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

Name of Center: Washington Charlie Brown PS and CC **Enrollment:** 147 **License ID No. (Reapplications)** 37114

Street: 700 N Washington Ave **City:** Mason City Iowa **Zip** 50401 **County:** Cerro Gordo

Mailing Address: 700 N Washington Ave, Mason City, IA, 50401

Director's Name: Ashley Larsen **Phone Number:** 641-423-6029

On-Site Supervisor(s): Kristi Peterson **E-Mail:** washingtoncb@charliebrownpreschools.com

Date(s) of Visit: 08-07-2025

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: 10-11-2021

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

Get-Well Evening Care 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	40	28	47	52	167
Summer					0

QRS Rating: 2

RECOMMENDATION FOR LICENSE:	
X	**FULL** license from 10-01-2025 to 10-01-2027
	PROVISIONAL license from
	DENIAL of initial application
	SUSPENSION of license
	REVOCATION of license

Licensing Consultant: Raymond Salsbury **Date:** 08-13-2025

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 Washington Charlie Brown center on 08-07-25 where I met with center director Kristi Peterson. Kristi is well qualified for the position having extensive experience with working in early childhood care. The program is located in the old Washington elementary school building in Mason City. The center is operated as a non-profit program overseen by a board of directors as part of a group of daycare centers in the area with Ashley Larsen as the Executive Director. The center provides preschool and daycare programming to infants through school age children. There are 147 children enrolled in the program served by 26 staff. All aspects of the program subject to licensing standards were reviewed during this visit.

The general layout and design of the building and classrooms remain the same as in prior reports. Classrooms are determined by age with infants divided into 3 rooms by age and developmental level. All class rooms were observed to be clean with only minor maintenance issue that did not rise to the level of being a safety concern. The infant rooms have secondary entrances that provide direct egress to the outdoors, as does the Woodstock room which serves the 4-5 year old children. All emergency exits were clear of obstruction and opened easily and freely. Each room has a large bank of windows along the exterior walls that provide natural light, a view of the outdoors, and in the older age classrooms serve as secondary egress. Each classroom has sinks in the room to allow for hand washing. Each room with the exception of the school age room has toilets available in the classrooms so that children do not need to leave the room. Additional toilets are located off the main hallway, and directly across the hall from the school age classroom. Classrooms serving younger children also have changing stations present. Each room is divided into activity centers through the use of furniture and play structures which are arranged such that they do not create any blind areas in any of the rooms.

Each activity center had a good variety of toys and materials that were appropriate to the ages of the children present. Those items that would be considered choking hazards had been removed from classrooms serving children under 3 years of age. A copy of the daily schedule and curriculum were posted in some classrooms but not all. Despite not being posted each classroom did follow an established schedule moving between activities such as self-directed center play, large motor outdoor/gym play, lunch, and nap time. Good interactions were observed on the day of the visit. The school age children were absent from the center for a planned field trip to the park and "splash pad". For the children that remained the staff with the younger preschool children were observed to use a combination of observational supervision moving through the group as the children engaged in play outside or in the gym, and also joining the children in their play as a way to focus the activity and interactions. In the young infant room the teachers were observed to be in different areas of the room with children either providing for their direct care needs such as diapering, feeding, or rocking them to sleep, or engaging them in activities such as floor time or playing with them. The center continues to use positive behavior management techniques to encourage and reinforce positive behavior choices such as routines, reminders, recognizing positive behaviors with praise, and redirecting children. When speaking to the children all staff were observed to use calm tones, and supportive word choices. Ratio was maintained in classrooms as required by age, and it was confirmed that additional staff accompanied the children that had gone on the off site activity. Staff did escort children and provided assistance as needed when the children made use of the restroom facilities located off the main corridors.

While the center does have established health and safety polices some practices do need to be reviewed. I was able to

observe diaper changes during the visit and the required procedures postings were not present by all changing stations as required. Staff did generally follow the required procedures but examples of observed concerns included one staff that did not wear gloves when doing the diaper change. While gloving is not required if staff chose to not apply gloves then they should wash their hands or at a minimum use a hand sanitizer between handling soiled and clean items which was not done. Another observed concern was with regard to use of cleaning products. During the visit one teacher was observed to hold a child while spraying the changing station surface. In another situation a teacher used the same disinfecting product used for changing stations to treat feeding tray surfaces prior to meal service. Children should be placed out of the immediate area when using chemical cleaners, and the product being used did identify that a potable water rinse is required for food contact surfaces which was not done until staff were informed that was required. Chemical cleaners, medications, personal belongings, and other items that could present a health or safety risk to children were stored in areas where they were not readily accessible. All over the counter medications were properly labeled with the name of the individual to whom it belonged, and good documentation was maintained for children receiving medications. The center has a primary first aid kit but smaller travel first aid bags are kept in each classroom. The center does have children with identified allergies and response plans were present in the children's files and classrooms. Hand washing practices were mixed with staff not washing infants hands immediately prior to meal service. In other settings the staff did follow good practices with ensuring that the children not only washed their hands after restroom use, but assisting them to ensure they did so in an effective manner. Good safe sleep practices were observed for children under 1 year of age. This included one of the volunteer "grandmothers" that was rocking a child which fell asleep and she did notify the staff who then transitioned the child to a crib. Good feeding positioning was also observed with younger infants where a staff member feeding an infant under 6 months of age not only held the child in an upright position but was able to articulate the reasons for why that positioning is required.

The center has several playground areas with one for the toddlers, one for the preschool and school age children, and a third playground area is available on the facility property which would be more appropriate for older school age children. The preschool playground has an arched wall climbing structure, experience tables, and a large awning shade cover. Foam tiles are used for fall surfacing for that area. The toddler playground has a paved area, some smaller climbing structures, and bucket swings. A stabilized rubber mulch is used for fall surfacing. It was noted that the S hooks used to attached the swing seats to the chains do need to be closed more so that the gap between the ends and the barrel of the hook is less than 1.5mm or about the thickness of a dime. The third playground space has several climbing structures which were observed to be in good repair with the exception of a chain climbing net with a broken link allowing the net to have a large gap and sag. This does need to be blocked off and not used until repairs can be made. Wood mulch is used for fall surfacing and a good depth of material was observed with additional mulch available to supplement as needed. Shade is provided by a number of mature trees. There are also large open grassy areas, and paved areas where the children can play.

The center has a full kitchen and meals are prepared on-site. The kitchen was generally observed to be clean with good food storage and handling practices in place. One issue that was noted was that a couple of bags of bulk items had been rolled closed in the infant room in a closet and some spilled food items were also present on the floor. It was reviewed that these must be placed in air tight sealable food containers as a way to reduce the risk of being an attractant to insects and rodents, and spoilage. A copy of the pre-planned menu is posted and identifies a good variety of nutritious meal options. Meals are served in the classrooms and the teachers were observed to use food service gloves and measured scoops when plating food. The teachers did not sit and eat with the children but did provide supervision at the tables.

In reviewing administrative records all required notices were posted in an area readily accessible to parents and visitors. The center does use an electronic file management system for child files but due to a city wide outage of internet connectivity those records could not be reviewed. The center did have a binder with hard copy printouts of emergency contact information for all children. A random sample of 25% of staff files were selected for review and all reviewed files were found to contain all required documentation. The center policy handbooks have been previously reviewed and found to contain all required written policies. All required inspection logs and certificates were available and current.

III. IDENTIFY THE OBSERVED STRENGTHS OF THE CENTER:

Kristi identified that the center has completed several maintenance projects over the past year including repairs to the roof that was leaking, repairs to the AC unit for the kitchen, and adding new mulch to the school age playground.

The center has also engaged in a fund raising event, and grant opportunities to replace fencing around the playgrounds, and acquire new equipment for classrooms.

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

109.10(6): Children's hand washing: Center shall ensure staff assist children in personal hygiene.

-- Infants were observed to not have their hands washed immediately prior to meal service.

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.
-- A chemical cleaner was used on feeding trays where the label identified a potable water rinse was required but which staff did not do until it was identified as being needed. Foods in classroom(s) were observed to not be stored in air tight sealable food grade containers after the original packaging seal had been broken.

V. SPECIAL NOTES/RECOMMENDATIONS:

A full license is recommended 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.

*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.