



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

9/14/15

Robert Mendoza
2650 Dubque St.
Davenport, IA 52803

Dear Child Care Provider,

This letter is in regards to the 9/14/15 compliance check of your Level B, 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(1)“q” 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).

Sample form given. Need to use required form (470-5153) for Rocky’s annual examination.

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 letter for Robert. Will email CCA unit and request.

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:

5 children enrolled. 5 files viewed.

441 IAC 110.5(8) “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.

Updates needed for JM, XM, & MM

441 IAC 110.5 (8) “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.

Updates needed for JM, XM, & MM

441 IAC 110.5(8) "c". A signed medical consent from the parent authorizing emergency treatment.

Needed for JM, XM, MM & OE

441 IAC 110.5(8) "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.

Need a signature and date for OE

441 IAC 110.5(8) "f". A list signed by the parent which 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.

Updates needed for JM, XM, & MM

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

Updates needed for JM, XM, & MM

Suggestions for Improvement:

Robert needs to place disposable tweezers in first aid kit for the vehicle (provided during visit). Robert also needs to bring shovel inside from the front porch. Consider practicing tornado drills upstairs due to the step issue of the basement.

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: 10/29/15

X _____
Signature Date

Please do not hesitate to contact me at DHS at 563-326-8215 if you have any questions regarding this letter.

Sincerely,

Kathy Hwinker, SWII
Social Worker II

MACHELLE PERLEN
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 563-324-2329 x 1426 (Jacqueline Roscoe).

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).