



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

10/15/2015

Jodee Netten
2578 Lincoln Ave
Oskaloosa, IA 52577

Dear Child Care Provider,

This letter is in regards to the 10/06/2015 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)"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

Provider will need numbers posted for the each child's parent, physician, and an emergency contact in an easily accessible and viewed area.

****The Emergency Number Form template was sent to Provider via mail 10/08/2015 as an example.**

441 IAC 110.5(1)"k" Fire and tornado drills shall be practiced monthly and the provider shall keep documentation evidencing compliance with monthly practice on file

Provider needs to practice fire and tornado drills monthly and document a minimum of one drill per month. Provider shared Provider has missed a couple of drills here and there. Provider was unable to find the form she uses to document the drills.

****It is noted Provider was sent a copy of the Emergency Drill Record via mail 10/08/2015.**

441 IAC 110.5(1)"m" The home shall have at least one 2A 10BC rated fire extinguisher located in a visible and readily accessible place on each child-occupied floor.

Provider has a fire extinguisher which is not of the recommended size for a family home and business environment.

Provider needs a fire extinguisher which is sized 2A 10BC.

441 IAC 110.5(1)"n" 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

Provider needs a smoke alarm in the back two bedrooms. Provider also needs to test the smoke alarms a minimum of one time per month and document all tests.

****It is noted it is very common to use the Emergency Drill Record form to document testing of smoke alarms.**

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).

Both provider's animals, Tessa and Tank, have last seen the vet in September 2014. The animals should be examined by a vet annually. Provider shared provider believes the animals were seen this year, the documentation was just not in the Provider's file.

Each animal should see a vet annually, and documentation should be kept in Provider's file.

****It is noted The Pet Health Examination Veterinary Health Certificate was sent to Provider via mail 10/08/2015.**

PROVIDER FILE:

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.

Provider and all members of the household must have a physical examination form signed and dated by a medical professionals, which should be completed at a minimum of every three years. Provider has a physical examination form filled out for Provider dated 10/2014.

Please have the others in Provider's household complete a physical examination: Kaeman, Aubrey, and Scott.

****It is noted the Child Care Provider Physical Examination Health Form was sent to provider via mail 10/08/2015.**

441 IAC 110.5(2)“b” (1) Certificates or training verification and record check documentation.

Within the first three months of registration :

Two hours of approved child abuse and neglect mandatory reporter training (and every 5 years thereafter.)

Provider shared provider is unsure where Provider’s mandatory reporter corticated is, or when Provider last took this class. If Provider is unable to locate a valid corticated for this, please have Provider complete the class again, with the completed new certificate in the Provider File.

CHILD FILES:

An individual file is maintained for each child and updated annually or when there are changes. Each file contains:

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.

It is noted this information was present for all children in the Provider’s care, however, it was located in separate papers, without it being present in one area. Many Providers will use a general “intake” page which has all of this information present in one area to look at quick in an emergency. This information also needs to be reviewed annually, with having parents sign and date the form each year.

The following children with initials of DF, BV need their information re-signed and re-dated for this year:

****It is noted the Child Intake Information form was sent to Provider to review as a possible future template to keep this information in.**

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

All consents for medical treatment need to be signed and dated annually by parents. This needs to be updated for children with the initials of: DS, AS, CG, BM, BV, BP (10/11), SF, DF.

Child with initials of: BP (10/14) needs a medical consent form in file.

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.

All children in care need an annual physical in file, signed and dated for the medical provider. For children age five and above AND in Kindergarten or higher, their parent can sign a parent health statement in place of a medical examination signing the form.

An annual physical or Parent Health Statement is needed for children with the initials of: DF, AS, CG, SF, DS, BM, BV.

****It is noted the Child Health Exam Forms were sent to Provider via mail 10/08/2015.**

441 IAC 110.5(8) "h". 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.

All children age five or higher and in Kindergarten or higher need at least one physical in file, signed and dated for the medical provider at the time the child enters school.

An annual physical or Parent Health Statement is needed for children with the initials of: SF, DS, BV.

****It is noted the Child Health Exam Forms were sent to Provider via mail 10/08/2015.**

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.

All children in care need an updated immunization record in the Child's file. Children with the initials of: DS, CG need this.

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

All children in care need to have their parents sign and date a generic permission slip if the provider takes the children out of the daycare home area for any reason, such as car rides or walks. This permission slip can be in a form of a generic permission slip, signed annually by parents, listing the locations the Provider plans to take the children through the year, or can be signed whenever the Provider takes the children out on the day of. If it is in the form of a generic permission slip, please have parents review, re-sign, and re-date the form annually.

Children with initials of: DS, AS, BM, BP (10/11), DS, BP (10/14), SF needs this in the file.

****It is noted an example of a permission slip, Consents and Releases, was sent to provider 10/08/2015 via mail.**

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: 11/30/2015

X _____
Signature Date

Please do not hesitate to contact me at DHS at 319-892-6858 if you have any questions regarding this letter.

Sincerely,

Lacey L. Plants
Social Worker II
411 3rd St SE
Ste 400
Cedar Rapids, IA 52401
319-892-6858
lplants@dhs.state.ia.us


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 Heather Miller (641) 670-1533
hmiller@orchardplace.org.

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).