Iowa Department of Health And Human Services

CHILD CARE CENTER ANNUAL EVALUATION

Name of Center: Lake Town Charlie Brown

Provider No.: 16105

Address: 7B South 8th St, Clear Lake, IA, 50428

County: Cerro Gordo

Director's Name: Laura Lester center director

On-Site Supervisor:

Phone Number: 6413577277

E-Mail: lakecb@charliebrownpreschools.com

HHS Visit Date: 09/02/2025

Licensing Period: 11/01/2023 to 11/01/2025

Fire Inspection:

Date Inspected: 10/27/2023

Comments: Inspection completed 10/05/22 with final approval granted on 10/27/23

Report Visit Type:

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

License Type:

- [X] Full
- [ ] Provisional

Quality initiative:

Quality Rating: 3

- [ ] Accrediation

Program Duration:

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

Health and Human Services

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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	41	23	65	42	171
Summer					0

1. Basic Overview

An unannounced annual visit was made to the Lake Town Charlie Brown center on 09-02-25 where I met with the center director Laura Lester. The center is one of several programs operated under the oversight of the Charlie Brown centers overseen by an executive director and board of directors. The program is located in a free standing building in the commercial area of Clear Lake which has been converted for use as a daycare center. The program provides full range child care to infants through school age children, and also provides formal 3 and 4 year old preschool programming. There are approximately 130 children enrolled in the center served by 20 staff.

The general layout of the building and classrooms remains the same as in prior reports. Classrooms are determined by age with the infants divided between those that are birth to 12 months, and an adjacent classroom for the 12-24 month old infants. Most of the classroom spaces are located along exterior walls where they have windows, and access to direct exterior exits from the room. There is an interior space that is divided into two programming spaces used for the 3 and 4 year old preschool age children. The classrooms for the formal preschool, 2 year old, and older infants all have restroom spaces accessible directly from the room. The school age children, and the 3 and 4 year old children make use of restrooms off the main access corridor of the preschool space. The 3 and 4 year old preschool programming space is divided by a full wall, and then a half wall that creates the main access corridor where coat cubbies are located further defines the spaces. While it is possible to view the restrooms over the half-wall this is dependent on staff being specifically positioned so that they can observe children. This can be a concern in that during the time of the visit a child was observed to make use of the restrooms and while a teacher was positioned where she would have been able to observe the child it was not clear that the child had told staff of the need to use the restroom. Each room is divided into activity centers through the placement of furniture and play structures which were arranged so as not to create any blind areas. The infant and two year old rooms have changing stations, and additional sinks present to allow for hand washing. The center also has a full kitchen, and attached outdoor playground spaces.

2. Identify Observed Strengths of the program

Good interactions were observed on the day of visit with all staff being actively engaged with the children either presenting the planned programming, or attending to their needs. Not all classes had a copy of the planned curriculum posted, and some had copies of the previous month. Despite this each class was observed to be following a planned schedule that included moving from routine activities such as meals/snacks and diapering, to more curriculum focused activities such as teacher lead small groups, self-directed center play, or teacher lead large group activities. Interactions were mixed during the visit with most teachers presenting as very positive and energetic using encouraging tones and word choices. Others used approaches that were directive and in response to behavior. One classroom presented an example of the range with one children directing a child to not take their shoes off because they were not going to help the child put them back on. The other teacher in the classroom then followed up with a more proactive approach of reminding the children of the times

when they do take their shoes off.

Good health and safety practices were observed with the teachers and children washing their hands as required following restroom use, before eating or handling food, and other times they were soiled. Teachers were observed to assist children either with reminders, or hand over hand assistance to ensure that they washed effectively. I was able to observe several diaper changes and other than not degloving between handling soiled and clean items staff did follow the posted procedures. When cleaning changing stations, tables, and other surfaces the staff used chemical cleaners appropriate for the task whether sanitizing or disinfecting, and followed the label directions when doing so. Staff did wait for children to be out of the immediate area when using chemical cleaners. Chemical cleaners and medications were stored where they were not accessible to children. Good safe sleep practices were observed for infants under 1 year of age.

Good food handling and service practices were observed on the day of my visit with the center just finishing breakfast service. Staff were observed to wear food service gloves when handling and serving food. While the teachers did not eat with the children they did provide supervision at the tables. A copy of the planned menu which identified a good variety of nutritious meal options was posted and followed. The kitchen and storage pantry were observed to be clean with no evidence of insect or rodent infestation. Both refrigerated and dry pantry items were properly stored in sealed and covered containers that were labeled.

The center has a porch with a railing that is used for an outdoor space for the infants directly accessible from the older infant room. The other children make use of a more traditional playground space that is fully enclosed and divided into three areas by fencing. The fencing was observed to be in good repair. The three areas are established for age groups with toddler, preschool, and school age spaces. Each has various equipment including climbing structures, swings, and other materials such as balls, sand play, and riding toys. The equipment was observed to be good repair but there were some loose connecting bolts on the elevated tunnel feature of the preschool playground. While not compromising the structural integrity of that element those bolts do need to be tightened. Each space makes use of different fall surfacing with turf over sand in the toddler space, rubber mulch in the preschool, and woodchips in the school age spaces. The loose fill materials of the rubber mulch has been displaced, and the wood chips have compacted and composted such that both need to be supplemented to ensure a good depth of material.

All required notices and postings were present for No Smoking, Consultant Contact, Mandatory Abuse Reporting, and the License Certificate. Evacuation signage, hand washing, and diapering notices were also present. A random sample of child files were reviewed and compared to the self-audit which was found to be accurate and identified that files were complete with only those that had recently expired physicals needing to be updated. A random sample of staff files were also reviewed and compared to the self-audit completed by the center which was again found to be accurate and identified that all files contained all required information which was up to date. Inspection logs and certificates were available and current. The center last conducted Radon Testing earlier in 2025 and all results were below the 4.0 cutoff limit and the center does not have a mitigation system. The center is currently participating in the IQ4K program which seeks to implement best practice recommendations. The center is rated as a Level 3 program out of a possible 5 Level scale

3. Identify the aspects that fall below the standard

109.11(2)a: The center will provide sufficient and safe indoor play equipment, materials, and furniture. It must meet the developmental, activity and special needs of the children.
-- Toys with small parts that could be easily break off which would be less than 1 1/4 inches diameter and 2 1/4 inches length would be considered choking hazards and were present in classrooms serving children under 3 year of age. These need to be removed to classrooms serving older children. In addition an employee purse was observed to be hung on a low hook in the classroom being used by the 4 year old children where it would be accessible. Purses, diaper bags, and other personal belongings that may contain items or which could pose a safety risk to children need to be stored in areas where they are not accessible to children.

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

The teachers in the 2 year old classroom where the toys with small parts that could be choking hazards stated that they

would go through the toys and materials present later that day and remove those items which were identified.

Laura stated that she would remind all staff to store their purses and items in cabinets or other locations where they are not accessible.

5. Special Notes/Recommendations

A full license is recommended at this time. At least one visit will be made to the center during the next year.

Date: 09/10/2025

HHS Licensing Consultant: Ray Salsbury

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**.