

09/15/2023

Robin Garcia
513 N 2nd ST
Marshalltown, IA 50158

Dear Child Care Provider:

This letter is in regards to the compliance visit at your Registered Child Development Home B conducted on 09/15/2023. 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 110.7(1)

The provider shall meets the following requirements:

- a. Gives careful supervision at all times.
- b. Exchange information with the parent of each child frequently to enhance the quality of care.
- c. Give consistent, dependable care and be capable of handling emergencies
- d. Be present at all times except when emergencies occur or an absence is planned, at which time care shall be provided by a department-approved substitute. When an absence is planned, the provider shall give parents at least 24 hours' prior notice.
- e. Shall be free of the use of illegal drugs and shall not be under the influence of alcohol or any of the prescription or non-prescription drug that could impair their ability to give careful supervision.

441 IAC 110.8

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

441 IAC 110.8(1)**Facility Requirements**

441 IAC 110.8(1)"a"

The home shall have a nonpay, working land-line or mobile telephone with emergency numbers posted for police, fire, ambulance, and the poison information center. The number for each child's parent, for a responsible person who can be reached when the parent cannot, and for the child's physician shall be written on paper and readily accessible by the telephone. The home must prominently display all emergency information, and all travel vehicles must have a paper copy of emergency parent contact information

441 IAC 110.8(1)"h"

The home shall have at least one single-station, battery-operated, UL-approved smoke detector in each child-occupied room and at the top of every stairway. Each smoke detector shall be installed according to manufacturer's recommendations. The provider shall test each smoke detector monthly and keep a record of testing for inspection purposes

441 IAC 110.8(1)"n"

Providers shall inform parents of the presence of any pet in the home.

1. Each dog or cat in the household shall undergo an annual health examination by a licensed veterinarian. Acceptable veterinary examinations shall be documented on Form 470-5153, Veterinary Health Certificate. This examination shall verify that the animal's routine immunizations, particularly rabies, are current and that the animal shows no evidence of endoparasites (roundworms, hookworms, whipworms) and ectoparasites (fleas, mites, ticks, lice).
2. Each pet bird in the household shall be purchased from a dealer licensed by the Iowa department of agriculture and land stewardship and shall be examined by a veterinarian to verify that it is free of infectious diseases. Acceptable veterinary examinations shall be documented on Form 470-5153, Veterinary Health Certificate. Children shall not handle pet birds.
3. Aquariums shall be well maintained and installed in a manner that prevents children from accessing the water or pulling over a tank.
4. All animal waste shall be immediately removed from the children's areas and properly disposed of. Children shall not perform any feeding or care of pets or cleanup of pet waste.
5. No animals shall be allowed in the food preparation, food storage, or serving areas during food preparation and serving times

441 IAC 110.8(5)**Safe Sleep**

441 IAC 110.8(5) "a"

The provider shall follow safe sleep practices as recommended by the American Academy of Pediatrics for infants under the age of one.

- a. Infants shall always be placed on their back for sleep.
- b. Infants shall be placed on a firm mattress with a tight fitted sheet that meets Consumer Product Safety Commission federal standards.
- c. Infants shall not be allowed to sleep on a bed, sofa, air mattress or other soft surface. No child shall be allowed to sleep in an infant seat, car seat, swing, bouncy seat, or items not designed for sleeping.
- d. No toys, soft objects, stuffed animals, pillows, bumper pads, blankets, or loose bedding shall be allowed in the sleeping area with the infant.
- e. No co-sleeping shall be allowed.
- f. Sleeping infants shall be actively observed by sight and sound.
- g. If an alternate sleeping position is needed, a signed physician authorization with statement of medical reason is required.

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(1) "b" (1) I-PoWeR records or certificates verifying required training completion:

Prior to registration:

- minimum health and safety training, approved by the Department, in required content areas
- Iowa's Mandatory Child Abuse Reporter Training

Prior to registration: First Aid and Cardiopulmonary resuscitation. Provider shall maintain a valid certificate indicating date of training and expiration date.

During each two year registration period, the provider shall receive a minimum of 24 hours of training from approved content areas. A provider shall not use a specific training or class to meet minimum continuing education requirements more than one time every five years

A provider who submits documentation from a child care resource and referral agency that the provider has completed the Iowa Program for Infant/Toddler Care (IA PITC), ChildNet, or Beyond Business Basics training series may use those hours to fulfill a maximum of two years' training requirements, not including first-aid and mandatory reporter training

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:

Per the 9/15/2023 spot check visit, the following corrections need to be made:

441 IAC 110.7(1) The provider shall meet the following requirements:

Be present at all times except when emergencies occur or an absence is planned, at which time care shall be provided by a department-approved substitute. When an absence is planned, the provider shall give parents at least 24 hours'

prior notice.

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

441 IAC 110.8(1)“a” The home shall have a nonpay, working land-line or mobile telephone with emergency numbers posted for police, fire, ambulance, and the poison information center. The number for each child’s parent, for a responsible person who can be reached when the parent cannot, and for the child’s physician shall be written on paper and readily accessible by the telephone. The home must prominently display all emergency information, and all travel vehicles must have a paper copy of emergency parent contact information

441 IAC 110.8(1)“h” The home shall have at least one single-station, battery-operated, UL-approved smoke detector in each child-occupied room and at the top of every stairway. Each smoke detector shall be installed according to manufacturer’s recommendations. The provider shall test each smoke detector monthly and keep a record of testing for inspection purposes

441 IAC 110.8(1)“n” Providers shall inform parents of the presence of any pet in the home. Each dog or cat in the household shall undergo an annual health examination by a licensed veterinarian. Acceptable veterinary examinations shall be documented on Form 470-5153, Veterinary Health Certificate. This examination shall verify that the animal’s routine immunizations, particularly rabies, are current and that the animal shows no evidence of endoparasites (roundworms, hookworms, whipworms) and ectoparasites (fleas, mites, ticks, lice).

441 IAC 110.8(5) “a” The provider shall follow safe sleep practices as recommended by the American Academy of Pediatrics for infants under the age of one.
No toys, soft objects, stuffed animals, pillows, bumper pads, blankets, or loose bedding shall be allowed in the sleeping area with the infant.

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(1)“b” (1) I-PoWeR records or certificates verifying required training completion:
Iowa’s Mandatory Child Abuse Reporter Training

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:
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.
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.
A signed medical consent from the parent authorizing emergency treatment.
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.
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.
The examination report or statement of health status shall be on file before the child’s first day of care
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.
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.
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.
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.

Documentation list 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.

Written permission from the parent for the child to attend activities away from the child development home.

Injury report forms documenting injuries requiring first aid or medical care

Suggestions/Recommendations:

1. Robin has been using household member Isabella as a substitute when she needs to leave the home. Isabella is not approved as a substitute by the Department and has none of the required training certificates necessary for a substitute. Any care of children if Robin needs to be gone from the home needs to be conducted by a DHS-approved substitute, and cannot exceed 25 hours per month.

2. The home environment is in need of some deep cleaning and significant clutter reduction. I noted a cloud of young flies hovering over the dining room table, dry breakfast cereal covered much of the family room floor, table and counter surfaces had no space or clean areas to feed children or prepare food, and bags of household goods/clothing from her adult daughter dominated much of the floor space.

3. Robin needs to post parent contact information/phone numbers in an accessible location for all of the current children she has in care.

4. Robin needs to install a battery operated smoke detector in her back bedroom where children can nap.

5. Robin needs to obtain a current vet statement for her dog to have on file. This needs to be completed using the State form that I shared a copy of, and needs to be renewed every year.

6. During the time of my visit, Robin had an infant under one year of age sleeping in a crib with a large fleece blanket. A safety plan was signed during the visit.

7. Robin needs to obtain a current physician signed statement of health for herself and Isabella to have on file. These need to be completed using the State form I shared a copy of, and need to be renewed every three years. Robin also needs to obtain a current physician signed statement of health or physical and an immunization sheet for the two children living in her home.

8. Robin needs to obtain current certification in the Mandatory Reporter training to have on file.

9. Robin is missing entire files for many of the children in her care. She needs to assemble complete children's files for all children in care.

Corrective Action Required:

Use of Non DHS-approved substitutes, and any violations in safe infant sleeping must cease immediately. Efforts to begin the process of deep cleaning and clutter reduction need to begin within the coming week.

The remaining corrections need to be in place by 12/31/2023. No re-check is planned at this time. Another annual compliance visit will be conducted early in 2024.

I encourage Robin to work with Casey Shelton from Child Care Resource and Referral with any ongoing compliance or training needs.

Casey can be reached at: (515) 802-8016



Iowa Department of Health And Human Services

Kim Reynolds
Governor

Adam Gregg
Lt. Governor

Kelly K. Garcia
Director

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.

Please do not hesitate to contact me at DHS at (515) 291-0008 if you have any questions regarding this letter.

Sincerely,
Earl Crow

Social Worker II

Sheila Aunspach

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 877-216-8481

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).