Iowa Department of Human Services
CHILD CARE CENTER EVALUATION AND RECOMMENDATION FOR LICENSE

Name of Center: West Town Charlie Brown **Enrollment:** 240 **License ID No. (Reapplications)** 22023

Street: 1780 S Monroe Ave **City:** Mason City Iowa **Zip** 50401 **County:** Cerro Gordo

Mailing Address: 1780 S Monroe Ave, Mason City, IA, 50401

Director's Name: Ashley Larsen **Phone Number:** 641-424-0065

On-Site Supervisor(s): Kris Tabbert (director), Amy Monahan (asst. director) **E-Mail:** westcb@charliebrownpreschools.com

Date(s) of Visit: 06-24-2025

X **Licensing Visit** X **Unannounced Visit** **Off Year Visit** **Administrative Change**

LICENSING VISITS

New Application X **Re-Application** **NA**

Signed Application (470-0722) Received **Yes** **No** X **NA** **Date Signed:**

FIRE INSPECTION **State** X **Local** **NA** **Is Fire Inspection Approved?** X **Yes** **No** **NA**

Date Inspected: 07-01-2024

Comments :

LICENSE TYPE: X **Child Care** **Preschool (ages 3-5 meets three hours or less per day)**

Financial Type: Profit X Non-Profit NA

Accredition: Accredited NAEYC NSACA Other X NA

Program Serves: X Infants (0-23 mo.) X 2 Years X Preschool-Age X School-Age

X Get-Well Evening Care X Special Needs

SCHEDULE: X Year-round School-Year Summer Only

HOURS:	*Year-round*	*School-Year*	*Summer Only*

LICENSE CAPACITY	Infants	2 Years	Preschool	School-Age	Capacity
General	51	36	87	57	231
Summer					0

QRS Rating: 3

RECOMMENDATION FOR LICENSE:	
X	**FULL** license from 07-01-2025 to 07-01-2027
	PROVISIONAL license from
	DENIAL of initial application
	SUSPENSION of license
	REVOCATION of license

Licensing Consultant: Raymond Salsbury **Date:** 07-01-2025

I. IF CURRENT LICENSE IS PROVISIONAL, IDENTIFY THE CORRECTIVE ACTIONS

II. IDENTIFY THE AREAS OBSERVED ON THE VISIT:

An unannounced annual visit was made to the West Town Charlie Brown center on 06-24-25 where I met with the Center Director Kris Tabbert. Ashley Larsen is the program Executive Director, and Amy Monahan is the center Assistant Director . All are well qualified for the positions they hold based on their experience, education, and on-going training in early childhood care. Ashley oversees 3 centers operated under the Charlie Brown programs. Kris has been the director of this center since 2010. Amy became the assistant director in 2022. The center moved to the current building in November of 2017. The center provides daycare and formal preschool programming for infants through school age children. The center does partner with the Mason City school district to provide services under the 4 Year Old Preschool Grant. There are 240 children enrolled in the center served by 33 staff. All aspects of the program subject to licensing standards were reviewed.

The general layout and operation of the center remains the same as in prior reports. The center has classrooms determined by age with 3 classrooms for infants, and two classrooms for 2 and 3 year old children that are split by developmental level. The program also has a separate classroom for the formal 4 year old preschool program which was not in operation/use on the day of my visit due to the summer break. The school age children have classroom space on the lower level and the upper level with a staircase that connects the two. Each room was observed to be clean with only minor maintenance issues such as pealing paint or drywall damage that did not present an immediate safety concern. All but 3 of the classrooms (older 2 year olds, and the 3 year old classrooms) have direct secondary egress to the outdoors. The 3 year old classrooms do have connecting doors to other classrooms, and the 2 year old room has a second exit opening on to the main access corridor. Each classroom has access to restrooms directly from the classroom so that children do not need to leave the room. The infant rooms, 2 year old, and 3 year old classrooms also have changing stations present in either a connecting pass-through room, or attached bathroom. Each room has additional sinks available to facilitate hand washing. Each room has large windows along the exterior walls that provide ample natural light and a view of the outdoors. Each room makes use of furniture and play structures to define activity centers that are arranged so as not to create any blind areas.

Classrooms serving children under 3 years of age had removed most of the items or toys with small parts that could easily break off and be a choking hazard but a few toys such as cars with small wheels were still present. It is understood that as materials are replaced, donated, or brought into classrooms by children these may re-appear but staff do need to be aware of the concern and conduct periodic reviews to ensure toys and materials are in good repair and appropriate to the children present in the room. Good interactions were observed throughout the center with all teachers being very engaged the children and implementing the planned curriculum. This included the teachers either playing with the children, attending to their needs, or presenting planned curriculum activities. The teachers did follow the planned schedule both for more defined activities such as the established playground schedule which rotates planned time use by classroom/age levels, and more informal programming such as self-directed and teacher lead activities in the classrooms. Overall the teachers all used positive and encouraging tones of voice and words when speaking to the children, however one classroom did stand out where the teacher used a gruffer tone and more directive word choices. While not rising to the level of being a licensing concern it was distinct enough that it was reviewed with Kris as something that could create an issue for a child or parent who was new to the classroom and unfamiliar with the teacher. The center does use a positive behavior management approach to addressing behavioral concerns. This included the teachers using routines and reminders of expected behavior, redirection, and guided problem solving. The guided problem solving did have a social interaction foundation with teachers

helping children to use empathy and politeness when having issues with peers.

Good health and safety practices were generally observed but some practices do need to be reviewed. I was able to observe several diaper changes while at the center and established procedures were followed though one teacher did not deglove between handling soiled and clean items, and did not wash the infant's hands following the diaper change as required. When cleaning the changing stations staff did follow good disinfecting procedures but it was reviewed that applying a heavier saturation of spray to the surface would help to reduce the risks of disease transmission. Good cleaning practices were otherwise observed with the staff cleaning toys and equipment throughout the day, waiting for children to be out of the immediate area when using cleaning products, and storing chemical cleaners where they were not accessible to children. Good hand washing practices were observed with older children and staff washing their hands following restroom use, prior to meal service, and other times they became soiled. First aid kits are present and contain materials necessary to address most common first aid needs. Safe sleep practices were followed for all children under 1 year of age. During the visit one staff was observed to be feeding an infant under 6 months of age in a reclined position. This was addressed by Kris who reminded the classroom teacher that infants under 6 months need to be held in an upright position when feeding.

The center has 3 playground spaces with one for infants and toddlers, one for preschool, and one for school age children. Each had a good variety of equipment and shade structures were either created by installed awnings or covered patios. The infant space uses artificial turf over loose fill beneath the climbing structures and swings present. The preschool space uses foam tiles under a climbing structure, and replaced the pea grave beneath the swings with artificial turf over loose fill. The climbing structure in this area did have a loose anchor bolt that needs to be tightened but which did not create an immediate safety concern such that children needed to be prevented from using the structure. The school age space uses pea gravel for fall surfacing which developed a hardpan layer and either needs to be aerated or supplemented to maintain a loose material. Kris did identify that the center is looking at options to replace the material. The climbing and play structures in the preschool and school age areas were all observed to be in good repair. All playground spaces are enclosed by chain link fencing which was observed to be in good repair. The preschool playground area also has a storage shed for additional toys and materials. One issue that was noted during the visit is that the preschool playground does have an L shape wrapping around the building. At one point all of the teachers were positioned such that they could not observe the children on leg of the playground and this was where the storage shed was located. The shed was positioned such that it was close to the building and children were observed to be squeezing themselves into this space which did present an entrapment risk. Staff do need to ensure that they are positioned so as to be able to provide direct line of sight supervision to children at all times.

The center has a full kitchen and meals are prepared on-site. The kitchen was observed to be clean. While there were traps present there was no indication of any insect or rodent infestation. Good food storage, preparation, and handling practices observed on the day of my visit both in the kitchen and classrooms. Meals are pre-portioned and staff used measured scoops to ensure that each child was provided a full serving. Meals are served in the classrooms and the teachers do provide supervision at the tables. A menu is posted and identified a good variety of nutritious meal options. The planned menu was followed on the day of my visit with one substitution that was noted on the planned menu.

In reviewing administrative records all required notices were posted in an area readily accessible to all parents and visitors. A random selection of child files were reviewed and compared to the self-audit completed by the center which was found to be accurate. The self-audit identified 12 children that needed an updated physical. A random selection of staff files were also reviewed and compared to the self-audit completed by the center which was again found to be accurate. In reviewing those files the self-audit identified 2 that needed an updated physical. Inspection logs and certificates were available and current for playground, radon, and carbon monoxide. Documentation of emergency drills was missing for both fire and tornado drills for the months of February and May 2025. As a reminder these drills must be conducted and logged each month. Documentation of fuel burning appliances was not available on the day of my visit.

III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:

Kris identified that the center has been very stable with regard to staffing, child enrollment, and program presentation. This has allowed staff to attend on-going training and become familiar with the center programming. One example of this positive impact was in the 2 year old classroom where the teacher had identified that she had recently received information and training from the Child Care Resource and Referral consultant which she had implemented in her classroom. This included a large motor skill activity of "Walk with a doll" where the children were given dolls to carry as a way to build balance, coordination, and strengthen large leg muscles. While this activity had a specific developmental focus and impact it was an activity that in application created a positive play environment for the children where many of them were excited to show me their dolls when entering the room.

IV. IDENTIFY THE ASPECTS OF OPERATION THAT FALL BELOW THE STANDARDS REVIEWED:

109.9(1)b: All files contain a pre-employment physical exam report completed within six months prior to hire and at least

every three years. Physical exams shall be documented on form 470-5152, Child Care Provider Physical Examination Report.
-- Number not in compliance: 2

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.
-- Number not in compliance: 12

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.
-- Documentation of drills not present for the months of February and May 2025.

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.
-- Infants hands were not washed immediately following diapering before being returned to the programming area.

V. SPECIAL NOTES/RECOMMENDATIONS:

A full license is recommended this time. Please provide a written plan to correct and maintain those issues cited as not meeting licensing standards and an anticipated date of correction. At least one visit will be made to the center during the next year.

*Note: If you are the Child Care Center Director and you feel something is unclear or unjustly cited, please contact your DHS Licensing Consultant to discuss the issue. The child care director may also send a response which will be placed in the licensing file.

*Note: If you are a member of the general public, there may be additional information contained in the public file. You may contact the DHS Licensing Consultant to inquire.