



Checklist for Child Development Home Registration

Name	Telephone Number	Date of Inspection	
Street Address	City	State	Zip Code
Date of Initial Registration	Date of Registration at Current Category		

The following are requirements contained in Code of Iowa, Chapter 237A or 441 Iowa Administrative Code Chapter 110 that must be met by a registered child development home. For each requirement, check the “yes” box if the home meets the requirements, or the “no” box if the home does not meet the requirement. If the answer is no, complete the comment column with a few words describing where the deficiency was found or what the problem was. If a requirement does not apply to this particular home, enter “NA” for not applicable in the “yes” box.

SECTION 1.

YES	NO	REF. #	RULE	COMMENT
			For all categories, a provider’s own infants and preschoolers are counted. A provider’s own school-age children are not counted. A relative’s children are counted, regardless of age.	
For child development homes Category A complete Sections 1 and 2. For child development homes Category B complete Sections 1 and 3. For child development homes Category C complete Sections 1 and 4.				
		110.5	Parents are afforded unlimited access to their children and to the providers caring for the children whenever their children are present, unless parental contact is prohibited.	
		110.6	No more children are in care than the number authorized on the registration certificate.	
		110.7(1)	The provider meets the following requirements:	
		a	Gives careful supervision at all times.	
		b	Frequently exchanges information with the parent of each child to enhance the quality of care.	
		c	Gives consistent, dependable care.	

YES	NO	REF. #	RULE	COMMENT
			Is capable of handling emergencies.	
		d	Is present at all times, except if emergencies occur or an absence is planned.	
			If absence is planned, care is provided by a DHS-approved substitute.	
			If absence is planned, the parents are given at least 24 hours prior notice.	
		e	Shall be free of the use of illegal drugs and shall not be under the influence of alcohol or of any prescription or non-prescription drug that could impair their ability to give careful supervision.	
		110.7(2)	Substitutes. The provider shall assume responsibility for providing adequate and appropriate supervision at all times when children are in attendance. Any designated substitute shall have the same responsibility for providing adequate and appropriate supervision. Ultimate responsibility for supervision shall be with the provider.	
		a	All standards regarding supervision and care of children apply to substitutes.	
		b	Except in emergency situations, the provider must inform parents in advance of the planned use of a substitute.	
		c	The substitute must be 18 years of age or older.	
		d	Use of a substitute is limited to: <ul style="list-style-type: none"> • No more than 25 hours per month. • An additional period of up to two weeks in a 12-month period. These limitations do not apply when the provider is engaged in jury duty or official duties related to the provider's membership on a state board, committee, or policy-related body.	
		e	The provider maintains a written record of the number of hours substitute care is provided, including the date and the name of the substitute.	

YES	NO	REF. #	RULE	COMMENT
		110.8	Conditions in the home shall be safe, sanitary, and free from hazards.	
		110.8(1)a	Has a non-pay working telephone. A cell phone can be the primary phone.	
			Emergency numbers posted for police, fire, ambulance, and poison information center.	
			Number for each child's parent, a person who can be reached when the parent cannot and child's physician is written on paper and readily accessible by the working telephone.	
			All travel vehicles must have a paper copy of emergency parent contact information.	
		b	Electrical wiring shall be maintained.	
			All accessible electrical outlets are safely capped or are tamper-resistant electrical outlets.	
			All electrical cords are properly used. This means not found under rugs, over hooks, through door openings, etc.	
		c	Combustible materials are kept away from furnaces, stoves, gas dryers, or water heaters by a minimum of three feet.	
		d	Safety barriers are at stairways and doors as needed.	
		e	An annual laboratory analysis shows satisfactory bacteriological quality <u>if</u> a private water supply is used. Nitrate analysis when children under 2.	
			<u>If</u> water is determined unsuitable for drinking, commercially bottled water or water treated and approved by the health department is provided.	
		f	A safety barrier surrounds any heating stove or heating element, in order to prevent burns.	
		g	Has not less than one 2A 10BC rated fire extinguisher in a visible and readily accessible place on each child-occupied floor.	

YES	NO	REF. #	RULE	COMMENT
		h	Has a minimum of one single-station, battery-operated, UL-approved smoke detector in each child-occupied room and at the top of every stairway.	
			Each smoke detector has been installed according to manufacturer's recommendations.	
			Each smoke detector is tested monthly, and a record is kept for inspection purposes.	
		i	Smoking and use of tobacco products prohibited at all times in the home and vehicles used to transport children. Smoking and use of tobacco products prohibited in outdoor play area during hours of operation.	
			Nonsmoking signs are posted at every entrance of the home and in every vehicle used to transport children. Signs include telephone number for reporting complaints, and www.iowasmokefreeair.gov .	
		j	Homes served by private sewer systems shall be in compliance with discharge restrictions. Discharge of untreated waste water is prohibited. Compliance shall be verified by local board of health at time of renewal or new registration.	
		k	For homes built prior to 1960, provider must complete visual assessment for lead hazards and apply necessary interim controls on any chipping and peeling paint, using DPH lead-safe work methods. Form 470-4755, <i>Lead Assessment and Control</i> , is submitted with each initial and renewal application.	
		l	The child development home shall be located in a single-family residence that is owned, rented, or leased by the person or, for dual registrations, at least one of the persons who is named on the child development home's certificate of registration.	
		m	Any driver who transports children shall have a valid driver's license for the type of vehicle driven. Child restraint devices shall be utilized.	
		n	Providers inform parents of the presence of any pet in the child development home.	

YES	NO	REF. #	RULE	COMMENT
			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. Form 470-5153, <i>Pet Health Examination Veterinary Health Certificate</i> , is on file.	
			Pet birds are purchased from an approved dealer. Examined by a veterinarian to verify free of infectious diseases. Children are not allowed to handle pet birds.	
			Aquariums are well maintained and installed so that children cannot get in the water or pull over the tank.	
			All animal waste is immediately removed from the children's areas and properly disposed of.	
			No animals are allowed in food preparation, storage or serving areas during food preparation and serving times.	
			Children shall not perform any feeding or care of pets or cleanup of pet waste.	
		o	Injury report forms are maintained for any injury requiring first aid or medical care. The forms are completed on the date of occurrence, shared with parents, and copies are in the child's file.	
		p	The provider has written policies about caring for mildly ill children and the exclusion of children due to illness, and informs parents of policies.	
		q	The provider has written policies about responding to health-related emergencies.	
		r	Certificate of registration is displayed in a conspicuous place	
		s	Serious injuries and deaths are reported within 24 hours.	

YES	NO	REF. #	RULE	COMMENT
		110.8(2)	Outdoor space.	
		a	A safe outdoor play area is maintained in good condition throughout the year.	
			Play area has a fence when located on a busy thoroughfare or near a hazard.	
			Has both sunshine and shade areas.	
			Is kept free from litter, rubbish, and flammable materials.	
			Is free from contamination by drainage or ponding of sewage, household waste, or storm water.	
		b	When a swimming pool or wading pool is on the premises:	
			Wading pools are drained daily and are inaccessible to children when not in use.	
			<u>If not fenced</u> , both in and above-ground pools must have a cover that meets or exceeds ASTM standards when not in use.	
			Fence for above-ground pool is four feet high and non-climbable.	
			Fence for in-ground pool is flush with ground, non-climbable, and at least four feet high.	
		c	If children use above-ground or in-ground swimming pools:	
			Written permission from the parents is on file.	
			Equipment needed to rescue a child or adult is accessible.	
			The provider accompanies and provides constant supervision while the children use the pool.	
			The provider has completed training in CPR for infants, toddlers, and children. Documentation of current certification is on file.	

YES	NO	REF. #	RULE	COMMENT
		110.8(3)	Medications and hazardous material.	
		a	All medicines and poisonous, toxic, or otherwise unsafe materials are secured from access by a child.	
		b	First-aid supplies are available and easily accessible in the home, outdoor play area, in any vehicle used to transport children, and on field trips.	
			The first-aid kit shall, at a minimum, include adhesive bandages, bottled water, disposable tweezers, and disposable plastic gloves.	
		c	Medicines are given only with written authorization from the doctor or parent.	
			Prescribed medicines are accompanied by a doctor's or a pharmacist's direction.	
			All medicines are in original containers with directions intact and labeled with the child's name.	
			Medicines are stored properly including refrigeration in a separate covered container.	
			Medicines are inaccessible to children.	
			Any medication provided to a child shall be recorded indicating the name of the medication, date, time, and amount given.	
		d	Medications are not provided if the provider has not completed pre-service orientation that includes medication administration.	
		110.8(4)	Emergency plans.	
		a	Emergency and disaster plans for fire and tornado are written and posted by primary and secondary exits.	
			The plans shall clearly map building evacuation routes in case of fire, a safe place indoors in case of tornado, and flood shelter areas.	
			Fire and tornado drills are practiced monthly and documentation kept on file for the current year and previous year.	

YES	NO	REF. #	RULE	COMMENT
			b Procedures are in place for: <ul style="list-style-type: none"> • Evacuation to safely leave the facility, • Relocation to a common, safe location after evacuation, • Shelter-in-place to take immediate shelter where the child is when it is unsafe to leave that location due to the emergent issue, • Lock down to protect children and providers from an external situation, • Communication and reunification with families, • Continuity of operations, and • Procedures to address the needs of individual children, including those with functional or access needs. 	
		110.8(5)	Safe sleep.	
			a Provider shall follow safe sleep practices as recommended by AAP for infants under one year of age.	
			Infants are placed on back to sleep.	
			Infants are placed on firm mattress with tight fitted sheet that meets CPSC standards.	
			Infants shall not be allowed to sleep on bed, sofa, air mattress, or other soft surface.	
			No toys, soft objects, stuffed animals, pillows, bumper pads, blankets, or loose bedding is allowed in sleeping area.	
			Co-sleeping is not allowed.	
			Sleeping infants will be actively observed by sight and sound.	
			If an alternative sleeping position is needed, a signed physician or physician assistant authorization with state of medical reason is required.	
			b No child is allowed to sleep in items not designed for sleeping, including but not limited to, infant seat, car seat, swing, bouncy seat.	

YES	NO	REF. #	RULE	COMMENT
		c	Crib or crib-like furniture, waterproof mattress covering, and sufficient bedding that meets CPSC or ASTM standards is provided for each child under two years of age. No restraining devices are used.	
		d	Items used for sleeping are used in compliance with manufacturing standards for age and weight of the child.	
		110.8(6)	Discipline.	
		a	Corporal punishment including spanking, shaking, and slapping is not used.	
		b	No punishment is used which is humiliating or frightening, or causes pain or discomfort to the child.	
		c	No punishment is administered because of a child's illness, or progress or lack of progress in toilet training.	
			No punishment or threat of punishment is associated with food or rest.	
		d	No child is subjected to verbal abuse, threats, or derogatory remarks about the child or the child's family.	
		e	Discipline is designed to help the child develop self-control, self-esteem, and respect for the rights of others.	
		110.8(7)	Meals and snacks.	
		a	Regular meals, midmorning snacks and/or mid-afternoon snacks shall be provided and be well-balanced, nourishing, and appropriate amounts as defined by the USDA Child and Adult Care Food Program.	
		b	Children may bring food to the child care home, but are not required to provide their own food.	
		c	Clean, sanitary drinking water shall be readily available to children in indoor and outdoor areas, throughout the day.	
		110.8(8)	Activity program. There is an activity program that promotes self-esteem and exploration that:	
		a	Includes active play.	

YES	NO	REF. #	RULE	COMMENT
		b	Includes quiet play.	
		c	Includes activities for large muscle development, such as running, climbing, riding toys, etc.	
		d	Includes activities for small muscle development, such as coloring, puzzles, fingerplays, play dough, etc.	
		e	All play equipment and materials are in a safe condition, for both indoor and outdoor activities.	
			All activities are developmentally appropriate for the ages of the children present.	
			All equipment and materials are adequate for the number of children present.	
		110.9	Files.	
		110.9(1)	A provider file is maintained and contains:	
		a	A physical exam report documented on form 470-5152, <i>Child Care Provider Physical Examination Report</i> , for all household members over the age of 12. Physical exams should be repeated every three years.	
			Children 12 years of age or younger residing in the household must have: <ul style="list-style-type: none"> • Admission physical exam report. • Immunization certificate. For school age: Documentation of physical exam completed at time of school enrollment or since that time.	
		b(1)	Certificates or training verification documentation for:	
			Approved Health and Safety training obtained prior to registration (and every five years thereafter).	
			Two hours of approved child abuse and neglect mandatory reporter training (and every five years thereafter).	
			Certification by an approved trainer/ organization in infant and child first-aid and CPR.	

YES	NO	REF. #	RULE	COMMENT
			During each two year registration period: 24 hours of approved training.	
		b(2)	Documentation from the Department confirming record checks have been completed and authorizing or limiting the person's involvement with child care.	
		110.9(2)	An individual file is maintained for each staff assistant:	
		a	Documentation from the Department confirming record checks have been completed and authorizing or limiting the person's involvement with child care.	
		b	Physical exam report documented on form 470-5152, <i>Child Care Provider Physical Examination Report</i> , which is repeated at least every three years.	
		c	Certification of two hours of approved training relating to identification and reporting of child abuse within six months of employment and repeated every five years.	
		110.9(3)	An individual file is maintained for each substitute and contains:	
		a	Documentation from the Department confirming record checks have been completed and authorizing or limiting the person's involvement with child care.	
		b	Physical exam report documented on form 470-5152, <i>Child Care Provider Physical Examination Report</i> , which is repeated at least every three years.	
		c	Certification of two hours of approved training relating to identification and reporting of child abuse within three months of employment and repeated every five years.	
		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.	
		e	Certification or other documentation that minimum health and safety training as identified in 110.10(1)"a" has been completed within three months or prior to providing substitute care, whichever occurs first.	

YES	NO	REF. #	RULE	COMMENT
		110.9(4)	Children's files. An individual file is maintained for each child and updated annually or when there are changes. Each file contains:	
		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 where the parent can be reached, the name, street address, city, and telephone of the child's regular doctor, 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	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.	
			For school-aged children: On the first day of attendance, a statement of health status signed by the parent or legal guardian or admission physical examination that is not more than 12 months from the child's first day.	
		e	For infants and preschoolers: A statement of health signed by a physician submitted annually.	
			For school aged children: An annual statement of health condition signed by the parent or legal guardian, annually from date of statement of health or admission physical.	
		f	For each school-age child, record of a physical exam completed at the time of school enrollment or since.	
		g	A signed and dated immunization certificate provided by the state Department of Public Health.	
		h	Written emergency plans for children with allergies. Must accompany child if away from facility.	

YES	NO	REF. #	RULE	COMMENT
		i	A list signed by the parent which names persons authorized to pick up the child, their telephone number, and relationship to the child.	
		j	Written permission from the parent(s) for their child to attend activities away from the child development home. It must include times of arrival and departure, destination, and person(s) responsible for the child.	
		k	Injury report forms to document injuries requiring first aid or medical care.	
		l	If a child meets definition of homelessness, required medical documentation is obtained within 60 days of enrollment.	

SECTION 2.

YES	NO	REF. #	RULE	COMMENT
		110.13(1)	SPECIFIC REQUIREMENTS FOR CHILD DEVELOPMENT HOME CATEGORY "A"	
		a	Not more than six preschool children present at any one time including infants.	
		b	Of these 6 children, not more than 4 children who are 24 months of age or younger are present at any one time.	
			Of the 4 children 24 months of age or younger, no more than 3 may be 18 months of age or younger.	
		c	Not more than two additional school-age children for less than two hours at any one time.	
		d	Not more than eight children present when the emergency school closing exception is in effect.	

SECTION 3.

YES	NO	REF. #	RULE	COMMENT
		110.14(1)	SPECIFIC REQUIREMENTS FOR CHILD DEVELOPMENT HOME CATEGORY "B"	
		a	Not more than six preschool children present at any one time including infants.	

YES	NO	REF. #	RULE	COMMENT
		b	Of these 6 children, not more than 4 children who are 24 months of age or younger are present at any one time.	
			Of the 4 children 24 months of age or younger, no more than 3 may be 18 months of age or younger.	
		c	Not more than four additional school-age children.	
		d	Not more than two children who are receiving care on a part-time basis at any one time. Part-time hours are limited to less than 180 hours per month.	
		e	Not more than 12 children present when the emergency school closing exception is in effect.	
		f	When more than 8 children are present for more than 2 hours, a DHS-approved assistant at least 14 years old is present.	
		110.14(3)	Facility requirements.	
		a	There is a minimum of 35 square feet of child use floor space indoors for each child in care.	
			There is a minimum of 50 square feet outdoors per child in care.	
		b	There is a separate quiet area for sick children.	
		c	Minimum of two direct exits to the outside from the main floor.	
			All exits terminate at grade level with permanent steps.	
			If the second story or basement is used for child care, other than the use of a restroom, there is, in addition to one inside stairway, at least one direct exit to the outside.	
			If a basement window is used as an exit, the window is able to be opened from the inside without the use of tools.	
			The window provides a clear opening of not less than 20 inches in width, 24 inches in height, and 5.7 square feet in area.	

YES	NO	REF. #	RULE	COMMENT
			The bottom of the window opening is not more than 44 inches above the floor with permanent steps inside leading up to the window.	
			Child care is not provided above the second floor.	

SECTION 4.

YES	NO	REF. #	RULE	COMMENT
		110.15(1)	SPECIFIC REQUIREMENTS FOR CHILD DEVELOPMENT HOME CATEGORY "C"	
		a	When both providers are present, not more than 12 preschool children are present at any one time, including infants.	
		b	When both approved providers are present, not more than 4 children 18 months of age or younger are present and no more than 4 of the 12 children are 24 months of age or younger.	
		c	When both approved providers are present, not more than two additional school-age children are present for less than two hours at any one time.	
		d	When both approved providers are present, not more than two additional children who are receiving care on a part-time basis are present. Part-time hours are limited to less than 180 hours per month.	
		e	When there are two approved providers, not more than 16 children are present when the emergency school closing exception is in effect.	
			When there are two approved providers, if more than 8 children are present at any one time due to an emergency school closing exception, the provider shall be assisted by a DHS-approved assistant who is at least 18 years of age.	
		f	If only one approved provider is present, not more than eight children are present.	
			If only one approved provider is present, not more than 4 of the 8 children may be 24 months of age or younger and of these 4 children, no more than 3 are 18 months of age or younger.	

YES	NO	REF. #	RULE	COMMENT
		110.15(3)	Facility requirements.	
		a	There is a minimum of 35 square feet of child use floor space indoors for each child in care.	
			There is a minimum of 50 square feet outdoors for each child in care.	
		b	There is a separate quiet area for sick children.	
		c	Has a minimum of two direct exits to the outside from the main floor.	
			All exits terminate at grade level with permanent steps.	
			If the second story or basement is used for child care, other than the use of a restroom, there is, in addition to one inside stairway, at least one direct exit to the outside.	
			If a basement window is used as an exit, the window is able to be opened from the inside without the use of tools.	
			The window provides a clear opening of not less than 20 inches in width, 24 inches in height, and 5.7 square feet in area.	
			The bottom of the window opening is not more than 44 inches above the floor with permanent steps inside leading up to the window.	
			Child care is not provided above the second floor.	

Signature of person completing form	Agency	Date
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Signature of provider	Co-Provider (Child Development Home C only)	Date
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