

QRS Rating: N/A

RECOMMENDATION FOR LICENSE:	
X	FULL license from 04-01-2017 to 04-01-2019
	PROVISIONAL license from
	DENIAL of initial application
	SUSPENSION of license
	REVOCACTION of license

Licensing Consultant: Becky Frost

Date: 03-27-2017

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

N/A

II. IDENTIFY THE AREAS OBSERVED ON THE VISIT:

On 03/07/17 I made an unannounced licensing visit to Spring Ahead Learning Center in Lime Springs. I met with Jessica DeVries, the director of the program. Ms. DeVries has been with the program since August 2013 and became the director in August 2015. She has a BA in elementary education with an early childhood education and reading endorsement. The center employs ten staff members, including Ms. DeVries.

The program is located in a free standing building. The program opened on 02/04/13. The center serves infants through school-aged children and operates Monday through Friday from 5:00 am until 6:00 pm. The preschool program serves three-year-old children and operates on Tuesday and Thursday from 8:30-11:00 am. There are currently 48 children enrolled in the center. The center has a Quality Rating System (QRS) level of 3.

The center operates out of the following classrooms, Cuddles (infants, birth until two-years-old), Tumblers (two-year-olds), Spring Ahead (preschoolers and school-aged children). An inspection of each room was completed.

Windows provide natural lighting. The rooms in use are decorated with the children's art projects, and posters to assist the children with the learning process, such as the alphabet, shapes, colors and numbers. The children's birthdays were posted. There is an area for circle time.

The centers observed on the day of the licensing visit include library, Lego/blocks, table toys, games, puzzles, transportation, play dough, art, dramatic play, writing, math, science/discovery, woodworking, sensory table and music. Centers were arranged in a manner that allowed easy movement between activities, but it also allowed for clear supervision by staff members. Materials were in good condition. The materials are located at child level so they were easily accessible to the children.

Jodie Hubka is the lead staff member in the infant room. Maria Klingsheim is the assistant. They were caring for five children. The infant room is shoe free. There is one diaper changing table and two sinks. Procedures were posted. I observed a diaper change and procedures were followed. The room is divided into mobile and immobile children with a gate. There are six cribs in the room. Cots are available for the older children. Daily sheets are maintained on each child. There are two jumparoos, one bouncy seat and a swing in the room. Activity gyms are available. There are three highchairs and small chairs. All are equipped with safety straps. Staff members worked well together. They sat on the floor with the children. Ms. Klingsheim was in the area for mobile children and she was actively playing with them. She read them books and introduced activities. Ms. Hubka was with the immobile children. She worked on tummy time, rolling over and sitting up. She held children on her lap and was nurturing.

Jessica DeVries was the staff member in the Tumbler room the day of the visit. She was caring for six children. There is one adult sink and two child-sized sinks in the room and procedures were posted. There is one diaper changing table and procedures were posted. There is a separate garbage can with a lid for soiled diapers. I observed a diaper change and

procedures were followed. There is a bathroom in the room with two toilets. The children were engaged in circle time when I arrived. They sang and danced and then they reviewed the calendar and weather. The children sang the alphabet song and then Ms. DeVries had the children find toys in the room of a certain color. They then enjoyed free play. Ms. DeVries danced with the children and provided them with praise. She included each child in circle time. She moved around the room to interact with the children. The current theme in the room is mail and post office.

The Spring Ahead room is the preschool room. This room is also used for the school-aged children. Elaine Gasset is the lead teacher for the preschool program. She has a BS in elementary education with an endorsement in early childhood. She has been the lead teacher since August 2009 and she has fifteen years of prior experience as a teacher. Ms. Gasset was not present the day of my visit. Elaine DeVries is the assistant and she has been with the program since August 1996. Kayla Brincks was in the room with Ms. DeVries the day of my visit. They were caring for thirteen children. There is one adult sink and two child-sized sinks in the room and procedures were posted. There is a bathroom in the room with two toilets. The children were engaged in circle time when I arrived. They were discussing weather and the difference between lion weather and lamb weather. A couple children then shared items they brought to the class and the items were passed around the room for the children to see. The children then moved to free play. During this time some of the children worked on a craft. They made a lamb using cotton balls and a paper plate. During this time a visitor from the library also came to the room and the children were able to check out books. Staff members sat on the floor with the children during circle time. They were patient, as they had several active children. They used positive redirection. Staff members had children on their laps and included all of the children in circle time. They provided good reminders of handwashing when it was necessary. The current theme is weather.

The Explorers room is used as a nap room. Cots are used to nap. The bedding was hanging over the cots and touching other bedding. This cannot occur. The bedding of one child cannot touch the bedding of another child. This room is also used as a "gym" area where the children can engage in gross motor activities when they are unable to go outside. There is one adult sink and one child-sized sink in the room. You must post handwashing procedures. There is a bathroom with two toilets and one sink.

The program uses a variety of resources to create lesson plans. Activities are developed around weekly themes.

There was a phone with emergency numbers in the classrooms and the kitchen. Emergency fire and tornado procedures and diagrams were posted by the main program and outdoor exits. A daily schedule was posted and a lesson plan was available for review.

Center Nutrition Practices Observed:

The program does not participate in the Child and Adult Care Food Program (CACFP), but does follow the food program guidelines. Ms. DeVries is working toward getting on the food program. The program provides breakfast, lunch and an afternoon snack. Rosie Miller is the cook. The children eat in the nap room. The program uses a four month rotation of menus for lunch and a three month rotation of menus for breakfast and snack. Menus and allergies were posted.

I observed the kitchen to be clean and organized. There is a dishwasher and also two small sinks available in the kitchen to wash dishes. There is an industrial refrigerator and a regular refrigerator and thermometers were present. Food items were NOT stored according to NHSPS guidelines. There were several crackers and Teddy Grahams that were not stored correctly. Once a food item is opened it must be stored in a sealed plastic, metal or glass container.

In the infant room the parents provide formula, baby food and cereal for their children. Bottles are washed in the room using the three step method. There is a refrigerator in the infant room and a thermometer was present. The day of the visit the temperatures were above the recommended temperatures. The refrigerator had a temperature of 46 degrees and it should be 40 degrees and lower. The freezer had a temperature of 2 degrees and it should be zero degrees and lower. This was cited last year as well and must be corrected. If the refrigerator cannot maintain the proper temperatures you will have to purchase a new one.

Center Health & Safety:

Medications are kept in the kitchen in a lockbox in the cupboard or in the refrigerator if necessary. There are currently no children on prescription medication. Medication is stored in original containers with physician/pharmacist directions and label intact. It is labeled with the child's name and kept out of reach of the children. Medication authorization forms are maintained on prescription and over the counter medication. Parents must state the length of time a prescription medication is to be used and there must be documentation for every day the medication is in effect. Most over the counter medications were labeled with the child's name. There was lotion and diaper cream in the infant room that was not labeled. There was not a pattern of disregard so they will not be cited. The center has a complete first-aid kit and it is replenished as necessary. There were antibiotic creams in each of the first aid kits. These items are not approved and must be removed. Medication authorization forms must be signed and maintained if this item is used. This was cited in last year's report as well. Please remove these items.

I reviewed documentation of monthly fire and tornado drills. A radon test was completed in March 2017 and is good for two years. Results had not returned yet. Please let me know the results once you receive them. The fuel burning inspection was completed and no concerns were noted. A carbon monoxide detector was on site and is located in the preschool room. Outlets were protected. The fire marshal inspection occurred on 11/25/15.

The center uses bleach and water to sanitize the food tables and disinfect the changing tables. Bleach bottles are clearly labeled. I observed the teacher prepare the tables after breakfast and proper procedures were followed. I also observed staff members clean and disinfect diaper changing tables and procedures were followed. Staff members and children were observed washing their hands and IDPH handwashing procedures are followed.

Center Playground:

The program has two fenced in areas; one for infants and one for older children. Rubber tiles are used as surface cushioning in both areas. In the area for the older children, there is a sandbox, a piece of climbing equipment with a slide and a small climbing wall. There are basketball hoops, a sensory table and a bench. In the area for the infants/Tumblers there is a playhouse, a tree playhouse and a small slide and sensory tables.

The school-aged children can use the school's playground equipment. Rubber tiles are used for surface cushioning. There are various pieces of climbing equipment and swings. There is also a grassy area. Monthly playground inspections are maintained on all three areas. You must work toward providing a shade source for all areas. Currently they have nothing.

The center is able to use the nap room for large motor activities when they are unable to go outside.

Center Transportation Arrangements / Field Trips:

The center participates in walking field trips. They have visited the library, post office, bank and the fire department. They have gone swimming in the summer with the school-age children. They also visit a local park. They do not provide any transportation.

The library also visits the program to read to the children.

Center Administrative Records:

The parent information is located on a bulletin board inside the entrance. The mandatory reporter, child care consultant and the handbook availability were posted. The license was conspicuously hung. A no-smoking sign was posted at the entrance.

Staff and children files were reviewed at the time of the licensing visit. They are in need of a lot of improvement. Failure to do so may result in a corrective action plan.

I reviewed twelve children files. Files must contain emergency contact information for the doctor and dentist of each child. The doctor and dentist's name, phone number and complete street address must be provided. Parents must also identify a hospital. Five files did not have adequate dentist emergency contact information. Two files did not provide adequate doctor emergency contact information. Two files did not identify a hospital and several files did not provide complete street addresses. There were two missing physicals and two outdated physicals. There were three invalid immunization certificates. One was not signed and dated by medical personnel and two were not on the Iowa Department of Health certificates.

I reviewed four staff files. There was one staff member working the day of the visit that started last week and she did not have an Iowa background check (SING). Another staff member started in October 2016 and her SING check was not completed until February 2017. This is a serious offense. Staff members cannot have contact with children until they have a SING check. Additionally, fingerprints have not been mailed in yet for the employee who started in October 2016. Fingerprints must be mailed in within thirty days of hire. There was one outdated physical. One staff member did not have any documentation for on-going training hours from August 2016 through today's date. You must track employee's training so that they are completing mandated hours. Not all lead teachers have completed Essentials training. This should have occurred by January 1, 2017. This must be completed immediately.

I reviewed policy and procedures, staff and parent handbooks. The necessary written emergency procedures and policies were present. Emergency Preparedness Plans have been completed, but you need to add additional information on cyber security and saving records and also on continuation of care in case you have to evacuate. Evidence of staff orientation on policies and emergency plans were documented. You must update your professional development policy to reflect the mandated DHS changes that occurred on October 1, 2016. For discipline, the program uses positive redirection, positive reinforcement, model appropriate behavior, reward positive behavior, natural consequences and use "alone time".

III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:

The center has a Quality Rating System (QRS) level of 3.

The program has a written safe sleep policy for their infant room.

The program is very flexible with the parents and their schedules. They hope to increase their enrollment and increase their fundraising activities.

Ms. DeVries states they provide annual conferences for all children enrolled in daycare and bi-annual conferences for children enrolled in the preschool program.

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

109.9(1)b: All files contain: A signed copy of DHS Criminal History Record Check, Form B, that was submitted prior to employment. A copy of Request for Child Abuse Information. Copies of the results of Iowa records checks conducted. Copies of national criminal history check results. Any Department-issued documents sent to the center related to records check.

Number not in compliance: 2

There was one staff member working the day of the visit that started last week and she did not have an Iowa background check (SING). Another staff member started in October 2016 and her SING check was not completed until February 2017. This is a serious offense. Staff members cannot have contact with children until they have a SING check. Additionally, fingerprints have not been mailed in yet for the employee who started in October 2016. Fingerprints must be mailed in within thirty days of hire.

109.9(1)d: All files contain a pre-employment physical exam report completed within six months prior to hire and at least every three years. Physical exams shall be documented on form 470-5152, Child Care Provider Physical Examination Report.

Number not in compliance: 1

There was one outdated staff physical.

109.9(2)b: All files contain sufficient information and authorization to allow the center to secure emergency medical and dental services at any time child is in center's care.

Number not in compliance for medical: 2

Number not in compliance for dental: 5

Information lacking: The doctor and dentist's name, phone number and complete street address must be provided. Parents must also identify a hospital. Five files did not have adequate dentist emergency contact information. Two files did not provide adequate doctor emergency contact information. Two files did not identify a hospital and several files did not provide complete street addresses.

109.9(3): Signed and dated Iowa immunization certificates are on file for each child enrolled.

Number invalid: 3

There were three invalid immunization certificates. One was not signed and dated by medical personnel and two were not on the Iowa Department of Health certificates.

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, 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: 4

There were two missing physicals and two outdated physicals.

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.

Cots are used to nap. The bedding was hanging over the cots and touching other bedding. This cannot occur. The bedding of one child cannot touch the bedding of another child. You must post handwashing procedures in the Exploreres room.

109.15(5): Food preparation and storage procedures are consistent with NHSPS.

Food items were NOT stored according to NHSPS guidelines in the kitchen. There were several crackers and Teddy Grahams that were not stored correctly. Once a food item is opened it must be stored in a sealed plastic, metal or glass container.

109.15(5)a: Sufficient refrigeration is provided appropriate to perishable food.

Additional concerns: There is a refrigerator in the infant room and a thermometer was present. The day of the visit the temperatures were above the recommended temperatures. The refrigerator had a temperature of 46 degrees and it should be 40 degrees and lower. The freezer had a temperature of 2 degrees and it should be zero degrees and lower. This was cited last year as well and must be corrected. If the refrigerator cannot maintain the proper temperatures you will have to purchase a new one.

V. SPECIAL NOTES/RECOMMENDATIONS:

A full license is issued. All DHS licensing standards and procedures must be maintained during the renewal period.

Please review children files and make the necessary corrections. They were not in good condition. Also, please review and learn the rules regarding Iowa background checks (SING) and fingerprinting. SING checks must be completed prior to a staff member having contact with children and fingerprints must be completed within 30 days of hire.

*Note: If you are the Child Care Center Director and you feel something is unclear or unjustly cited, please contact me (phone 319-292-2429; email rfrost@dhs.state.ia.us so that we may discuss the issue. If necessary, I can make a notation in your record. You may also send a letter that will be included in your licensing file noting any disagreement you may have with this report. If you have the need for any additional information discussed during my visit, please contact me and I will forward the information to you. Thank you.

*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.

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