



Iowa Department of Human Services

Kim Reynolds
Governor

Adam Gregg
Lt. Governor

Kelly K. Garcia
Director

12/05/2019

Jamie Anderson and Lauran Anderson
1320 N 9th ST
Burlington, IA 52601

Dear Child Care Provider:

This letter is in regards to the follow up at your residence in which you are seeking child development home registration conducted on 12/05/2019. Iowa Code Chapter 237A and 441 Iowa Administrative Code, Chapter 110, describes specific requirements that must be met by a Registered Child Development Home. You are not a participant in the voluntary Quality Rating and Improvement System. The following areas were out of compliance at the time of the visit:

441 IAC 110.7 **Provider Requirements**

441 IAC 110.8 Standards. Conditions in the home are safe, sanitary, and free of hazards.

441 IAC 110.8(3) **Medications and Hazardous Materials**

441 IAC 110.8(3)“a” All medicines and poisonous, toxic, or otherwise unsafe materials shall be secured from access by a child

441 IAC 110.8(3)“c” Medications shall be given only with the parent’s or doctor’s written authorization. Each prescribed medication shall be accompanied by a physician’s or pharmacist’s direction. Both nonprescription and prescription medications shall be in the original container with directions intact and labeled with the child’s name. All medications shall be stored properly and, when refrigeration is required, shall be stored in a separate, covered container so as to prevent contamination of food or other medications. All medications shall be stored so they are inaccessible to children. Any medication administered to a child shall be recorded, and the record shall indicate the name of the medication, the date and time of administration, and the amount given

441 IAC 110.8(4) **Emergency Plans**

441 IAC 110.8(4) “b” The provider must have procedures in place for the following:
1. evacuation to safely leave the facility
2. relocation to a common, safe location after the evacuation
3. shelter-in-place to take immediate shelter where you are when it is unsafe to leave that location due to the emergent issue
4. lock down protocol to protect children and providers from an external situation
5. communication plan and plans for reunification with families
6. continuity of operations plans
7. Procedures to address the needs of individual children, including those with functional or access needs

441 IAC 110.9 Files

441 IAC 110.9(1) **A provider file is maintained and shall contain the following:**

441 IAC 110.9(1)“a” A physician’s examination report for the provider and all members of the provider’s household aged 18 years or older. Acceptable physical examinations shall be documented on Form 470-

5152, Child Care Provider Physical Examination Report. All children residing in the household must have medical documentation outlined in 110.9(4) "d", 110.9(4) "f", and 110.9(4) "g"

441 IAC 110.9(4)

Children's Files. An individual file for each child shall be maintained and updated annually or when the provider becomes aware of changes. The file shall contain:

- a.** Identifying information including, at a minimum, the child's name, birth date, parent's name, address, telephone number, special needs of the child, and the parent's work address and telephone number.
- b.** Emergency information including, at a minimum, where the parent can be reached, the name, street address, city and telephone number of the child's regular source of health care, and the name, telephone number, and relationship to the child of another adult available in case of emergency.
- c.** A signed medical consent from the parent authorizing emergency treatment.
- d.** An admission physical examination report signed by a licensed physician or designee in a clinic supervised by a licensed physician
 - 1.** The date of the physical examination shall not be more than 12 months before the child's first day of attendance at the child development home.
 - 2.** The written report shall include past health history, status of present health, allergies and restrictive conditions, and recommendations for continued care when necessary.
 - 3.** For a child who is five years of age or older and enrolled in school, a statement of health status signed by the parent or legal guardian may be substituted for the physical examination report.
 - 4.** The examination report or statement of health status shall be on file before the child's first day of care
- e.** For children under the age of 6, a statement of health condition signed by a physician or designee submitted annually from the date of the admission physical. For a child who is enrolled in school, a statement of health status signed by the parent or legal guardian may be substituted for the physician statement.
- f.** For each school-age child, on the first day of attendance, documentation of a physical examination that was completed at the time of school enrollment or since.
- g.** A signed and dated immunization certificate provided by the state department of public health. For the school-age child, a copy of the most recent immunization record shall be acceptable.
- h.** For any child with allergies, a written emergency plan in the case of an allergic reaction. A copy of this information shall accompany the child if the child leaves the premises.
- i.** Documentation that is signed by the parent and names persons authorized to pick up the child. The authorization shall include the name, telephone number, and relationship of the authorized person to the child.
- j.** Written permission from the parent for the child to attend activities away from the child development home.
- k.** Injury report forms documenting injuries requiring first aid or medical care
- l.** If the child meets the definition of homelessness as defined by section 725(2) of the McKinney-Vento Homeless Education Assistance Act, the family shall receive a 60-day grace period to obtain medical documentation.

Findings:

Chad Reckling, SW II and Jodi Norton, CCR&R completed a follow up compliance visit to the childcare home today. The following were observed:

Jamie needs to move gas cans away from propane bottles in garage and place in separate area. This was observed to be completed.

Jamie needs to move pool supplies from the outdoor play area into the garage. This was observed to be completed.

Jamie needs to put child lock on cabinet above the toilet in the bathroom. This was observed to be completed.

Jamie needs to show documentation of her completed Emergency Preparedness Plan. The Child Care Resource & Referral consultant has emailed Jamie a copy of the template that can be used. This was observed to be completed.

Jamie needs to show documentation of a current physical for Terry on the Childcare Provider Physical Examination Report form. This was observed to be completed.

441 IAC 110.9(4) Children's Files. An individual file for each child shall be maintained and updated annually or when the provider becomes aware of changes. The file shall contain:

An admission physical examination report signed by a licensed physician or designee in a clinic supervised by a licensed physician. The date of the physical examination shall not be more than 12 months before the child's first day of attendance at the child development home. The written report shall include past health history, status of present health, allergies and restrictive conditions, and recommendations for continued care when necessary. Need physical for G.R. This was observed to be completed.

A signed and dated immunization certificate provided by the state department of public health. For the school-age child, a copy of the most recent immunization record shall be acceptable. Need date signed on form for H.R.(4). Need for R.R. This was observed to be completed.

Non-compliance items remaining after today's visit:
None

Suggestions for Improvement:

Recommendation:

No further action is required. This applicant is approved to become a registered child development home category C 2 provider home. The home is limited in its maximum capacity of children to 12 given its usable interior square footage.

[] Is the recommendation to terminate a provider agreement or revoke a registration?

Non-compliance with any of the mandated requirements listed above may lead to the cancellation or revocation of your Child Development Home Registration. Please take whatever steps are necessary to completely address each of the violations noted above. It is essential you correct all above-mentioned violations.

Based on the items out of compliance listed above, you will not be required to have a recheck or follow up visit to your home. No further action is required.

Please do not hesitate to contact me at DHS at (319) 208-5521/creckli@dhs.state.ia.us if you have any questions regarding this letter.

Sincerely,

Chad Reckling

Social Worker II

Machelle Pezley

Social Work Supervisor

Always Remember:

Child Care Resource and Referral is an excellent resource for providers to access training options and support in your area. You can reach Child Care Resource and Referral at 563-324-3236

As you plan your future trainings to meet your 24 hours of training requirement, please remember that you can access the approved training by going to http://www.dhs.state.ia.us/Consumers/Child_Care/Professional_Development.html

You may also access training at: <https://ccmis.dhs.state.ia.us/trainingregistry/>

All providers need to maintain compliance with rules set out in Iowa Administrative Code, Chapter 110, which includes: 441 IAC 110.5(1): Check with the appropriate authorities to determine how the following local, state, or federal laws apply to you: • Zoning code • Building code • Fire code • Business license • State and federal income tax • Unemployment insurance • Worker's Compensation • Minimum wage and hour requirements • OSHA • Americans with Disabilities Act (ADA).