Health and Human Services

Iowa Department of Health And Human Services

CHILD CARE ANNUAL EVALUATION

Business Name: Toriann Erickson

Provider Name: Toriann Erickson

Provider No.: 52289

Address: 1259 E 36th CT, Des Moines, IA, 50317

E-Mail:

County: Polk

Phone Number: 5157835630

- [ ] Pre-Inspection Date:
- [ ] Approval Date:
- [X] Annual Visit Date: 10/3/2025

Program Type:

- [X] Registered Child Development Home A (guidelines for ratios on all categories)
- [ ] Registered Child Development Home B
- [ ] Registered Child Development Home C
- [ ] Registered Child Development Home C1
- [ ] Non Registered Child Care Homes accepting CCA

Program Population Served:

- [ ] Infant(0<24 mos)
- [ ] Toddler
- [ ] PreSchool
- [ ] School Age
- [X] All Ages

Health and Human Services

Iowa Department of Health And Human Services

CHILD CARE ANNUAL EVALUATION

1. Basic Overview

Toriann Erickson has been a registered Child Development Home Provider since October of 2023. Toriann is currently renewing her CDH registration. She has an approved substitute. There are 2 pet cats in the home. Toriann can have 6 preschool children and an additional 2 school aged children in her care at one time. Currently she as 1 preschool child in her care.

2. Identify Observed Strengths Of The Program

Toriann's paperwork is organized and easily accessible. The care area in her home is downstairs and is appropriate for Child Development Home care. She has educational and recreational activities for the children to engage in when they are in care. Toriann has completed Safe Sleep training and has Pack and Plays if she has a child younger than 12 months. Safe Sleep is implemented in her Child Development Home. Children in her care receive regular meals and snacks as appropriate. Toriann is willing to transport if needed.

3. Identify The Aspects That Fall Below The Standard

110.9 (1) a : Within six months of becoming registered, a physical exam report documented on form 470-5152, Child Care Provider Physical Examination Report, for all household members over the age of 18. Physical exams should be repeated every three years.

1. DHHS Medical Physical Forms need to be available for review for any household member 18 years or older. I left 2 blank forms for you and your husband to take to your medical providers should you not find the completed forms.

4. Any corrective action plans, provisional license, and safety plans-steps to get into compliance

N/A

5. Special Notes/recommendations

I encourage you to work with your Child Care Resource and Referral Worker (Katie Kytola 515-631-2913) with any training or compliance efforts.

The above correction needs to be completed by 12/7/2025 and will be reviewed on your next annual compliance check.

If you have any questions regarding this compliance letter, please contact me at 515-601-9469 or jake.aringdale@hhs.iowa.gov.

HHS Child Development
Home Compliance Worker: Jake Aringdale Date: 10/6/2025

Non-compliance with any of the mandated regulatory 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.

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