

CHILD CARE COMPLIANT

Name of Provider Ashley Fee		County Mahaska	
Care Address 701 N A ST		City Oskaloosa	Zip Code 52577
Mailing Address 701 N A ST		Mailing City Oskaloosa	Mailing Zip Code 52577
Phone 641-295-2310		Email	

Date of Complaint:	06/18/2024	Date of Visit:	06/26/2024
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Type of Visit			
☐ Scheduled		☒ Unannounced	
		☐ N/A	

Compliance Regulation	
☒ Non-Compliance with Regulations Found	
☐ Compliance with Regulations Found	

Recommendation for Registration:	
☒ No Changes to registration status recommended	
☐ Revocation of Registration	
☐ Cancellation of Child Care Assistance Provider Agreement	

Category of Care:	
☐ Category A	
☒ Category B	
☐ Category C (with no co-provider)	
☐ Category C (with co-provider)	
☐ Non-registered Child Care Home with CCA Provider Agreement	

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:	
Caller was on a CACFP site visit on 6-17-2024 at 9:30 and provider was gone on vacation. The approved helper, Samantha McHaws, was present as one another adult helper- Elizabeth Countyman. - Elizabeth Countyman. Elizabeth's 7 and 9-yr old were there, putting ratio to 14. Menus were not available, as the provider took them with her.	

CHILD CARE COMPLIANT**Rule Basis and Findings of Complaint(s):**

110.5 "No more children are in care than the number authorized on the registration certificate."

110.7(2) "Substitutes. The provider shall assume responsibility for providing adequate and appropriate supervision at all times when children are in attendance. Any designated substitute shall have the same responsibility. For providing adequate and appropriate supervision. Ultimate responsibility for supervision shall be with the provider.

110.9(3)(d) "Certification in infant and child first-aid that includes mouth to mouth resuscitation.

110.9(3)(e) "Certification or other documentation that minimum health and safety training as identified in 110.10(1)(a) has been completed within three months or prior to providing substitute care, whichever occurs first.

Findings:

This worker went to the Child Development Home of Ashley Fee unannounced on 6/26/2024 at 10:30am. Provider allowed this worker into the home. There was 1 infant, 2 preschool, and 5 school aged children in attendance. This worker was able to see the entire area child care is provided in the home. This worker did not observe any safety concerns.

When this worker communicated there was a complaint filed, the provide said she knew what the complaint was about. She then communicated what the complaint was accurately. The provider said she admits the complaint is accurate and it did occur.

The provider said she has been trying to move from a "B" to a "C2" Child Development Home for the past several months and has been having communication problems with Registration. Samantha M. is the person Ashley is trying to certify as the other provider in the "C2" category. Ashley indicated Samantha has done the needed trainings and they are now communicating with Registration regarding Samantha's history of experience to qualify for the "C2". Ashley is currently identified as an approved assistant in the Child Development Home.

Elizabeth Countryman was also present and identified as an assistant also. Elizabeth has not been identified as an assistant with Registration as of today.

During the visit by this worker a full compliance check was completed.

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Resolution and Action Required:

110.5 “No more children are in care than the number authorized on the registration certificate.”

This worker checked with Registration and Samantha has completed the trainings needed to be a qualified substitute including the CPR Training. Due to Elizabeth Countryman not having backgrounds checks completed and is not approved to be an assistant the provider was out of compliance with this rule due to having over 8 children present.

110.7(2) “Substitutes. The provider shall assume responsibility for providing adequate and appropriate supervision at all times when children are in attendance. Any designated substitute shall have the same responsibility. For providing adequate and appropriate supervision. Ultimate responsibility for supervision shall be with the provider.

This worker check with Registration and Samantha has completed the trainings needed to be a qualified substitute including the CPR Training. The provider is not out of compliance with this rule.

110.9(3)(d) “Certification in infant and child first-aid that includes mouth to mouth resuscitation.

110.9(3)(e) “Certification or other documentation that minimum health and safety training as identified in 110.10(1)(a) has been completed within three months or prior to providing substitute care, whichever occurs first.

Samantha has completed all the required trainings to qualify to a be an approved assistant. The provider is not out of compliance with this rule.

This worker had a conversation with Ashley regarding her status as a “B” provider currently and wanting to move to a “C2”. Provider voiced understanding she cannot act as a “C2” provider until Registration has approved the change.

This worker also had a conversation with Ashley regarding Elizabeth Countryman. Elizabeth cannot be at the Child Development Home until her backround checks are completed and Registration indicates she is clear to be an assistant. Elizabeth will need to take the Mandatory Reporting Training within 3 months of starting to be an assistant.

This worker stressed if these rules are not followed the provider’s Registration could be revoked.

A full compliance check was completed on the visit and will be addressed in another document.

Menus are not part of compliance requirements.

No further action is needed at this time.

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Consultant's Signature:	Jake Aringdale	Date of Visit:	06/27/2024
Supervisor Signature:	Sheila Aunspach	Date of Visit:	06/27/2024