Health and Human Services

Iowa Department of Health And Human Services

CHILD CARE CENTER ANNUAL EVALUATION

Name of Center: Allison Little Lambs Child Care

Provider No.: 46013

Address: 721 Cherry St, Allison, IA, 50602

County: Butler

Director's Name: Ashley Ludeman

On-Site Supervisor:

Phone Number: 3192672242

E-Mail: ashleyjludemann@gmail.com

HHS Visit Date: 10/02/2026

Licensing Period: 12/01/2025 to 12/01/2027

Fire Inspection:

Date Inspected: 09/01/2024

Comments:

Report Visit Type:

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

License Type:

- [X] Full
- [ ] Provisional

Quality initiative:

Quality Rating: 1

- [ ] Accrediation

Program Duration:

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

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HOURS:	*Year-round*	*School-Year*	*Summer Only*
Sunday			
Monday	5:45 AM to 6:00 PM		
Tuesday	5:45 AM to 6:00 PM		
Wednesday	5:45 AM to 6:00 PM		
Thursday	5:45 AM to 6:00 PM		
Friday	5:45 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	8	14	8	8	38
Summer					0

1. Basic Overview

An unannounced annual visit was made to Allison Little Lambs Child Care in Allison on 10-02-26 where I met with center director Ashley Ludeman. Ashley took over as the director of this program in April 2024 and is well qualified for the position having a Bachelor degree in Leisure, Youth & Human Services, extensive experience working in child care since 2008, and on-going professional development. The program operates out of a free standing building and has been in operation since 2015. The program did close for a brief period in early 2024 to reorganize which did include hiring Ashley. The program is operated as a non-profit entity overseen by a board of directors. There are 32 children currently enrolled in the program served by 10 staff. All aspects of the program subject to licensing standards were reviewed during the visit.

The general layout and design of the center and classrooms remains the same as observed in prior visits. The center utilizes three classrooms established by age for infants, toddlers, and preschool/school-aged children (PS/SA). It was noted that staff identified the toddler room served children 12 to 36 months though currently all children were at least 18 months of age or older. It was reviewed that licensing standards does allow combinations of children that are at least 18 months of age with older children when it is developmentally appropriate the children under 18 months of age would need to continue to be served in the infant room. Each room was observed to be clean with no issues related to maintenance noted. Each room has windows along the exterior walls that provide natural light, a view of the outdoors, and ventilation. Each room has a direct exit to the exterior for emergency egress which were clear of obstruction and opened easily. Each classroom has bathroom facilities directly off the programming space so that children do not need to leave the room, and additional restroom facilities are located off main corridors. The infant room and toddler room also have diaper changing stations present in the room. Each room has additional sinks in the room that allow for hand washing, and separate sinks that can be used for food preparation related activities. The program has a basement which is used as an emergency shelter. Classrooms are arranged to create activity centers through the placement of furniture and play structures which were

arranged such that it did not create any blind areas and provided the children with room to move and play.

2. Identify Observed Strengths of the program

Programming & Interaction:
Each classroom had a copy of the daily schedule and lesson plan posted. The lesson plans identified general focus themes, and specific learning concepts and activities. In addition the infant room also had child specific developmental goals posted for each child.
Good interactions were observed in each classroom with the teachers being actively engaged with the children presenting the curriculum and attending to their needs. This included activities such as feeding/changing infants, taking the toddlers on a walk, and presenting group learning activities for the preschool age children.
The center uses positive behavior management approaches that include routines, recognition of positive behavior/praise, reminders of expected behavior, and redirection. The teacher in the preschool room also normalized and validated child choices that were not disruptive, and provided guided problem solving to help children identify appropriate options.
Ratio was maintained in classrooms as required by age in the classrooms, and with having an additional teacher accompany the toddlers when they went for their walk.
All teachers were observed to present a positive and engaging attitude throughout the visit.

Health & Safety:
I was able to observe several diaper changes during the time of the visit and diapering procedures do need to be reviewed. Ashley did observe one issue and addressed it with the staff, and other practices were reviewed but which were repeated when observing subsequent diaperings.
Good hand washing practices were generally observed with staff assisting younger children with washing their hands. During the visit one preschool age child was observed to use the restroom and not wash their hands afterward. While the teacher did inquire if the child had washed and the child stated they had, the arrangement of the room and the positioning of the teacher at the time was such that the teacher was unable to observe the child to verify handwashing.
Medications were properly labeled and stored.
First aid kits are maintained in each classroom and stocked with items necessary to address most common first aid needs. A first aid kit was taken with the group when the toddlers went for their walk.
Safe Sleep practice were followed for infants under 1 year of age. Older children make use of cots and cover sheets were present.
Toys and equipment were appropriate to the ages of the children present with items that could pose a choking risk removed from classrooms serving children under 3 years of age.

Playground:
The center does have an attached playground which is fully enclosed by chain link fencing which was in good repair.
The playground is divided into two areas with one for infants and toddlers, and one for older preschool and school age children. The playground area for the older children has a large commercial grade climbing structure which was installed in 2023 and which is in good repair. Rubber mulch is used for fall surfacing and a good depth of material was present. A paved riding track was installed which is also used to define the fall surfacing area. A raised digging/sand play area is also present.
The toddler playground space does not having any fall surfacing and all toys present were ground use options.
A constructed shade structure using wood lattice panels and a heavy mesh tarp was present.

Nutrition:
The center has a full kitchen and meals are prepared on-site. A copy of the planned menu was posted and identified a good variety of nutritious meal options.
The breakfast that was served was consistent with what was planned, but lunch was modified due to not having the required ingredients.
Good food storage and handling practices were observed in the kitchen but foods stored in classrooms were not properly stored.
Meals are served in the classrooms with the teachers portioning the meals for the children using measured scoops, and food service gloves.
Staff did eat with the children and provided supervision at the tables.

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Administration:
All required notices for No Smoking, Consultant Contact, License Certificate, and Mandatory Abuse Reporting were posted in an area that was readily visible and accessible to all parents and visitors. Other required postings for emergency evacuation, emergency contacts, diapering procedures, hand washing procedures, curriculum, and daily schedule were also present.
The center is using a combination of the Brightwheel electronic file management system and hard copy file records.
Child files were reviewed and found to contain all required information. Response plans were present for children with identified health concerns. Infant daily sheets are completed using the communication application and the staff were doing an excellent job of using photos as a means to show daily activity and disposition.
Staff files were reviewed and found to contain all required information.
Inspection logs and certificates were available and current.
The center parent handbook was reviewed and while all required written polices were present several did need to be expanded to ensure that all required elements were included.

3. Identify the aspects that fall below the standard

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.
-- During the visit staff were observed to not deglove between handling soiled and clean items. The center is currently using a bleach water solution and staff were observed to use this in a 1 step process. Both issues were identified and guidance provided by Ashley during the visit yet were continued to be observed during subsequent diaper changes.

109.13(5)b: Sanitary and safe methods in food preparation, serving, and storage sufficient to prevent transmission of disease, infestation, and spoilage are followed.Staff preparing food that have injuries on hands wear protective gloves.Staff serving food use clean serving utensils and have clean hands/wear protective gloves.
-- Food items maintained in classrooms were not properly stored with bulk packaged items having the packaging left open or rolled closed. All food items whether intended for consumption or not must be stored in air tight sealable food grade containers labeled with the contents if not readily identifiable, and the date it was placed in storage.

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

Ashley had provided guidance to the staff member that was observed to not follow required diapering procedures and stated she would continue to monitor that employee for compliance and retrain as needed.

The center does have materials present to properly store foods maintained in classrooms and Ashley stated she would ensure that staff have supplies and make use of them.

5. Special Notes/Recommendations

A full license will remain in effect at this time. Please provide a written response to the licensing consultant identifying a plan of action to correct and maintain those aspects cited as not meeting licensing standards and identifying an anticipated date of compliance. At least one visit will be made to the center during the next year.

Date: 10/06/2026

HHS Licensing Consultant: Ray Salsbury

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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**.