

05/21/2025

Debora Elonga
1802 9th AVE SW
Cedar Rapids, IA 52404

Dear Child Care Provider:

This letter is in regards to the follow up at your Registered Child Development Home A conducted on 05/20/2025. 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 110.8(1) Facility Requirements

- 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)“ p” The provider shall have written policies regarding the care of mildly ill children and exclusion of children due to illness and shall inform parents of these policies.
- 441 IAC 110.8(1)“ q” The provider shall have written policy and procedures for responding to health-related emergencies

441 IAC 110.8(2) Use of Outdoor Space

- 441 IAC 110.8(2) “b” When there is a swimming or wading pool on the premises:
1. A wading pool shall be drained daily and shall be inaccessible to children when it is not in use.
 2. An aboveground or in-ground swimming pool that is not fenced shall be covered whenever the pool is not in use. The cover shall meet or exceed the ASTM International (formerly known as the American Society for Testing and Materials) specification intended to reduce the risk of drowning by inhibiting access to the water by children under five years of age.
 3. An uncovered aboveground swimming pool shall be enclosed with an approved fence that is non-climbable and has a minimum height of four feet.
 4. An uncovered in-ground swimming pool shall be enclosed with a fence that is non-climbable and is at least four feet high and flush with the ground.

441 IAC 110.8(3) Medications and Hazardous Materials

- 441 IAC 110.8(3)“b” A first-aid kit shall be available and easily accessible whenever children are in the child

development home, in the outdoor play area, in vehicles used to transport children, and on field trips. The kit shall be sufficient to address first aid related to minor injury or trauma and shall be stored in an area inaccessible to children. The kit shall, at a minimum, include adhesive bandages, bottled water, disposable tweezers, and disposable plastic gloves.

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

441 IAC 110.8(4)

Emergency Plans: plans in case of man-made or natural disaster shall be written and posted by the primary and secondary exits. The plans shall clearly map building evacuation routes and tornado and flood shelter areas.

441 IAC 110.8(4) "a"

Fire and tornado drills shall be practiced monthly and the provider shall keep documentation evidencing compliance with monthly practice on file for the current year and the previous year.

441 IAC 110.9

Files

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

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:

An annual compliance check was completed on 5/20/25 and the following was out of compliance:

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.

Debora did not have a smoke detector in the bedroom on the main level and in the bedroom in the lower level where children sleep.

Debora did not have any documentation of monthly testing of smoke detectors for 2025.

441 IAC 110.8(1)“p” The provider shall have written policies regarding the care of mildly ill children and exclusion of children due to illness and shall inform parents of these policies.

Debora did not have this written policy.

441 IAC 110.8(1)“q” The provider shall have written policy and procedures for responding to health-related emergencies.

Debora did not have this written policy.

441 IAC 110.8(2) “b” When there is a swimming or wading pool on the premises:

A wading pool shall be drained daily and shall be inaccessible to children when it is not in use.

An aboveground or in-ground swimming pool that is not fenced shall be covered whenever the pool is not in use. The cover shall meet or exceed the ASTM International (formerly known as the American Society for Testing and Materials) specification intended to reduce the risk of drowning by inhibiting access to the water by children under five years of age.

An uncovered aboveground swimming pool shall be enclosed with an approved fence that is non-climbable and has a minimum height of four feet.

An uncovered in-ground swimming pool shall be enclosed with a fence that is non-climbable and is at least four feet high and flush with the ground.

Debora does have an above ground pool. It is fenced off as long as they do not use the back yard for play. There is currently a safety plan in place. it stipulates that Debora will not use the backyard for play until she obtains a fence in a small part of the yard, to keep the kids from accessing the pool, once they go through the gate to the backyard. Debora agreed that they do not currently play in the backyard and CCR&R plans to seek funding to assist her in paying for the fix that she needs in order to fully secure the pool from access by the children.

441 IAC 110.8(3)“b” A first-aid kit shall be available and easily accessible whenever children are in the child development home, in the outdoor play area, in vehicles used to transport children, and on field trips. The kit shall be sufficient to address first aid related to minor injury or trauma and shall be stored in an area inaccessible to children. The kit shall, at a minimum, include adhesive bandages, bottled water, disposable tweezers, and disposable plastic gloves.

Debora did not have the disposable tweezers that are required for her First aid kit.

441 IAC 110.8(4) Emergency Plans: plans in case of man-made or natural disaster shall be written and posted by the primary and secondary exits. The plans shall clearly map building evacuation routes and tornado and flood shelter areas.

Debora did not have the emergency plan for fire and tornado at her secondary exit.

441 IAC 110.8(4) “a” Fire and tornado drills shall be practiced monthly and the provider shall keep documentation evidencing compliance with monthly practice on file for the current year and the previous year.

Debora did not have any documentation of monthly fire and tornado drills for 2025 (Jan-May)

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:



Iowa Department of Health And Human Services

Kim Reynolds
Governor

Adam Gregg
Lt. Governor

Kelly K. Garcia
Director

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

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.

Debora was missing complete files for several of the children. She was also missing various paperwork for other files.

Suggestions/Recommendations:

A re-check is not needed at this time. Corrections need to be made by 6/10/25 and will be reviewed at the next annual compliance check. Please send pictorial verification of the items where specifically noted below.

I encourage you to work with Rachel Bonefas with Child Care Resource and Referral if you have any ongoing compliance or training needs.

Rachel can be reached at 563-362-8225

Thank you for your service in providing childcare in your community.

Corrective Action Required:

Debora needs to install a smoke detector in the bedroom on the main level and in the bedroom in the lower level where children sleep. She needs to send pictorial verification of compliance to HHS.

Debora needs to ensure that she is testing her smoke detectors monthly and documenting that accordingly.

Debora needs to have a written policies regarding the care of mildly ill children and exclusion of children due to illness and shall inform parents of these policies.
She needs to send pictorial verification to HHS.

Debora needs to have a written policy and procedures for responding to health-related emergencies.
She needs to send pictorial verification to HHS.

Debora agreed to continue to abide by the current safety plan stipulating that she will not use the back yard for childcare play until such time she makes a few changes to her fence around the pool.

Debora needs to obtain the disposable tweezers that are required for her First aid kit.

Debora needs to post her emergency plan for fire and tornado at her secondary exit and send pictorial verification to HHS.

Debora needs to ensure that she is practicing fire and tornado drills monthly and documenting those accordingly.

Debora needs to work with the parents to obtain all of the required paperwork for each child's file. CCR&R agreed to get her more copies of the forms that are required and Debora agreed to work with the parents to obtain the appropriate and required paperwork.

Debora's CCR&R support worker was also present at this visit. The worker agreed to assist Debora in obtaining the required items and plans to follow up with Debora within the next few weeks.

Addendums:

- Addendum1: Debora's annual childcare compliance check was completed on 5/20/25. At that time she had a few areas in which she was out of compliance and needed to send pictorial verification of compliance to this worker.

CCR&R was also working to assist Debora with the compliance needs. On 5/23/25 CCR&R sent verification of the smoke detectors that were needed.

On 8/11/25 CCR&R sent pictorial verification of the emergency plan posted at the secondary exit, and the two written policies she needed. These were the items in which needed to be verified.

This Addendum is approved by supervisor on 8/14/2025 1:18:57 PM

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 319-429-0749 or christy.weber@hhs.iowa.gov if you have any questions regarding this letter.

Sincerely,

Christine Weber

Social Worker II



Iowa Department of Health And Human Services

Kim Reynolds
Governor

Adam Gregg
Lt. Governor

Kelly K. Garcia
Director

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).