Iowa Department of Human Services

CHILD CARE CENTER COMPLAINT

Name of Center: Bridge to Beginnings: A Child's Place Preschool **Enrollment:** 169 **License ID:** 51015

Street: 610 Maiden Lane **City:** Muscatine **IA** **Zip Code:** 52761 **County:** Muscatine

Mailing Address: 610 Maiden Lane

Mailing City: Muscatine **IA** **Zip Code:** 52761

Director's Name: Mikelle Cooke **Center Phone Number:** 563-506-9068

On-Site Supervisors: Mary Wetzel **E-Mail Address:** bridgetobeginnings@gmail.com

Date of Complaint: 11-20-2023 **Date of Visit:** 01-30-2024

[ ] Scheduled **[X]** Unannounced **[ ]** NA

[X] Non-Compliance with Regulations Found **[ ]** Compliance with Regulations Found

RECOMMENDATION FOR LICENSE

[X] NO CHANGES to licensing status recommended

[ ] PROVISIONAL license from **to**

[ ] SUSPENSION of License

[ ] REVOCATION of License

Complaint Details:

Did this complaint result in a serious injury? ☐ Yes ☒ No

Did this complaint result in a death to a child? ☐ Yes ☒ No

Summary of Complaint:

-Children are being sent home for no reason.
-A child has behaviors where they choke other children. Incident reports are not being completed.
-A child fell out of a bouncer seat.

Licensing Rules Relevant to the Complaint:

109.10 Center shall establish health policies, including criteria for excluding a sick child. Policies shall be consistent with the recommendations of the National Health and Safety Performance Standards.

109.10(10) Recording incidents: Parents shall be notified on the day of the incident involving a child that includes:Minor injuries.Minor changes in health status.Minor behavioral concerns.Incidents resulting in injury to a child.Shall be verbally notified immediately when there is:A serious injury to a child.An incident resulting in significant change in health status.An incident includes child being involved in inappropriate, sexually acting out behavior.A WRITTEN report, fully documenting every incident, shall be provided to the parent or authorized person. This should be completed by staff that witnessed the incident and retained in child file.Serious injuries and deaths must be reported to the Department within 24 hours.

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.

Inspection Findings:

This worker arrived at the center with Heather Bloome CCR&R on 1/23/24 and made another visit on 1/30/24 with Toni Krana CCNC. This worker interviewed several staff, talked with the director/on-site supervisor and reviewed paperwork/handbooks.

109.10 Center shall establish health policies, including criteria for excluding a sick child. Policies shall be consistent with the recommendations of the National Health and Safety Performance Standards. VIOLATED.
-The center does not have an exclusion policy except for nits, fever, diarrhea and vomiting. Parents are notified via the app if there is an illness and how long they must remain out for. The center needs to add more detail to their handbooks so parents are clear on expectations.
-Per Comm. 204, "A serious illness is one that requires follow-up (observation or treatment) by the parent or requires a medical or dental examination and treatment outside of the center's scope of care. Examples of illness include sudden onset of vomiting, diarrhea, high fever, and rash. The decision as to whether or not to exclude a mildly ill child from care can be a source of great tension between providers, parents, and health care professionals. Child care centers serve not only the care and developmental needs of children but also function as a family support service. In this context, it is recommended that you are family-responsive in the development of exclusion policies. When exclusion is not required, you may consider whether you can meet the child's needs without compromising the health and safety of other children and whether the child is able to participate in the program, even if in a more quiet or isolated environment. The NHSPS Caring for Or Children (https://nrckids.org/CFOC) can provide recommendations on formulating inclusion/exclusion/dismissal of children policies. There are times when children should be excluded. Communicable diseases, such as chickenpox, pertussis (whooping cough), infectious diarrhea, influenza, etc. require exclusion for period of time. Other illnesses may also require exclusion until treatment has been initiated (i.e.: strep throat) or until symptoms have resolved (i.e.: fever-free). The child care consultant assigned to your center as well as your child care nurse consultant located can offer guidance regarding including mildly ill children. Be prepared to care for an ill or injured child until a parent can arrive and take the child home or to a health care provider. You should remove ill or injured children from the group activity and allow them to rest in a comfortable position.
However, the child must remain under constant supervision. Anticipate and be prepared for the onset of new or worsening symptoms or complaints. For example, a child who is ill or has had an injury may complain of a headache and moments later vomit or lose consciousness."

109.10(10): Recording incidents: Parents shall be notified on the day of the incident involving a child that includes: Minor injuries. Minor changes in health status. Minor behavioral concerns. Incidents resulting in injury to a child. Shall be verbally notified immediately when there is: A serious injury to a child. An incident resulting in significant change in health status. An incident includes child being involved in inappropriate, sexually acting out behavior. A WRITTEN report, fully documenting every incident, shall be provided to the parent or authorized person. This should be completed by staff that witnessed the incident and retained in child file. Serious injuries and deaths must be reported to the Department within 24 hours.
-VIOLATED.
-Behavioral concerns are not being reported as needed. The child that had the behavior and the hurt child both must have anincident report; but names cannot be shared.
-Staff shared that they do not always document behavioral concerns. Staff shared that they do a great job of completing incident reports when a child has an injury or change in health status.

109.12(4) Play equipment, materials, and furniture meet the developmental, activity, and special needs of the children.
-In the infant room there are many restrictive devices. A child did climb into one and fell out. This child did have a mark. An incident report was completed. Staff shared that had these items been out of the classroom or inaccessible this injury could have been prevented. The bouncy seat is only developmentally appropriate for children. Per CPSC, "An "infant bouncer seat" is a "freestanding product intended to support an occupant in a reclined position to facilitate bouncing by the occupant, with the aid of a caregiver or by other means". Infant bouncer seats are intended for "infants who have not developed the ability to sit up unassisted (approximately 0 to 6 months of age)"."
-Children over the age of 6 months had access to these items. This is not developmentally appropriate.

Special Notes and Action Required:

-The center will add additional information to their health policies, including critera for excluding a sick child.
-The director will train staff on when/how to complete incident reports.
-The director will ensure that materials accessible to the children are developmetally appropriate.

Consultant's Signature:

Heidi Brown

Date:

02-14-2024