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

Name of Center: Stevie's Busy Bees **Enrollment:** 45 **License ID No. (Reapplications)** 52114

Street: 4502 Avenue O STE 18 **City:** Fort Madison Iowa **Zip** 52627 **County:** Lee

Mailing Address: 4502 AVE O STE 18, Fort Madison, IA, 52627

Director's Name: Stevie Bethurem **Phone Number:** 319-250-9108

On-Site Supervisor(s): Nicole Rife **E-Mail:** steviesbusybees@gmail.com

Date(s) of Visit: 07-27-2023

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

LICENSING VISITS

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

Signed Application (470-0722) Received X **Yes** **No** **NA** **Date Signed:** 03-01-2023

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

Date Inspected: 03-24-2023

Comments : due annually and performed by Fort Madison Fire Department Joey Herren

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 X Evening Care X 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	16	12	13	22	63
Summer					0

QRS Rating: N/A

RECOMMENDATION FOR LICENSE:	
	FULL license from
X	**PROVISIONAL** license from 08-01-2023 to 05-01-2024
	DENIAL of initial application
	SUSPENSION of license
	REVOCATION of license

Licensing Consultant: Jill Seibert **Date:** 08-04-2023

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

1. 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. All employees need an approved physical on file.

109.7(1) All staff (within first 3 months of employment)

Two hours of approved training FOR the mandatory reporting of child abuse.
At least one hour of training regarding universal precautions and infectious disease control.
Certification in American Red Cross, American Heart Association, American Safety and Health institute or MEDIC First Aid infant, child, and adult cardiopulmonary resuscitation (CPR) OR equivalent certification approved by the department. A valid certificate indicating the date of training and expiration date shall be maintained.
Certification in infant, child, and adult first aid that uses a nationally recognized curriculum or is received from a nationally recognized training organization including the American Red Cross, American Heart Association, American Safety and Health Institute or MEDIC First Aid or an equivalent certification approved by the department. A valid certificate indicating the date of training and expiration date shall be maintained.
Minimum health and safety trainings, approved by the Department. If significant changes occur to content, the Department may require the training be renewed. The center has 90 days to ensure all staff have had the above trainings after they begin employment. No staff have current Universal Precautions training. Five staff are missing Mandatory Reporter training. Four staff are missing Essentials training (which is required). The Director, and four other staff need CPR/1st Aid training. The center has access to many resources such as CCR&R, the Training Registry, IPOWER, Child Care Nurse Consultant Amy Hayes and other area Directors for assistance in scheduling creating a tracking system regarding staff requirements.

2. 109.4(2)d: Written plan developed for staff orientation regarding center's policies and licensing regulations. Orientation is in accordance with center's staff orientation plan.

109.4(2)e: Written plan for ongoing staff development that complies with 441 IAC 109.7.

The center has access to many resources such as CCR&R, the Training Registry, IPOWER, Child Care Nurse Consultant Amy Hayes and other area Directors for assistance in scheduling creating a tracking system regarding staff requirements.

3. 109.6(6)c: Center repeats Iowa record checks at a minimum of every two years or when aware of additional child abuse or criminal history that occurs. Staff with criminal record hits had not had Record Check Evaluations competed. Three newly hired staff did not have SING check results present the day of the last visit.

109.6(6)d: Center repeats national criminal history checks at a minimum of every four years or when aware of additional history that occurs. The Director was unable to find fingerprint results on 7/26/23. She reports sending fingerprints in again the first week of August on all employees.

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: 15

The center has access to many resources such as CCR&R, the Training Registry, IPOWER, Child Care Nurse Consultant Amy Hayes and other area Directors for assistance in federal and state criminal background checks and a tracking system regarding staff requirements.

4. 109.8(2)d: At least one staff shall be present in every room. Brief absence of staff person permitted for 5 or less minutes when another staff person is present. Staff reported throughout the day multiple times a day staff leave for 5 minute breaks and are gone for 20 minutes at a time.

The center has access to many resources such as Child Care Resource & Referral, the Training Registry, IPOWER, Child Care Nurse Consultant Amy Hayes, ECI Board, and other area Directors for assistance in properly supervising staff and ensuring staff to child ratio is constantly met.

5. 109.10(3)d: Staff shall not provide medications to a child if preservice/orientation training for medication management has not been completed. Staff reported that many staff have administered both over the counter and prescribed medication but did not fill out the proper paperwork. They do not have medication administration training. Several staff indicated they did not know paperwork was to be completed.

The center has access to many resources such as Child Care Resource & Referral, the Training Registry, IPOWER, Child Care Nurse Consultant Amy Hayes, ECI Board, and other area Directors for assistance in properly ensuring staff are following medication rules.

6. 109.10(12)d: Vehicles that are owned or leased by the center shall receive regular maintenance and inspection according to manufacturer-recommended guidelines for vehicle and tire maintenance and inspection. The center has access to many resources such as Child Care Resource & Referral, the Training Registry, IPOWER, Child Care Nurse Consultant Amy Hayes, ECI Board, and other area Directors for assistance in applying licensing rules regarding transportation.

7. 109.10(15)c: Center shall develop procedures for annual staff and volunteer training on emergency plans. The Director agreed to go over this with all new staff and have them sign and date it.

The center has access to many resources such as Child Care Resource & Referral, the Training Registry, IPOWER, Child Care Nurse Consultant Amy Hayes, ECI Board, and other area Directors for assistance in properly supervising staff and ensuring staff are trained in emergency procedures.

8. 109.12(5)b: Infants diapered in a sanitary manner as needed in central diapering area. One changing table for every 15 infants/toddlers needing diaper changes. Diapering, sanitation, and handwashing procedures posted and implemented in central diapering area. On the date of the visit staff were not wearing gloves during diaper changes. Staff asked if they must provide their own gloves. CCNC Amy Hayes addressed diaper changing during her visit earlier in July. She indicated gloves were not being utilized at that time. She addressed that the changing table should have been cleaned after a diaper change. Diapering procedure should be reviewed.

9. 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. This has been repeatedly addressed since prior to opening. however, the day of the visit lunch being served did not meet CACFP guidelines. Staff reported children were given cool downs if children refused to take two bites of food. When asking the Director and OSS if the program had been compliant with CACFP in late July they indicated they had pizza for a special occasion. The OSS reports they have informed staff the 2 bite rule is no longer in effect. Center staff admit they allow infant bottles to be propped if they are able to hold the bottle on their own. CCNC Amy Hayes also witnessed this in July. The date I visited a blanket was under a child's chin and moving up around his mouth. I addressed this immediately with staff.

The center has access to many resources such as Child Care Resource & Referral, the Training Registry, IPOWER, Child Care Nurse Consultant Amy Hayes, ECI Board, and other area Directors for assistance in properly supervising staff and ensuring creditable snacks and meals are being served daily.

10. 109.9(2)g: Any child with allergies, a written emergency plan. Copy shall accompany child if they leave the premises. The center has access to many resources such as Child Care Resource & Referral, the Training Registry, IPOWER, Child Care Nurse Consultant Amy Hayes, ECI Board, and other area Directors for assistance in properly tracking and monitoring child files and ensuring all children with allergies have an allergy action plan on file signed by a physician.

11. 109.11(6) Kitchen appliance or microwaves: Gas or electric ovens are not in program area. Area housing kitchen appliances in program area is sectioned off and not counted in useable floor space. Formula or food warmed for infants in microwaves is not served immediately and is shaken or stirred prior to serving.

The program Director and OSS were specifically told to place a boundary around the kitchen area prior to opening, again in March, May and twice in July 2023. This has not been corrected. The center is aware they must create a boundary so that children may not have access to the kitchen.

12. The center should add the following policies to their handbook.
109.12(2)a Center does not use corporal punishment including spanking, shaking, or slapping.

109.5(1) Written policy notifying parents of unlimited access provisions.

109.10(5) Infectious disease control: Centers shall establish policies and procedures related to infection disease control and use of universal precautions with handling of bodily fluid. Soiled diapers shall be stored in containers separate from other waste.

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

CCR&R provided the program administration w a policy guide and two sample handbooks prior to opening and has addressed this issue as has HHS on multiple occasions. All violations can be staffed with CCR&R and IDPH. CCR&R and IDPH have provided frequent consultation prior to center opening and on an ongoing basis on all issues cited above.

II. IDENTIFY THE AREAS OBSERVED ON THE VISIT:

Stevie's Busy Bees is a full day childcare center that opened in March 2023. The center is located in several classrooms in the Lohi Mall building on a busy thorough fare in Ft. Madison. Stevie Bethurem is the owner of this center. The center serves children ages infancy through school age children Monday through Saturday. Director Stevie Bethurem formerly provided in home childcare. A site visit conducted on 3/21/2023 determined the program criteria and was given permission to open with a total capacity of 30 without a license on 3/27/2023. Capacity was later increased to 63.

Unannounced licensing visits were completed on 5/15/23 and 7/14/23. Another visit due to a complaint was made on 7/27/23. All program areas were observed on both visits. The OSS was also present during the visits. We discussed program violations and strengths on both visits.

Center Nutrition:

The center has a small kitchen area. The center does not currently participate in the CACFP program. However, the OSS is taking classes and has a mentor for the program she is working with to learn program rule. Menus were available on both visits and did not meet requirements on either visit. Administration is working on changing menus to ensure all foods meet CACFP guidelines. When foods are substituted, this should be reflected on the posted menus. Food storage met safe food storage guidelines. No expired food items were expired or stored on the floor. Each refrigeration and freezer unit contained thermometers. Food was out in the kitchen area during the visit. Any food allergies are posted and diet modification forms and allergy action plans are present.

Center Health and Safety:

HHS has recommended primary care groups are implemented in each classroom. Ratio was met and maintained throughout the visits. However, staff did not know how many children they were supervising the first visit. The second visit all staff knew how many children they were supervising. Director Bethurem and OSS Neff reported the center was maintaining ratio. After the HHS visit it was reported that on several occasions' ratio has not been maintained. However, for the month of July a plan was in place so that ratio was always met in the future. In late July many staff reported more staff should be hired so that the center environment is not so chaotic.

Rule states, "At least one staff shall be present in every room. At least one staff is present in every room where children are resting. If ratio reduced to one staff per room during nap time, does not exceed one hour and ratio in center is still maintained. Ratio in infant rooms is always maintained. Two adults are present more than 8 children are on the premises. Children between 18 months and 3 years of age may be combined, if appropriate to the developmental needs of the child. If a child under 2 years is combined, the staff ratio of 1 to 7 shall be maintained, otherwise staff ratio may be determined by the age of majority of the children in the group."

First aid kits contain items to provide basic first aid. Medication is stored out of the reach of children. Emergency medication should not be locked.

Radon testing was conducted in February 2023 and results were under 4 pci/L. Testing should be conducted in the winter months when the ground is frozen within 5 years. The center is compliant with UL approved plug in carbon monoxide detectors on opposite ends of the building. Any fuel burning appliances in the center require an annual inspection. The center does not currently contain fuel burning appliances. The heater is electric. CCR&R, HHS and IDPH have made suggestions regarding room arrangement to best meet the ages of the children.

The painted floors are chipping in several rooms. Staff have covered these areas with rugs and mats. New vinyl flooring has been laid in one infant room. Other rooms will have new flooring installed in coming weeks. Staff reported seeing children with chipping paint on their feet, hands and clothing. In late July staff reported the center has ants. Ants were observed in July in the staff break room. They reported seeing children eating paint, having it on their knees, hands and toys. Staff reported observing bottles being propped in the ones room in late July and stated, "it's been happening less." Staff reported nails and screws have been found in the sandbox or in the classrooms, but they are picking them up as they are found. I did not observe ants, or other safety hazards on 7/26/23.

The center has a small kitchen area separate from the classrooms. The center kitchen must have a separation between the children and the kitchen area. This was still not present during either July visit. Children should not have access to the kitchen area.

Tornado and fire drills are conducted and documented monthly per my observation.

Each restroom has ventilation. Capacity for restrooms 1:15, classroom space (35 square feet of useable floor space per child) and outdoor play are (75 square feet of useable floor space) are met. Capacity and ratio signs should be posted in each room.

Sanitation, illness and other health and safety issues can be staffed with CCNC Amy Hayes. Staff reported in late July children with bumps on their feet or fevers are left at the cetner all day.

Safe Sleep was cited in the past but has been corrected. Safe Sleep violations were not observed on visits made to the center in May and July. On 7/19/23 the Director agreed to remove all blankets from the infant room.

Staff report a child with behaviors was attacking staff and punching staff. The child is no longer attending the center.

Center Outdoor Play Area:

The center has an outdoor play area in the back of the building. The outdoor play has two sections separated by a chain link fence. An additional space is present on the landing above the preschool age play area housing a garden area. Fifteen children can be in this space simultaneously. The infant landing area can hold four infants. The infant sand area has capacity for 8 infants. The preschool age sand area has capacity for 13 children. Gaps on the fence between 3.5-9 inches could pose as entrapment hazards. Caps on the fence should be cut less than two thread bolts or covered so they are not puncture hazards. The center utilizes the Child Care Weather Watch to determine if outdoor play is appropriate in questionable weather conditions. Both areas have sand surfacing. The area for younger children has a shade cover. Both sections are immediately behind the center and can be accessed through the back doors of the center. A ramp has been installed behind the building for easy exit and to accommodate fire code. Both areas contain noncommercial childcare equipment which have been removed.

Areas are separated by fencing so that older children and younger children are not mixed. A piece of climbing equipment was removed that could not be anchored down. Several pieces of playground equipment are available including a caterpillar, a small picnic table, etc.. The Child Care Weather Watch is consulted when weather conditions are questionable for outdoor play. The area is surfaced with sand. Shad must be provided.

The outdoor play inspections are conducted and documented monthly. A first aid kit and emergency contacts/medication are taken outdoors with the children.

Center Field Trips/Transportation:

Field trips have not yet been taken since the center recently opened. Center administration is aware of rule which states, "Two adults are present when more than 8 children are being transported in one vehicle. One staff for school transportation; only in center-owned vehicle with parent authorization. One additional staff when the center contracts for transportation for seven or more children for non-school related purposes. One additional staff when five or more children are involved in a center-sponsored activity away from the center.

The center has been transporting children. The following rules apply to transportation: All children transported in motor vehicle subject to registration, except a bus, shall be individually secured by a safety belt, seat, or harness. Children under age 6 shall be secured in child restraint system. Child under 1 and weighing less than 20 lbs. shall be secured during transit

in rear facing child restraint system. Children under 12 shall not be located in front seat. Drivers shall possess a valid driver's license and shall not operate while under the influence. Vehicles that are owned or leased by the center shall receive regular maintenance and inspection according to manufacturer-recommended guidelines for vehicle and tire maintenance and inspection. Field trip emergency numbers: Phone numbers for each child shall be taken by staff when transporting to and from school, and on field trips and non-center-sponsored activities away from the premises.

Walking field trips may be taken around the program (behind the building etc...), and would not be considered an actual field trip for ratio purposes.

Center Administration:

CCR&R Consultant Malia Love has been providing consultation on curriculum and encouraging daily use.

Child files are reviewed annually. A tracking system to keep child file information including physicals, immunization and annual updates including emergency contacts, medical and dental information, pick up and field trip authorizations is present. Allergy Action plans have been sent home with parents of every child that had allergies marked on physicals. Some of the plans have not been returned.

Staff files are reviewed annually. Director Bethurem tracks staff files and performs SING checks (every 2 years) and sends off fingerprints (every 4 years). Prior to staff starting on the floor fingerprints should be obtained and sent off. During the interim period staff are able to get training hours and perform other duties in the center. Staff are up to date on professional development hours, CPR/1st Aid training, Mandatory Reporter training, physicals and Universal Precautions training.

All staff in ratio: At least sixteen years of age. If less than eighteen, may not be sole provider on the premises. All staff in ratio involved with children in programming activities. At least one person on duty in the center, or on field trips is over eighteen. Staff person under the age of 18 shall not provide transportation to children in care. Staff persons under age 18 who are not under supervision of adult shall only provide care to school aged children.

Teh Director reports all staff now take a new staff orientation. The Director has an open door policy encouraging staff to approach them with potential issues so they can be immediately addressed. Clear leadership roles have been assigned and staff should be aware of the chain of command. The Director is present on a daily basis and takes an active role in the center as does the on site supervisor. OSS Rife is present when the Director is not. Rooms should implement safe supervision practices to ensure careful supervision of each child is achieved at all times.

Administration is aware of volunteer requirements.

All required postings are present such as No Smoking signage, DHS Licensing Consultant contact information, the Center License, and Mandatory Reporter posting.

Administration trains each staff on the center Emergency Preparedness Plan annually. Staff signed and dated acknowledgement of such on 5/1/23. New staff should be trained on the plan.

III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:

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

1. 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. All employees need an approved physical on file.

109.7(1) All staff (within first 3 months of employment)

Two hours of approved training FOR the mandatory reporting of child abuse.
At least one hour of training regarding universal precautions and infectious disease control.
Certification in American Red Cross, American Heart Association, American Safety and Health institute or MEDIC First Aid infant, child, and adult cardiopulmonary resuscitation (CPR) OR equivalent certification approved by the department. A valid certificate indicating the date of training and expiration date shall be maintained.
Certification in infant, child, and adult first aid that uses a nationally recognized curriculum or is received from a nationally recognized training organization including the American Red Cross,American Heart Association, American Safety and Health Institute or MEDIC First Aid or an equivalent certification approved by the department.A valid certificate indicating

the date of training and expiration date shall be maintained.
Minimum health and safety trainings, approved by the Department. If significant changes occur to content, the Department may require the training be renewed. The center has 90 days to ensure all staff have had the above trainings after they begin employment. No staff have current Universal Precautions training. Five staff are missing Mandatory Reporter training. Four staff are missing Essentials training (which is required). The Director, and four other staff need CPR/1st Aid training.

2. 109.4(2)d: Written plan developed for staff orientation regarding center's policies and licensing regulations. Orientation is in accordance with center's staff orientation plan.

109.4(2)e: Written plan for ongoing staff development that complies with 441 IAC 109.7.

3. 109.6(6)c: Center repeats Iowa record checks at a minimum of every two years or when aware of additional child abuse or criminal history that occurs. Staff with a criminal record had not had Record Check Evaluations competed. Six staff did not have SING check results present the day of the last visit.

Iowa records checks. Checks and evaluations of Iowa child abuse and criminal records, including the sex offender registry, shall be completed before the person's involvement with child care at the center. Iowa records checks shall be repeated at a minimum of every two years and when the Department or the center becomes aware of any possible transgressions. The Department is not responsible for the cost of conducting the Iowa records check. The child care center may access the single-contact repository (SING) as necessary to conduct a criminal and child abuse record check of the person in Iowa. If the results of the check indicate a potential transgression, the center shall send a copy of the results to the Department for determination of whether or not the person may be involved with child care, regardless of the person's status with the center.

109.6(6)d: Center repeats national criminal history checks at a minimum of every four years or when aware of additional history that occurs. The Director was unable to find fingerprint results on 7/26/23. She reports sending fingerprints in again the first week of August on all employees.

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: 15

Checks and evaluations of Iowa child abuse and criminal records, including the sex offender registry, shall be completed before the person's involvement with child care at the center. ALL employees must have an approved SING Check.

4. 109.8(2)d: Brief absence of staff person permitted for 5 or less minutes when another staff person is present. Staff reported throughout the day multiple times a day staff leave for 5 minute breaks and are gone for 20 minutes at a time.

5. 109.10(3)d: Staff shall not provide medications to a child if preservice/orientation training for medication management has not been completed. Staff reported that many staff have administered both over the counter and prescribed medication but did not fill out the proper paperwork. They do not have medication administration training. Several staff indicated they did not know paperwork was to be completed.

6. 109.11(1) 35 square feet of usable floor space per child. An attached area to the center being utilized for gross motor play that has not been approved for licensing. Several staff reported school age children have been taken to Stevie's home on many occasions as the center was over ratio after school and during nap time. Children went off site during snack or lunch. All staff reported this had not occurred recently.

7. 109.10(12)d: Vehicles that are owned or leased by the center shall receive regular maintenance and inspection according to manufacturer-recommended guidelines for vehicle and tire maintenance and inspection.

8. 109.10(15)c: Center shall develop procedures for annual staff and volunteer training on emergency plans. The Director agreed to go over this with all nerw staff and have them sign and date it.

9. 109.12(2)b: Punishment which is humiliating or frightening or causes pain or discomfort is not allowed. Mechanical restrains shall never be used. If part of a treatment plan for a child with a disability, staff shall receive training. Staff reported in late July that at times children were physically moved or held. This is not allowable.

109.12(2)c: Punishment or threat of punishment associated with illness, toilet training, or food or rest is not be used. Staff indicated children were made to try at least two bits of food or have consequences. The two bite rule is not in compliance. However, in the last visit all staff report this is no longer being used.

10. 109.12(5)b: Infants diapered in a sanitary manner as needed in central diapering area. One changing table for every 15 infants/toddlers needing diaper changes. Diapering, sanitation, and handwashing procedures posted and implemented in central diapering area. On the date of the visit staff were not wearing gloves during diaper changes. Staff asked if they must provide their own gloves. CCNC Amy Hayes addressed diaper changing during her visit earlier in July. She indicated gloves were not being utilized a that time. She addressed that the changing table should have been cleaned after a diaper change. Diapering procedure should be reviewed.

11. 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. This has been repeatedly addressed since prior to opening. however, the day of the visit lunch being served did not meet CACFP guidelines. Staff reported children were given cool downs if children refused to take two bites of food. When asking the Director and OSS if the program had been compliant with CACFP in late July they indicated they had pizza for a special occasion. The OSS reports they have informed staff the 2 bite rule is no longer in effect. Center staff admit they allow infant bottles to be propped if they are able to hold the bottle on their own. CCNC Amy Hayes also witnessed this in July. The date I visited a blanket was under a child's chin and moving up around his mouth. I addressed this immediately with staff. CCR&R has provided CACFP information and referred the OSS and Director to a CACFP consultant.

12. 109.9(2)g: Any child with allergies, a written emergency plan. Copy shall accompany child if they leave the premises.

13. 109.11(6) Kitchen appliance or microwaves: Gas or electric ovens are not in program area. Area housing kitchen appliances in program area is sectioned off and not counted in useable floor space. Formula or food warmed for infants in microwaves is not served immediately and is shaken or stirred prior to serving.

The program Director and OSS were specifically told to place a boundary around the kitchen area prior to opening, again in March, May and twice in July 2023. This has not been corrected.

14. The center should add the following policies to their handbook.
109.12(2)a Center does not use corporal punishment including spanking, shaking, or slapping.

109.5(1) Written policy notifying parents of unlimited access provisions.

109.10(5) Infectious disease control: Centers shall establish policies and procedures related to infection disease control and use of universal precautions with handling of bodily fluid. Soiled diapers shall be stored in containers separate from other waste.

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

This has been cited and addressed multiple times by HHS, CCR&R and IDPH.

V. SPECIAL NOTES/RECOMMENDATIONS:

***This is an administrative change noting the center is now on a Provisional License. The center was placed on a Corrective Action Plan in June addressing several licensing violations, yet licensing issues persist. The Department may issue a provisional license at time of new application or renewal when the center does not sufficiently meet licensing laws and rules. In some instances, the child care consultant may request a corrective action plan, including timelines. A provisional license may be in effect for up to one year. A provisional license may be renewed when a written plan to bring the center into compliance with the standard, giving specific dates for completion of work, are submitted to and approved by the Department. A center cannot receive a provisional license for more than two years in a row for being out of compliance with the
same licensing standards.

When the center submits documentation or it can otherwise be verified that the center complies with the licensing regulations or standards, the license will be upgraded from a provisional to a full license status.

In addition, if a center is issued a license indicating it is fully in compliance with licensing requirements, but at a later date within the license period fails to be in compliance, the Department may reduce a license to a provisional status. Upon correction of the deficiencies and approval by the child care consultant, the provisional license may be upgraded to a full license.

A technical referral was made to CCR&R on 7/20/23 to assist with correction of deficiencies. Another visit to the center was conducted on 7/26/23. Consultants Jodi Norton and Malia Love provided consultation to the center for several hours on that date. Another referral was made to CCR&R on 8/3/23 so that they may assist with staff and child files and helping to organize a licensing binder. The center chose to send children attending the center to Stevie's home on many occasions during nap and lunch time and after school due to being over ratio in the center.

Suspension and Revocation

The Department may initiate an action to revoke a license when the center exhibits a pattern of noncompliance, or an imminent concern arises that jeopardizes the well-being of children. The Department may act to suspend or revoke a license during the licensing year. The Department will suspend or revoke a license if corrective action has not been taken when:
The center does not comply with the licensing laws and rules and makes no substantial attempt to correct deficiencies.
The center is operating in a manner that the Department determines impairs the safety, health, or well-being of the children in care.
A person subject to an evaluation has transgressions that merit prohibition of involvement with child care and of licensure, as determined by the Department.
Information provided to the Department, either orally or in writing, or information contained in the center's files.

A multitude of training resources, handouts, examples, forms, in person visits, in person trainings, email information, phone consultation have been given to the facility for the past year. Comm 204 as well as Chapter 109 and the Licensing Rule Checklist has been given to OSS Neff and Director Bethurem numerous times. CCR&R has visited the center four times and CCNC Hayes four times. DHS has visited four times as well assisting the center with gaining full licensure.

CCNC Amy Hayes is presenting a Back to Sleep training on Monday, Aug 21st at the center. She reported to the Director that she needed to make it mandatory for all staff. Stevie asked CCNC Hayes to visit. CCNC Hayes provided email consultation on the following dates.
6/09/2023 Ratio requirements
6/15/2023 Safe Sleep information
7/11/2023 Common Child Illness & Exclusion for daycare centers
7/25/2023 Medication Administration form to use to for administering medications.

Consultant Malia Love sent the following resources via email on 8/4/23:

-A behavior tracking sheet, this is useful for documentation and especially for when a child may require additional services, they can use these as proof of assistance.

-Incident Report Sheet, this breaks down what is needed and would be helpful to have a copy in each classroom.

-Classroom DHS Regs, this would also be helpful to post in each of your classrooms so staff have something to refer back to

-Classroom Shadow Checklist, this is a great tool for orientation and onboarding of staff

-Director Responsibility List, this does not have to be just the director. These are just the responsibilities of an administrator. If you wish to delegate these duties based on preference and skill set that is alright!

-Cleaning Guide for Child Care, this is a great resource for staff and breaking down daily health and safety duties.

-Zone Schedule, this is what we were referring to when discussing having each staff take on specific responsibilities. there are two different resources I have attached for this. CCR&R has offered to visit the facility during the visit on 7/26/23 offering to conduct classroom observations, a staff training on IPOWER to ensure all staff have training requirements met. She further offered the same and assistance on schedules and routines via email on 8/3/23. She followed up with the Director again on 8/4/23 but has not been invited to the center. CCR&R has provided nearby Directors to assist with any questions Stevie and Nicole may have.

*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.