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

Name of Center: Stacyville Kids Care **Enrollment:** 25 **License ID No. (Reapplications)** 22410

Street: 603 N Broad St **City:** Stacyville Iowa **Zip** 50476 **County:** Mitchell

Mailing Address: 603 N Broad St, Stacyville, IA, 50476

Director's Name: Taylor Hayen **Phone Number:** 641-710-2367

On-Site Supervisor(s): **E-Mail:** stacyvillekidscare@gmail.com

Date(s) of Visit: 06-05-2023

Licensing Visit X **Unannounced Visit** X **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: 11-21-2022

Comments : Compliance on 10/03/16.

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	8		22	15	45
Summer					0

QRS Rating: N/A

RECOMMENDATION FOR LICENSE:	
X	**FULL** license from 06-01-2022 to 06-01-2024
	PROVISIONAL license from
	DENIAL of initial application
	SUSPENSION of license
	REVOCATION of license

Licensing Consultant: Raymond Salsbury **Date:** 08-23-2023

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

N/A

II. IDENTIFY THE AREAS OBSERVED ON THE VISIT:

An unannounced annual visit was made to the Stacyville Kids Care Inc on 06-05-23 where I met with center director Taylor Hayen. Taylor took over the director role in March 2023. Taylor worked at the center prior to becoming the director and is completing additional training to become fully qualified as the center director. The program is operated as a non-profit center overseen by a board of directors. The center is located in the basement of the community center but access to the center is limited during the time that the program is in operation. The center provides full range child care serving infants through school age children. There are currently 20-25 children enrolled in the program served by 7 teachers.

The general layout and design of the program remains the same as in prior years. The center operates out of three rooms determined by age group with one for infants, one for preschool age children, and one for school age children. The school age area is part of a larger space that is separated by mobile curtain panels. The infant room is divided into a sleeping area, programming area, and feeding area through the use of half walls. The rooms are located on the lower level of a split level building. There are windows along the upper level of the exterior walls that provide some natural light and a limited view. Each room has secondary exits though none are a direct access to the outdoors. All exits were maintained to be clear of obstruction and opened easily and freely. Restrooms are located out side the classrooms off the main entry corridor and children are escorted to the restrooms as needed. Sinks are present in the classrooms to facilitate hand washing. The infant and preschool rooms also have changing stations present. The center was observed to have only a few minor maintenance issues such as damaged paint and plaster but nothing that rose to the level of being an immediate safety concern.

Activity centers were present in the preschool and school rooms though the centers present in the preschool room were primarily large manipulative toys and Duplo blocks. Additional toys and materials for arts/crafts, books, puzzles, and table games are kept in storage and brought out for use as needed. The toys and materials were observed to be in good repair and generally appropriate to the ages of the children present. It was noted that some of the toys in the infant room contained small parts that can break off which would be less than 1 1/4 inches in diameter and 2 1/4 inches in length and would be considered choking hazards. These need to be removed from use by children under 3 year of age. A television was present in the school age room and does need to be secured so that it is not a topple hazard. Electrical cords also need to be secured so as not to be an entanglement hazard.

A copy of the daily schedule and curriculum was posted and the center was using the same curriculum theme for all classrooms. The planned curriculum on the day of the visit was Oceans. Good interactions were observed during the visit with the staff being engaged with the children, attending to their needs, and following the planned schedule and curriculum. This included having the children do an art/craft activity related to the curriculum theme. Good behavior management techniques were observed with the teachers using redirection and problem solving with the children.

Good health and safety practices were generally observed but the center does need to review some practices. I was not able to observe a diaper change during the time of my visit but the teachers in the infant room did review the procedures that are followed and which were consistent with posted guidelines. While the center was generally clean there were some items on the floor of the infant room in the programming space that needed to be vacuumed to reduce the risk of children putting them in their mouths. Staff did follow good procedures when using chemical cleaners. The center did not have any

children taking any prescription medications but over the counter medications were properly labeled and stored. First aid kits were present and the center has a supply of materials necessary to address most common first aid needs. Purses, diaper bags, chemical cleaners, and other items that could present a risk to children were stored in areas where they were not accessible to children. Safe Sleep practices were being followed on the day of the visit but it was noted that the center did have some decorative items suspended from the ceiling in the infant room over some of the cribs. These should be moved so that if they fall they would not fall into a crib.

The center has a full kitchen and meals are prepared on site. While the center does not participates in the Child and Adult Care Food Program (CACFP) those guidelines are required to be followed. The center uses a 4 week menu rotation which identified a good variety of meal options, however some would not be considered credible. As an example on the day of the visit the older infants were being provided Pop Tarts as a breakfast/snack option. Other non-credible food options included Veggie Straws, Rice Krispie Treats, Nutty Bars, and Twinkies. While it is allowable to serve non-credible foods for special occasions such as a birthday or holiday party centers must ensure that foods served to children meet credible nutritional guidelines for regularly planned meals and snacks. Good food storage practices were generally observed but some bulk packaging items were not properly stored such as rolling or using bag clips. All food items whether intended for child consumption or not must be placed in air tight sealable food grade containers once the original packaging seal has been broken to reduce the risk of being an attractant to insects and rodents, and spoilage. Meals are served to the infants in the classroom and the older children eat in a dining area outside of the kitchen. Meals are pre-portioned by the staff and good service and food handling practices were observed with staff using measured scoops to ensure each child received a full serving. While the teachers did not eat with the children supervision was provided at the table while the children ate.

The center makes use of a playground located across the parking lot. There is a preschool age climbing structure present which is nearing the end of it's useful life as evidenced by the slide chute beginning to pull away from the platform anchor. While the connect did still appear to be solid it will need to be monitored and if it begins to become unstable use of the slide element would need to be discontinued. Pea gravel is used for fall surfacing and has developed a hard pan layer that needs to be aerated and/or have material added to ensure a proper depth of loose fill. Toys and other equipment were present and while showing their age were in good repair. Large mature trees along the perimeter provide shade. The playground is fully enclosed by fencing which was observed to be in good repair.

In reviewing administrative records all required notices and postings were present in an area readily accessible and visible to all parents and visitors. A random selection of 50% of the child files were reviewed and of those 3 needed an updated or initial physical. The center is using the Brightwheel electronic records management system which does include a parental communication application. This does include staff using that system to document the required daily care information for infants. One issue that was noted is that staff were not documenting all required elements consistently. While staff did log daily diapering, feeding, and napping staff are also required to document daily activities and disposition. The staff do make use of the ability to take photos of the children and it was identified that this could be used to provide a visual depiction of the child's mood and activities but that staff would need to post a daily photo and should post photos from the morning and afternoon to show any changes in functioning. A random selection of 50% of staff files were reviewed and were found to contain all required information. Inspection logs and certificates were available and current for all required elements with the exception of Radon testing which had expired in February. While the levels of the prior testing were within acceptable limits renewed testing is required every 2 years.

III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:

The center is currently working to get on the food program which will provide additional support for the planning, service, and reimbursement of meals.

The center did have a recent issue with regard to the presence of mold in the center and work was completed to remove, repair, and replace the affected areas.

The center has been very stable over the past year with regard to both staff and child enrollment which has allowed the staff to become very familiar with the children and their individual needs and develop a strong and engaging program.

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: 3

109.11(3)a: Center shall ensure that: Facility and premises are sanitary, safe, and hazard free. Adequate indoor and outdoor space is provided. The outdoor area shall include safe play equipment and area of shade. Sufficient space provided for dining. Sufficient lighting shall be provided. Sufficient ventilation. Sufficient heating. sufficient cooling. Sufficient bathroom and diapering facilities. Equipment, including kitchen appliances, are maintained so as not to result in burns, shock, or injury to children. Sanitation and safety procedures for the center are developed and implemented to reduce risk or injury or harm to children and reduce transmission of disease.
-- The pea gravel used for fall surfacing of the outdoor playground is insufficient and either needs to be aerated or supplemented to ensure a proper depth of material. The slide chute of the climbing structure needs to be monitored due to separation of the chute from the platform anchor and use discontinued if the connection becomes loose or separates to the point of being an entrapment risk for clothing or body parts.

109.11(7)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.
-- Testing results were expired and need to be renewed.

109.12(4): Sufficient toilet articles are provided for handwashing.Sufficient and safe indoor play equipment, materials, and furniture that conforms with CPSC or ASTM.Play equipment, materials, and furniture meet the developmental, activity, and special needs of the children.Room's arrangement does not obstruct the direct observation of children.Individual covered mats, beds, or cots, and appropriate bedding is provided for all children who nap.Procedures are developed and implemented to maintain equipment and materials in a sanitary manner.Sufficient spacing is maintained between equipment to reduce transmission of disease and allow ease of movement by children and staff to respond to activities and care needs.Sanitary procedures are followed for use and storage of personal hygiene articles.
-- Toys and materials that are, or have parts that can break off that are less than 1 1/4 inches in diameter and 2 1/4 inches in length are considered choking hazards and need to be removed from rooms serving children under 3 years of age. Items shall not be suspended over cribs. The television in the school age room needs to be secured so as not to be a topple hazard.

109.15(1): 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.
-- Non-credible food items were present and being served as part of routine menu planning.

V. SPECIAL NOTES/RECOMMENDATIONS:

A full license will remain in effect at this time. Please provide a written response to the licensing consultant identifying a plan of action to correct and maintain those aspects cited as not meeting licensing standards and identifying an anticipated date of compliance. 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.