Health and Human Services

Iowa Department of Health And Human Services

CHILD CARE CENTER ANNUAL EVALUATION

Name of Center: Cherokee Daycare

Provider No.: 29147

Address: 400 N Roosevelt Ave, Cherokee, IA, 51012

County: Cherokee

Director's Name: Raenique Gamet

On-Site Supervisor:

Phone Number: 7122255728

E-Mail: CHdaycare@outlook.com

HHS Visit Date: 09/16/2026

Licensing Period: 08/01/2026 to 08/01/2028

Fire Inspection:

Date Inspected: 11/15/2024

Comments:

Report Visit Type:

- [ ] PTO
- [X] Licensing Visit
- [ ] Drop In
- [ ] Administrative Change

License Type:

- [X] Full
- [ ] Provisional

Quality initiative:

- [ ] Accrediation

Program Duration:

- [X] Year-Round
- [ ] School Year
- [ ] Summer Only

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HOURS:	*Year-round*	*School-Year*	*Summer Only*
Sunday			
Monday	5:00 AM to 6:00 PM		
Tuesday	5:00 AM to 6:00 PM		
Wednesday	5:00 AM to 6:00 PM		
Thursday	5:00 AM to 6:00 PM		
Friday	5:00 AM to 6:00 PM		
Saturday			

Program Population Served:

- [X] Infant(0-<24 Months)
- [X] Toddler
- [X] PreSchool
- [X] School Age
- [ ] All Ages

LICENSE CAPACITY	Infants	2 Years	Preschool	School-Aged	Capacity
General	38	32	30	25	125
Summer					0

1. Basic Overview

On September 15, 2026, an unannounced visit was completed at Cherokee Daycare Center. Upon arrival, I was greeted by Jewel Brandon, who was serving as the person in charge on this date. Ms. Brandon was welcoming and helpful throughout the visit, providing information about daily operations and classroom routines. Cherokee Daycare Center is located within a repurposed school building in Cherokee, Iowa. The center offers a well-organized layout that includes the following classrooms: infant, one-year-old, two-year-old, three-year-old, four/five-year-old, and school-age. Each space is arranged to meet the developmental needs of the children served, and a separate lunch area is available within the building for mealtimes. The center operates Monday through Friday from 5:00 a.m. to 6:00 p.m., providing care to children from infancy through school age. Staff present on this date appeared engaged with children and attentive to their needs, and the environment felt calm and welcoming.

The program currently has 67 children enrolled. At the time of my visit, 12 children were present in the center.

All program areas were observed, including classroom activities, nutrition practices, health and safety procedures, playground use, field trip and transportation procedures, and administrative operations. The center maintains a secure entry system to ensure controlled access to the building, supporting the overall safety of children and staff. Cameras are also located throughout the center, adding an additional layer of monitoring and security within the facility.

The center uses a theme-based curriculum that introduces children to a central topic or concept. Each theme serves as a framework for selecting activities, books, projects, and play experiences that support growth in language, math, science, art, and social-emotional development. The classrooms include pictures paired with words to help children identify materials and spaces. Rooms are decorated with children’s artwork, including a footprint caterpillar and colorful rainbows, adding a

personal and welcoming touch to the environment. Room arrangements could be improved to support smoother transitions between activities, helping children move comfortably from one part of the day to the next. I noted an improvement from the previous visit, as staff are now utilizing the daily schedule and appropriately observing rest time.

Radon testing identified elevated levels in a few rooms, and a recheck will need to be completed. Monthly fire and tornado drills have not been completed, and monthly playground inspections are also overdue. Carbon monoxide detectors were observed to be functional.

The program uses the school bus for transportation to and from school. Field trips are typically walking trips within the community. The center has three fenced-in playgrounds located behind the building. These include an Infant/Toddler Playground with climbing equipment and rubber mulch surfacing; a Younger Children's Playground with climbing equipment and rubber mulch; and a Preschool/School-Age Playground with rubber tile surfacing, climbing equipment, and a slide. There is also a grass area and plenty of shade available. All playground areas require attention to remove weeds and grass growing up through the cushioned squares. Some surfacing squares also need to be secured and put back into place. These areas should not be used until the corrections are completed.

The center has a small kitchen equipped with upgraded appliances. The refrigerator and kitchen area were clean at the time of the visit. Staff do need to ensure all items removed from original packaging are properly dated and stored appropriately.

Goals of the program is to increase enrollment.

2. Identify Observed Strengths of the program

The center has a group of dedicated staff members who actively engage with children, maintain organized learning spaces, and work together to support smooth daily routines.

Staff uses the ProCare app to interact with parents.

The center is connected with the local school system, which provides bus transportation to and from the program. This partnership supports a strong continuity-of-care model and makes daily routines easier for families by reducing transportation challenges and ensuring children move smoothly between school and childcare.

3. Identify the aspects that fall below the standard

109.7(2): Center directors and all staff have the required contact hours of training.

109.9(2)d: All files contain sufficient information and authorization to allow the center to secure emergency medical and dental services at any time child is in center's care.

109.9(2)i: Preschool (for children five years and younger not enrolled in school): Physical exam report submitted within 30 days of admission, was obtained no more than 12 months prior to admission, is signed by a licensed MD, DO, Chiropractor, PA, or ARNP, and contains health history; present health status including allergies, medications, and acute/chronic conditions; and recommendations for continued care if necessary.

109.10(13)b: Emergency instructions, phone numbers, and diagrams for fire, tornado, and flood shall be visibly posted and documented at least once a month for fire and tornado. Records shall be maintained for current and previous year.

109.11(4)a: Center must have safe outdoor program area adjacent to the center, Be free from litter and unsafe materials and free from contamination by the drainage or ponding of
sewage or storm water

109.12(4)b Each infant and toddler shall be diapered in a sanitary manner as frequently as needed at a central diapering area. Diapering, sanitation, and hand-washing procedures shall be posted and implemented in every diapering area. There shall be at least one changing table for every 15 infants

109.12(4)c Highchairs or hook-on seats shall be equipped with a safety strap that shall be engaged when the chair is in use

and shall be constructed so the chair will not topple.

4. Any corrective action plans, provisional license, and safety plans-steps to get into compliance

5. Special Notes/Recommendations

Targeted Assessment: Behavior Management

I discussed with Jewel regarding her oversight of behavior management related to helping childcare staff:

The center is currently in a period of transition. Staff work well as a team and communicate openly with one another about frustration levels. They understand that redirection or taking a brief break are healthy ways to relieve tension, and they are comfortable asking for help when they begin to feel stressed.

Center will email consultant by 11/30/26 confirming that all aspects that fall below standards have been completed. It is recommended that the Director continue to work with CCRR for support.

Please put all staff credentials and training in IPOWER including CPR/First Aid and Mandatory Reporting training.

A full license is recommended at this time at this time.

At least one visit will be made to the center during the next year.

Date: 09/16/2026

HHS Licensing Consultant: Leann Steinhauer

Non-compliance with any of the mandated regulatory requirements listed above may lead to the cancellation or revocation of your Child Care License. Please take steps necessary to completely address each of the violations noted above.

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 **https://iowaccrr.org**.