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

Name of Center: Emmetsburg Education Center **Enrollment:** 38 **License ID No. (Reapplications)** 46288

Street: 1013 Broadway St **City:** Emmetsburg Iowa **Zip** 50536 **County:** Palo Alto

Mailing Address: 1013 Broadway St, Emmetsburg, IA, 50536

Director's Name: Tabatha Esdohr **Phone Number:** 712-330-4814

On-Site Supervisor(s): **E-Mail:** info@emmetsburgeducationcenter.com

Date(s) of Visit: 04-25-2025

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

LICENSING VISITS

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

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

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

Date Inspected: 11-04-2024

Comments :

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	11		28		39
Summer					0

QRS Rating: N/A

RECOMMENDATION FOR LICENSE:	
X	**FULL** license from 05-01-2025 to 05-01-2027
	PROVISIONAL license from
	DENIAL of initial application
	SUSPENSION of license
	REVOCATION of license

Licensing Consultant: Raymond Salsbury **Date:** 04-29-2025

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

NA

II. IDENTIFY THE AREAS OBSERVED ON THE VISIT:

An unannounced annual visit was made to the Emmetsburg Education Center on 04-25-25 where I met with the center director Tabatha Esdohr. Tabitha took over as the director in late 2023 and has been working obtaining the points necessary to be fully qualified as the director. The program is located in a commercial store front building in the downtown area of Emmetsburg. The program is operated as a non-profit center overseen by a board of directors. The program provides daycare to infants through school age children. There are currently 38 children enrolled in the program served by 8 staff. All aspects of the program subject to licensing standards were reviewed.

The general layout and design of the building, and programing remains the same as in prior visits. Direct exits are located at both the front and rear of the building. All exits were clear of obstruction and opened easily and freely. A large store front window provides natural lighting and a view of the outdoors at the front of the building. A window in the rear door provides natural light and a view at the other end of the building. Restrooms are located just off the main programming space. Additional sinks are located in the infant room with one that allows for hand washing, and the other that allows for food preparation. The building has a long open floor plan divided into two programming areas by a wall, infant gate, and shelving units. The infants are located in an area at the rear of the building and the rest of the space is used for preschool and school age children. The infant area is divided in to a general programming space and a sleeping space where cribs are located that has an L shape. The configuration is such that it does create limited sight lines and staff need to be aware of positioning when infants are sleeping so that they remain within direct line of sight. The preschool room area encompasses the majority of the programming space in the front part of the building. The space is divided into activity centers through the placement of furniture, shelving, and play structures which are arranged so as not to create any blind areas. A copy of the daily schedule and planned curriculum theme were posted.

Good interactions were observed on the day of my visit with the teachers being engaged with the children. The center did have more of a curriculum focus than what has been observed in the past where the center took a child interest driven approach. During the current visit the staff were involved in presenting specific activities that included a group learning time, teacher lead craft activity, story time, and self-directed play. This approach did help to reduce the energy levels and escalating behaviors that had been observed at the center in the past. There were two staff present in the classroom with one being a volunteer. The center does use a proactive approach to addressing behavioral issues with the staff providing reminders, using redirection, and guided problem solving. In addition children were not required to participate in activities but were encouraged to join the group. When speaking with the children there were some differences between the teachers with one using a calmer more engaging tone, and the volunteer using a more authoritative tone but not to the point of yelling or using any language that would be considered derogatory or intimidating. Ratio was an issue in the infant room where Tabatha acknowledged she was out of ratio with 5 infants present but identified that one was her own child and the child's father was coming to pick the child up. It is noted that the father did arrive within about 30 minutes of my arrival to pick up the child which did return the center to being in ratio.

Good health and safety policies and procedures were observed. I was unable to observe a diaper change and the required procedures were followed. Personal items, medications, chemical cleaners, and other items that could pose a safety risk to children were stored in an area where they were not accessible to the children. All over the counter medications were

labeled with the name of the child to whom it belonged. Good cleaning practices were observed with staff enlisting the children to help with cleaning but waiting for children to be out of the immediate area before using chemical cleaners. First aid kits are present and contain a supply of materials necessary to address most common first aid needs. Several cribs were observed to have mattresses with tears in the waterproof covers exposing the foam core and these do need to be replaced. One crib was observed to have a railing screw that was very loose and which needs to be replaced or repaired before being used by a child. Good safe sleep practices were observed for infants under 12 months of age, and Tabatha was positioned such that she could observe children both in the sleeping area and the programming area at the same time.

The center does not have a kitchen. Meals are prepared using crock pots, roasters, or options that do not require cooking. The center uses a menu rotation and a copy of the planned menu is posted and does identify a good variety of nutritious meal options. A refrigerator is present to maintain temperatures for foods that must be kept cold and thermometers were present. Good food storage practices were observed with items placed in sealed containers, and labeled as required. The center was just finishing the breakfast service when I arrived and while the teachers did not eat with the children supervision was provided at the table. The breakfast consisted of apple sauce, granola, and milk. Children were provided with additional servings if requested and staff did use measured scoops when portioning food.

The center does not have a playground due to the commercial nature of the area where the program is located. The center does make use of public parks, and takes walks with the children. All field trip activities are within walking distance and no transportation services are provided.

All required notices were present and posted in an area readily accessible and visible to parents and visitors. A random selection of 30% of child files were reviewed and compared to the self-audit completed by the center which was found to be accurate. The self-audit did identify 4 children that need an initial or updated physical. The center had also developed allergy plans for children with identified allergies as required. All staff files were reviewed and found to contain all required documentation with the exception of the FBI Fingerprint checks. Tabatha did state that these had been completed but the center had not received the information back. It was reviewed that she would need to contact the DCI office to inquire about those results, and if they cannot be located the will need to be renewed. All inspection logs and certificates were current and present.

III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:

The center has completed some renovation work to replace the siding, and main entry door. Tabatha did state that the local elementary school is exploring options to construct a new building and the center is exploring options for possibly moving to the current school building in the future if that occurs.

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

109.8(2): Ratio maintained in center as required by age.
-- The infant room was out of ratio with 5 children present with 1 staff. A parent for one child did arrive within 30 minutes to pick up one child.

109.9(1)b: All files contain:A signed copy of DHS criminal history record check or any other permission form approved by the Department of public Safety for conducting an Iowa or national criminal history check. 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: 8

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.
-- Crib mattresses with torn covers exposing the foam core need to be replaced. Cribs with loose hardware need to be repaired or replaced.

V. SPECIAL NOTES/RECOMMENDATIONS:

A full license is recommended 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 non-licensing 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.