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

Name of Center: Kandiland Day Care Center **Enrollment:** 140 **License ID No. (Reapplications)** 52642

Street: 821 S 25th ST **City:** Fort Dodge Iowa **Zip** 50501 **County:** Webster

Mailing Address: 821 S 25th ST , Fort Dodge, IA, 50501

Director's Name: Kandi Jameson-Altman **Phone Number:** 515-206-1095

On-Site Supervisor(s): **E-Mail:** kandiland_1@hotmail.com

Date(s) of Visit: 06-09-2025

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

LICENSING VISITS

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

Signed Application (470-0722) Received X **Yes** **No** **NA** **Date Signed:** 09-05-2024

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

Date Inspected: 10-31-2024

Comments : Initial fire inspection approval with limited use for gymnasium area provided on 09-09-24. Temporary occupancy approval for remainder of programming space granted on 10-31-24 with requirements to complete specified renovations.

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 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	37	31	89	66	223
Summer					0

QRS Rating: N/A

RECOMMENDATION FOR LICENSE:	
X	**FULL** license from 09-17-2024 to 09-01-2026
	PROVISIONAL license from
	DENIAL of initial application
	SUSPENSION of license
	REVOCATION of license

Licensing Consultant: Raymond Salsbury **Date:** 06-11-2025

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

II. IDENTIFY THE AREAS OBSERVED ON THE VISIT:

An unannounced annual visit made to the Kandiland Daycare Center on 06-09-25 where I met with the owner and director, Kandi Jamison. Kandi is well qualified for the position with extensive experience and on-going training in early childhood care having operated a registered in-home program for many years. The program is located in a building that previously provided medical and physical therapy services but which has been renovated for child care programming. The building is a large facility and space in another wing is leased to other businesses. Security doors were installed to limit access to the child care programming areas from the areas that are leased to other businesses. The program currently has 140 children enrolled served by 25 staff. The center provides full range daycare programming serving infants through school age children. All aspects of the program subject to licensing standards were reviewed during the visit..

The program makes use of several classroom spaces which are determined by age groups, and a large gymnasium space which is primarily used for the older school age and BASP programming but which can also be used by the other classrooms if needed for large motor skill activities. All programming spaces with the exception of the gymnasium space have been renovated to have direct exits to the exterior of the building, and the gymnasium has multiple exits opening onto the main access corridor. The classroom spaces are connected by large archway openings and mobile barriers are used to prevent children from moving between the rooms. The barriers of a designs that makes stepping over the barrier difficult and it was noted that staff did open and close barriers when moving between the classrooms. Sinks and restrooms are available off main access corridors, and directly accessible from one classroom space. The water temperatures had been adjusted since the time of the last visit to provide hot water that does not exceed 120 deg. F. for handwashing sinks. Changing stations are present in classrooms for the infants, two, and three year old children. Each classroom have windows along the exterior walls, and the emergency exits that provide ample natural light, and a view of the outdoors. Renovation work had been completed and while Kandi did identify that there were issues with some mechanicals that needed to be addressed there were no issues observed in classrooms. Classrooms are divided into activity centers through the placement of furniture and play structures which were arranged so as not to create any blind areas.

Each classroom had a copy of the planned schedule and curriculum posted. Good interactions were generally observed with all staff being attentive to the children. This included providing for their direct care needs such as diapering or serving meals, and when engaged in curriculum activities. One issue that was discussed in the infant room was with regard to the use of restraining play centers. It was reviewed that while licensing standards does not set a time limit on how long children can be in a piece of equipment the national recommendation is no more than 15 minutes of combined used per child per day. Some children were pointed out as having been in equipment for a time period exceeding 30 minutes and that when using equipment the staff need to consider the developmental intent and impact on children making use of that equipment. Good behavior management techniques were observed with the teachers generally using proactive positive engagement with activities such as reminders of expected behavior, using praise, and simple redirection when needed. All staff used calm tones and positive tones when speaking with children. Ratio was maintained as required by age in each classroom.

The center does have health and safety policies in place but practice does need to be reviewed. In viewing classrooms the center had removed many of the materials noted to have small parts that were less than 1 ¼ inches diameter and 2 ¼ inches length which can be a choking hazard for children under 4 years of age but a few remained in the 2 year old classroom. One

other issue that was observed was that the center has "Boppy Pillows" which were being used for positioning of children doing floor time activities. It was reviewed that these cannot be used in that manner and are intended to be used as an aid to nursing mothers. I was able to observe diaper changes during the visit and while the required procedures posting was present and staff did follow them they did not clean the changing station immediately after use. While the requirement is that the stations are cleaned between each use and it is possible that staff may come back to clean stations later when they have an opportunity it does significantly increase the risk of cross contamination where a co-worker may not be aware that the station has not been cleaned. Good hand washing practices were observed for both staff and children. Several issues were noted for sleeping infants. This included one fitted crib sheet that was too large and allowed material to gather. One child was observed to be in a crib with a blanket and pillow and the staff stated that the child had turned 1 year of age within the last week and this was the first time these items were introduced into the crib. While safe sleep sleep practices do specify being applied to children under 1 year of age it was reviewed that it is not recommended to introduce blankets and cribs into cribs as the railings would continue to hold those items against a child when moving around in the crib and the best time to introduce those is when children transition to cots. In addition older infants were observed to have bottles when sleeping on cots and it was reviewed that having food or beverages is prohibited for children of all ages when sleeping or napping. Chemical cleaners, medications, and personal items were stored where they were not accessible to children. Not all over the counter medications and ointments were labeled with the names of the child to whom it belonged. The center does have first aid kits present with materials necessary to address most common 1st Aid needs were present.

The center does not currently have an established playground but does have outdoor space that includes a large open green space. Kandi did identify that she does have plans to develop a playground in this space. It was reviewed that due to the location being being near a busy street, and railroad tracks the area would need to be fenced. In addition to outdoor space, as previously noted the center does have a large indoor gymnasium space which can be used for large motor play activities.

The center has multiple kitchen facilities available and is currently using a smaller kitchen space just off the programming space of the infant rooms. It was reported that there are plans to renovate and increase the space to allow for more storage, but currently overflow items are being stored in the other kitchen area. The kitchen has a residential stove but lacks a fire suppression hood and so all cooking was limited to options that can be cooked in the oven, or which do not create grease laden vapors. The kitchen area was observed to be clean with no indication of insect or rodent infestation. Not all foods were properly stored in air tight sealable food grade containers that were labeled with the contents and date placed in storage after the original packaging seal had been broken. Thermometer units were present in freezer and refrigeration units. Menus were posted and did identify credible meal options. During the meal service some issues were noted. This included children in the infant room playing with and dropping utensils and plates on the floor and staff picking those up and returning them for use rather than disposing of them and providing a clean replacement. In addition the plates being used were styrofoam which should not be used particularly for children under 4 years of age who may bite or tear off small pieces and ingest them. The meal served on the day of the visit included corndogs and staff in the infant room were cutting them into smaller pieces but these were in disc shapes. It was reviewed that they needed to be cut on the long axis to eliminate the disc shape and staff did cut them after that. When serving meals the staff did use food service gloves and measured utensils to ensure that each child received a full serving. Supervision was provided at the tables when children were eating.

In reviewing administrative records all required notices for Consultant Contact, Mandatory Abuse Reporting, No Smoking, and the Permission To Open letter were posted in an area that was readily available and visible to all parents and visitors. A random selection of child files were reviewed and found to contain all required information. The center is using an electronic communication application to provide information to parents including infant daily sheets. While that application does have the functionality to document all required elements the staff were not documenting daily Activities or Disposition as required. The application does have the ability to attach photos to those records and while some staff were taking photos and others were not it was reviewed that these can be considered a visual depiction of activity and disposition but if doing that staff would need to take a photo of each child every day both in the morning and afternoon to show if there are any changes in functioning. A random selection of staff files were also selected for review and again each contained all required documentation. Inspection logs and certificates for fire and tornado evacuations, carbon monoxide detection, and fuel burning appliance inspections were available and current. The center will need to conduct Radon testing in each programming classroom to ensure that levels are below the 4.0 cutoff limit, or install a mitigation system. Kandi stated that she would conduct that testing over the July 4th weekend to allow for the required exposure time. The center does provide transportation services to/from school using center owned vehicles and maintenance /service records were available.

III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:

This center opened in 2024 and has seen substantial growth. With regard to the facilities and materials the center has completed many of the major renovations and obtained additional toys and equipment for the children to support the programming and curriculum. The center has almost doubled child enrollment, and tripled staffing.

Kandi identified that she had applied to a grant for funding to help her develop the outdoor playground.

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

109.9(4): Daily written records are maintained for each child under two years of age and include time periods slept, amount of/time food consumed, time/irregularities of elimination patterns, general disposition, and general summary of activities.
-- Documentation of daily activity and disposition was not being maintained.

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.
-- Items and toys that would be considered chocking hazards need to be removed from all classrooms serving children under 3 years of age. Boppy Pillows shall only be used for their intended purpose which is an aid to nursing mothers and shall not be used for positioning of children when doing floor time, or when in cribs.

109.15(2): Center shall follow minimum CACFP menu patterns for meals and snacks.Menus planned one week in advance, made available to parents, and kept on file with substitutions noted.Avoid foods with high incident rate of causing choking.
-- Corn dogs were served and were not modified by cutting to remove the disc shape.

109.15(3)b: Children under six months held or fed in sitting-up position.Bottles not propped for any child, given to a child in a crib or left sleeping with a bottle.Spoon feeding is adapted to developmental capabilities of child.
-- Children were allowed to have bottles when sleeping.

109.15(5)b: Sanitary and safe methods in food preparation, serving, and storage sufficient to prevent transmission of disease, infestation, and spoilage are followed.Staff preparing food that have injuries on hands wear protective gloves.Staff serving food use clean serving utensils and have clean hands/wear protective gloves.
-- Food items were not properly stored in air tight sealable food grade containers once the original packaging seal had been broken.

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: A service referral will be made to CCR&R to provide assistance and training to develop plans to address those concerns cited as not meeting licensing standards.

*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.