermometer should be easily found in all cooling and freezing units so that temperatures can be monitored daily. Freezing temperatures should be zero degrees or below and cooling temperatures should be 40 degrees or below.

An approved sanitizer is utilized on tables before and after class, and before snack or meal times, also anytime during the day when sanitation is needed (sick child, sneezing, coughing, play dough).

Center Health and Safety:

Administration of prescription and non-prescription medication is handled on a case by case basis in accordance with licensing regulations, physician directions, and parental consent. If medication is onsite it is stored inaccessible to the

children and should have a physician/pharmacy label intact. Medication documentation should be in the child's file. All prescribed medication needs to have a pharmacy or physician label and medication sheet. If medication is over the counter it should be labeled with the child's first and last name. Emergency medication is stored in a safe place out of reach of children, A “fanny” hip pack or small cooler is best for outdoor play or field trips. The center has access to a Child Care Nurse Consultant that will assist with medication documentation, allergy plans, etc...

Labeled First Aid Kits are stored out of the reach of children. Each classroom has a designated ill/injured area. The center has the current First Aid Kit checklist. All items on the list should be procured. Incident and Injury reports have been filled out for the past year.

Children were sitting cross legged in time out in facing a wall. Staff and administration should reach out to CCR&R regarding classroom environments and discipline techniques. HHS recommends staff refine schedules and routines, as the classroom was quite chaotic. Children were coming out into the hallway. Mixing younger and older children, which is a ratio violation likely contributes to the chaos. Age groups should be split so that age appropriate curriculum, schedules and routines can be utilized for each age group.

We reviewed environmental testing and the maintenance of any necessary detection equipment. Areas of the building were constructed after 1971 so a lead based paint visual assessment is required. The plug in carbon monoxide detector is non-battery operated and UL approved unit. Updated radon testing is due every two years. Radon mitigation and testing will be an ongoing issue that should be closely monitored by Administration. Fuel burning appliances inspection is due annually. The program is on rural water therefore water analysis is not required.

The preschool/school age room has square feet to serve 30 children, the infant room 6 infants and the toddler room 15.

General safety regulations and compliance in the preschool are reviewed annually. If the program utilizes volunteers or substitutes criminal background checks need to be done on each volunteer and sub. 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. Any visitors to the Center shall complete the tasks above.

Substitutes must have all required training that a full time employee has. A floater should be present at all times to ensure staff are able to take restroom breaks, etc... If staff have no one to relieve them then they are forced to leave the rooms out of ratio. All staff provided supervision during the visit. Staff are to have eyes on assigned children at all times. Ratio and supervision have been topics of discussion with this program for many years. It is recommended to break the children up into smaller groups so that staff know how many children they are watching and their ages. This has been discussed with the Director in the past.

The center has no pets or plants. All classrooms and the main hallway of the center were clean the date of the visit.

The preschool has no staff under 18 years of age.

Emergency plans and drills for fire and tornado were reviewed, I observed documentation of completed monthly drills.

Sanitation policies and procedures of the preschool were observed. Soapy water is used prior to the product if necessary to remove debris. All food waste containers were covered.

The center follows regulations regarding staff and child hand washing. Staff hand washing: The center shall ensure staff demonstrate clean personal hygiene. Staff shall wash hands:
(a) Upon arrival at the center.
(b) Immediately before eating or participating in food service activity.
(c) After diapering a child.
(d) Before leaving the rest room either with a child or by themselves.
(e) Before and after administering non emergency first aid if gloves are not worn.
(f) After handling animals or cleaning cages.

Children’s hand washing: Center shall ensure staff assist children in personal hygiene. For each infant or child with a disability, a separate cloth for washing and one for rinsing may be used in place of running water. Children’s hands shall be washed:

(a) Immediately before eating or participating in food service activity.
(b) After using the restroom

All Safe Sleep requirements were followed during the visit: The provider shall follow safe sleep practices recommended by AAP for infants under one year of age: Infants shall always be placed on their back for sleep. Infants shall be placed on a firm mattress with a tight fitted sheet that meets Consumer Product Safety Commission federal standards. Infants shall not be allowed to sleep on a bed, sofa, air mattress or other soft surface. No child will be allowed to sleep in any items not designed for sleeping but not limited to, an infant seat, car seat, swing, bouncy seat. No toys, soft objects, stuffed animals, pillows, bumper pads, blankets, or loose bedding shall be allowed in the sleeping area with the infant. No co-sleeping shall be allowed. Sleeping infants shall be actively observed by sight and sound. If an alternate sleeping position is needed, a signed physician or physician assistant authorization with statement of medical reason is required.

Center Playground:

An outdoor play area is located directly behind the childcare building. Monthly playground inspections are kept on file. A labeled First Aid kit is taken outdoors. Emergency contacts should also be available in case of an emergency. The Childcare Weather Watch is utilized when outdoor play is questionable due to weather conditions. Iowa Department of Public Health Child Care Nurse Consultant can conduct an injury prevention summary report and health and safety assessment upon request. The area is a large grass space with a chain link fence. New fencing was been installed 2 years ago. The center plans on updating fencing again. The sand box must be tarped each night so that animals are kept out. All play equipment/toys appeared to be sound and no safety hazards present.

When children are in the outdoor play area staff must know which children are assigned to their care and know their whereabouts at all times. It is recommended that small groups be taken outdoors so that adequate supervision is achieved at all times. Often times groups of children are combined in this area, making it more difficult for staff to supervise their assigned group of children. This was also recommended last year. Two year old children cannot be mixed with school age children.

Center Transportation Arrangements/Field Trips:

The program does not own a vehicle and provides no transportation. Walking field trips may be taken. A first aid kit will be taken on trips as well as the children's emergency contacts and emergency medications. Ratio for field trips should be followed.

Center Administrative Records:

Child misbehavior is addressed by redirection, having the child sit with the teacher for a short periods of time, or time out periods of age appropriate length.

Staff and child records are mostly complete and well organized and are reviewed annually. Child records are inspected including immunizations, physicals and updated emergency contacts and dental and medical information. New information is submitted yearly. Pick up authorization forms were present.

Staff files are reviewed including First Aid and CPR (2 years), mandatory reporting training (5 years) and professional development hours (due annually). Fingerprints for all employees as well as Iowa Criminal background checks should be present on all employees. CPR/1st Aid training is due every 2 years. Physicals and MR training are also reviewed. Physicals on all employees are due every 3 years. The center should work with CCR&R consultant to get up to date on any assistance they may need with training or filing.

I reviewed compliance with mandatory postings in the center. No Smoking signs are posted on entry doors. Mandatory reporter responsibilities, along with license consultant information, and the center license are posted.

Annual training on emergency plans should be conducted. The emergency preparedness plan was edited ion 2021 to document changes in the plan since the rooms were moved in 2019. The center conducted training in February this year and staff signed and date acknowledgement. Policy and the parent handbook were reviewed.

III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:

A tutor is available for school age children.

Children may access the outdoor play area frequently, as the program promotes outdoor time and physical activity.

The center is planning on painting.

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

1. 109.7(1): All staff (within first three months of employment):Iowa's training for the mandatory reporting of child abuse. At least one hour of training regarding universal precautions. Certification in First Aid infant, child, and adult cardiopulmonary resuscitation (CPR) or equivalent certification approved by the Department. A valid certificate indicating the date of training and expiration date shall be maintained. Certification in infant, child, and adult first aid that uses a nationally recognized curriculum or is received from a nationally recognized training organization including the American Red Cross, American Heart Association, American Safety and Health Institute, or MEDIC First Aid or an equivalent certification approved by the Department. A valid certificate indicating the date of training and expiration date shall be maintained. Minimum health and safety trainings, (Essentials) approved by the Department. If significant changes occur to content, the Department may require the training be renewed. Two staff did not have Mandatory Reporter training. Two staff did not have updated physicals. Three staff did not have updated PD hours due annually.

2. 109.8(2): Ratio maintained in center as required: Brief absence of staff person permitted for 5 or less minutes when another staff person is present. At least one staff is present in every room where children are resting. If ratio reduced to one staff per room during nap time, does not exceed one hour and ratio in center is still maintained. Ratio in infant rooms is always maintained. When more than eight children are present on the licensed premises, at least two staff members shall be present. For a period of two hours or less at the beginning and end of the center's hours of operation, one staff member may care for eight or fewer children, provided no more than four of the children are under two years of age and there are no more than eight children in the center. Ratio exceeded for school-age children when school classes unexpectedly start late, are dismissed early, or cancelled. For no more than four hours, care is limited to children already in the program and licensed capacity is not exceeded.

3. 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. Four children had outdated physicals. These will be collected when children re enroll this autumn.

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. The fence needs repair (it is twisted in places). The wood ramp is aging and railing has screws sticking up, some of the boards are coming apart.

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 practice around ratio and curriculum, continue to monitor day to day practice and adjust accordingly to continue to ensure licensing rule is met consistently. It is important to note, all HHS licensing standards and procedures must be maintained during the renewal period.

HHS encourages you to contact your local nurse consultant Amy Hayes. 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 Hayes visited the center to conduct a Health and Safety Assessment on 5/16/22. HHS contacted CCNC Hayes on 4/3/22 asking that she provide consultation to the program regarding Safe Sleep. She agreed the same date she would via email. HHS contacted CCNC Hayes 9/18/24 regarding Safe Sleep again. CCNC Hayes offered the program a Safe Sleep class via email on 9/19/24. This past year she provided information on illness, and current information regarding upcoming audits. She also sends monthly newsletters and updates on measles/pertussis.

Her contact information is:

Amy Hayes BSN RN
Child Care Nurse Consultant
Immunization Nurse
Lead & TB Nurse
Certified Child Passenger Safety Technician
Lee County Health Department | #3 John Bennett Drive | P.O. Box 1426 | Fort Madison, Iowa 52627
Website | Facebook | ahayes@leecountyiowa.gov | Phone: 319.372.5225 | Fax: 319.372.4374

HHS encourages you to contact Child Care Resource and Referral consultant Malia Love. 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 Consultant Love visited prior to the HHS visit and covered general rule and visited again in July 2022 to conduct room observations and make recommendations. She is reaching out to the center on 4/3/23 in reference to a technical referral made by HHS on 3/24/23. She stated in an email, "Hello Niki,
I hope this email finds you well and enjoying the Spring Weather! I wanted to reach out and follow up with you about a referral I received from (HHS) DHS about your last visit. Attached to this email are some forms for doing your monthly checks and below you will find some helpful links to some information and some suggestions for being able to get those inspections/drills in. I know that can often times end up on the back burner when trying to navigate everything else.

Safe Sleep Resources-Attached to email. (I would put a safe sleep poster up in the infants room and make sure to go over it with staff)

-You can also touch base with Amy Hayes your Child Care Nurse Consultant, about setting up a safe sleep training for all staff center wide. ahayes@leecountyhd.org"

Another referral was made on this subject on 9/18/24 to CCNC Hayes.

Consultant Love met with the Director on 7/30/24 and went over staff and child files, allergy action plans, child physicals, and safe sleep prior to the HHS visit. This is best practice and is duly noted. This past year she provided the following:

8/5/24-TA around running staff's PD reports in i-Power, dropped off infant outdoor play kit the program was given.

10/9/2024-I met with the director to follow up with her on her last two HHS referrals. We discussed her plan for addressing how restraints are not allowed in care. She said she was going to have staff read over that section in Comm 204 and sign off that they were aware. They are using pictures in each classroom and will be redoing their classroom schedule in the toddler room to address behavior management and supervision. We discussed the toddler who has been biting and I provided the director with resources for both staff and the parents. We discussed having staff observe the child and look for triggers in his day to form a plan around addressing the biting. We also discussed behaviors in the preschool room and the option of working with the child's AEA worker to incorporate speech and behavior interventions into the classroom and schedule. I followed up our visit with an email attaching resources for biting, schedules and transitions and visuals.

10/29/2024-Provided TA and Resources for MCART training

11/20/2024-On site visit, noted ratios to be good and the child from the referral had a 1:1 staff.

Her contact information is:

Malia Love
Child Care Consultant
Child Care Resource & Referral of Southeast Iowa
Community Action of Eastern Iowa
mlove@caeiowa.org

T: 563-271-0643
500 E 59th St.| Davenport, IA 52807| www.iowaccrr.org
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Funding provided by the Iowa Department of Health and Human Services through the Child Care and Development Fund

Center staff and administration should continue to meet with CCR&R and IDPH on a regular basis.

*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.