



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

October 21, 2015

Liz Lawler
2924 Olde Country Lane
Dubuque, IA 52001

Dear Child Care Provider,

This letter is in regards to the 10/21/15 compliance check of your Level A, Registered Child Development Home. Iowa Code Chapter 237A and 441 Iowa Administrative Code, Chapter 110, describes specific requirements that must be met by a Registered Child Development Home. The following areas were out of compliance at the time of my visit:

FINDINGS: *Identify FINDINGS in each area of non-compliance.*

441 IAC 110.5(2) A provider file is maintained and contains:

441 IAC 110.5(2)"a" A physician's examination report for the provider and all members of the household. Acceptable physical examinations shall be documented on **Form 470-5152, Child Care Provider Physical Examination Report**. The examination shall include any necessary testing for communicable diseases; a discussion of recommended vaccinations; completed no more than six months prior to initial registration; completed by a licensed medical doctor, doctor of osteopathy, physician assistant or advanced registered nurse practitioner; and repeated at least every three years. **You have an appointment for Owen on 10/10/15 and the other three children need to be placed on the correct form at the time of their appointments, if you are still providing care, they are due after 9/2016. You did state you would be ending care in June 2016.**

441 IAC 110.5(2)"b"(2) Documentation from the department confirming the record checks required under 441 IAC 110.7(3) have been completed and authorizing or conditionally limiting the person's involvement with child care. **Need to locate record checks and if you cannot, contact DHS registration unit at 866/448-4605. You stated you would be looking for the letter & if you can find, please provide me a copy.**

441 IAC 110.5(8) Children's Files. An individual file is maintained for each child and updated annually or when there are changes. Each file contains: **Enclosed is the sheet I used to review the files. You pulled the one file with the 2 siblings to get those forms signed the date after our visit.**

441 IAC 110.5(8) "e". 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 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 physician statement.

441 IAC 110.5(8) "i". Written permission from the parent for the child to attend activities away from the child development home. The permission shall include:

(1) Times of departure and arrival. **(2)** Destination. **(3)** Persons who will be responsible for the child

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.

Based on the items out of compliance listed above, a recheck or follow up visit to your home is not necessary. However, it is essential you provide documentation to the Department that certifies you have corrected each of the identified regulatory violations and are now in complete compliance with all Departmental regulatory mandates. **Please check mark each of the boxes listed above when the necessary corrections have been completed. By doing so, you certify that you have completed all of the mandated regulatory requirements contained within each identified section.**

I certify that I have taken all of the steps necessary to correct each of the identified violations noted above and am now in complete compliance with all of the Departmental mandated regulatory rules. Please sign and date below, and return this form in the provided envelope by: 12/7/15

X _____
Signature Date

Please do not hesitate to contact me at DHS if you have any questions regarding this letter.

Sincerely,

Glenda Currie

Glenda Currie, SW II, Childcare Specialist, gcurrie@dhs.state.ia.us

563/557-8251 or 690-5422 ext. 422 800/650-6361 for long distance only Fax: 563/557-9177

MACHELLE PEZLEY

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.

For Dubuque County: CCRR 2728 Asbury Rd, Atrium Building, Dubuque, IA 52001

563-557-1628 or 866-296-5331, fax 563-582-5572

Cherie Kennedy: cherie.kennedy@episervice.org Child Care Consultant, CCRR

Kacey Wiest: kacey.wiest@episervice.org Child Care Consultant, CCRR

Tara Roddick: tara.roddick@episervice.org Child Care Consultant/Supervisor, CCRR

Stephanie VanGroll: Stephanie.vangroll@episervice.org Child Care Consultant, CCRR

Michael McMahon, Fire Marshal: 563/589-4195 mmcmahon@cityofdubuque.org Dubuque Fire Department

As you plan your future trainings to meet your 24 hours of training requirement, please remember that you need to use only DHS approved training and only 12 hours can be by self-study. You can access the approved training by going to http://www.dhs.state.ia.us/Consumers/Child_Care/Professional_Development.html and you can sign up for 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).