



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

09/17/13

Cynthia Cottrell
711 Pacific
Sioux City, IA 51105

Dear Child Care Provider,

This letter is in regards to the 09/17/13 compliance check of your Level C2, 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:

- 110.5(1) Conditions in the home are safe, sanitary, and free of hazards.
- 110.5(1)a Numbers for police, fire, ambulance, poison information posted by phone.
- 110.5(1)a Numbers for each child's parent, physician, and a responsible person are accessible by the phone.
- 110.5(1)k Fire and tornado drills are practiced monthly and documentation kept.
- 110.5(1)q All dogs and cats have annual examinations. Records of the exams are on file and must verify that routine immunizations are current and animal is free of endo and ecto parasites.
- 110.5(1)u The provider has written policies about caring for mildly ill children and the exclusion of children due to illness, and informs parents of policies.
- 110.5(1)v The provider has written policies about responding to health-related emergencies.
- 110.5(2) A provider file is maintained and contains:
 - 110.5(2)a A physician's signed statement of health and immunization status on the provider and all members of the household who may be present when children are in the home. Statements must be obtained at the time of initial registration and updated every two years.
 - 110.5(2)b Certificates or training verification documentation for:
 - 110.5(2)b Within the first three months of registration:

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110.5(2)b Two hours of approved child abuse and neglect mandatory reporter training (and every 5 years thereafter.)

110.5(2)b Certification by an approved trainer/organization in infant and child first-aid that includes mouth-to-mouth resuscitation. Certification will be maintained throughout period of registration. If they are unable to locate first aid training that includes mouth-to-mouth resuscitation, they must complete both a first aid course and CPR.

110.5(2)d An individual file is maintained for each substitute and contains:

110.5(2)d A completed DHS Criminal History Record Check, form B, 595-1396.

110.5(2)d A completed Request for Child Abuse Information, form 470-0643

110.5(2)d A physician's signed statement of health of at the time of employment and at least every two years thereafter.

110.5(2)d Certification of two hours of approved training relating to identification and reporting of child abuse within 6 months of employment and repeated every 5 years.

110.5(2)d Certification in infant and child first aid that includes mouth-to-mouth resuscitation. If they are unable to locate first aid training that includes mouth-to-mouth resuscitation, they must complete both a first aid course and CPR.

110.5(8) Children's Files

110.5(8) An individual file is maintained for each child and updated annually or when there are changes. Each file contains:

110.5(8)b Emergency information including where the parent can be reached, the name, street address, city and telephone of the child's regular doctor, **and the name number, telephone number, and relationship to the child of another adult available in case of emergency.**

110.5(8)d For infants and preschoolers: An admission physical examination, on the first day of attendance, including past health history, status of present health, allergies and restrictive conditions, and recommendations for continued care when necessary. The date of the exam is not more than 12 months before the child's first day of attendance.

110.5(8)d For school-aged children: On the first day of attendance, a statement of health status signed by the parent or legal guardian.

110.5(8)e For infants and preschoolers: A statement of health signed by a physician submitted annually.

110.5(8)e For school aged children: An annual statement of health condition signed by the parent or legal guardian, annually from date of admission physical.

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110.5(8)f A list signed by the parent **which names persons authorized to pick up the child, their telephone number, and relationship to the child.**

110.5(8)g A signed and dated immunization certificate provided by the state department of public health.

110.5(8)h For each school-age child, record of a physical exam completed at the time of school enrollment or since.

110.10(3) Facility requirements:

110.10(3)a There is a minimum of 35 square feet of child use floor space indoors for each child in care. **Could you please send us a floor plan with measurements to make sure you have this amount of space for the number of children allowed by a C home. This cannot include the kitchen cupboards or any furniture that takes up space that the children cannot use, such as what appear to be the two popcorn poppers in the dining room, or the space behind the toys where your desk and file cabinets are.**

Also, in looking at Kindertrack, it is apparent that you were over your allowed numbers several times in July and August. You need to stay within the numbers allowed for your category at all times!

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 within the next 45 days.**

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: 11/4/13

X _____
Signature

Date

[Type text]

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

Sincerely,

Ellen Picray
Social Worker Supv.

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.

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).