Health and Human Services

Iowa Department of Health And Human Services

CHILD CARE CENTER ANNUAL EVALUATION

Name of Center: Kingdom Kids of St. Olaf

Provider No.: 52070

Address: 239 N 11th ST, Fort Dodge, IA, 50501

County: Webster

Director's Name: Kathy Dencklau

On-Site Supervisor: Sherri Morud, Keely Draper

Phone Number: 5155762103

E-Mail: daycare@stolaffd.com

HHS Visit Date: 04/03/2026

Licensing Period: 05/01/2025 to 05/01/2027

Fire Inspection:

Date Inspected: 04/11/2024

Comments: The fire inspection was identified as being temporary requiring corrections. Contact was made with the fire marshal on 04-22-25 to inquire if an updated inspection had been completed. The fire marshal identified that he believed the center had been issued a full inspection approval.

Report Visit Type:

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

License Type:

- [X] Full
- [ ] Provisional

Quality initiative:

- [ ] Accrediation

Program Duration:

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

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HOURS:	*Year-round*	*School-Year*	*Summer Only*
Sunday			
Monday		6:30 AM to 5:30 PM	
Tuesday		6:30 AM to 5:30 PM	
Wednesday		6:30 AM to 5:30 PM	
Thursday		6:30 AM to 5:30 PM	
Friday		6:30 AM to 5:30 PM	
Saturday			

Program Population Served:

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

LICENSE CAPACITY	Infants	2 Years	Preschool	School-Aged	Capacity
General	23	16	82	18	139
Summer					0

1. Basic Overview

An unannounced annual visit was made to the Kingdom Kids of St. Olaf center on 04-03-26 where I met with the center director, Kathy Dencklau. Sherri Morud and Keely Draper are assistant directors/on-site supervisors. All are well qualified for the positions they hold based on their experience, education, and on-going training in early childhood care. The program is located in the St. Olaf Lutheran Church in Fort Dodge and occupies classrooms on several levels of one wing of the church. The program is operated as a non-profit program overseen by a board of directors from the church. The program initially opened in 2023 providing limited services for after school programming for school age children only and expanded in 2024 to provide full range programming for infants through school age children. There are currently 132 children enrolled in the center served by 32 staff. All aspects of the program subject to licensing standards were reviewed during the visit.

The general layout and operation of the program remains the same as in the prior visit. The program uses space on three levels of the building with infants and 2 year old children housed on the ground level, 3 year old children housed on the basement level, and 4 year old and school age children housed on an upper level. There are 13 rooms available for use by the center but several are not being used at this time. The center has one room for younger infants, one for older infants, and separate rooms for the age groups of 2, 3, 4, and school age children. The infant and two year old rooms have direct secondary egress from the classrooms to outdoors. All exits were observed to be clear of obstruction and opened easily and freely. Those rooms also have access to restrooms directly from the programming space as well as changing stations and secondary sinks for handwashing. The concern for sinks having high hot water temperatures has been addressed and all sinks were measured to have temperatures set below the 120 deg. F. cutoff limit. Restrooms for the older age classrooms are located outside the classrooms off the main access corridors. Each classroom has windows along the exterior walls that provide natural light, ventilation, and for those on the ground and upper levels a view of the outdoors. Each room was

observed to be clean. Each classroom is arranged with activity centers created by the placement of furniture and play structures which did not create any blind areas.

2. Identify Observed Strengths of the program

Each classroom had a copy of the daily schedule and planned curriculum posted. Good interactions were observed during the time of the visit with all of the teachers being actively engaged with the children attending to their needs, playing with them, or presenting the planned curriculum. All staff presented positive attitudes and used calm tones of voice. Many of the staff and children appeared to have very close and positive relationships in which they talked about their home life, and engaged in joking with each other. The center as a whole continues to make use of positive behavior support approaches to behavior management such as the use of routines, reminders, transition activities, redirection, and problem solving. There were very few behavioral issues that were observed during the visit but those that did arise were easily addressed by staff. Ratio was maintained in classrooms as required by age.

Good health and safety practices were observed on the day of my visit. I was able to observe several diaper changes in different classrooms during the time of the visit and a;; staff followed established procedures. Good hand washing practices were observed with staff ensuring that children washed their hands as needed and assisted as needed to ensure they washed in an effective manner. Chemical cleaners, medications, and personal belongings were stored where they were not readily accessible to the children. Allergy and other special health care instructional guides were posted in classrooms for those children that needed them. Safe sleep practices were followed for those children under 1 year of age. There were a couple of cribs that had items attached to the rails but these were not in use and it was reviewed that they would need to be removed before use by children for sleeping. Older children make use of cots with appropriate cover sheets and bedding. First aid kits are maintained in each classroom and had a good variety of materials necessary to address most common first aid needs. Toys and materials were generally appropriate to the children present with a solitary item or two in classrooms serving children under 3 years of age that had parts that could break off and become a choking hazard. The center had removed the majority of the toys that were identified as a concern in the prior visit and it was reviewed that the presence of isolated items does illustrate the risk of items migrating into the rooms where staff need to continue to be vigilant in reviewing the materials regularly.

The center does make use of the church kitchen but maintains separate food storage facilities. Good food storage practices were observed for both dry pantry and refrigerated items. The kitchen was observed to be clean with no indication of insect or rodent infestation. Good food handling and service practices were observed with the teachers wearing food service gloves, and using measured scoops when portioning meals. A copy of the planned menu was posted and was consistent with the meal provided. The children eat in their classrooms and while the teachers did not eat with the children they did provide supervision at the tables. Good feeding positioning was observed for infants who were held in an upright position.

The center does have a large outdoor playground area. Due to the high commercial nature of the setting the playground is fully enclosed by fencing. There areas along the north perimeter of the fence where the ground had settled creating a gap between the fence and the ground that would be an entrapment hazard had dirt added to address that concern. The playground has a large commercial grade climbing structure which was observed to be in good repair. A unitary pour in place fall surfacing is used beneath climbing structures. There is a paved riding track, activity centers, and additional toys available for the children to play with. Large shade structures are present and were donated by a local dermatologist.

In reviewing administrative records the required postings for No Smoking, Consultant Contact information, Mandatory Child Abuse Reporting, and the License Certificate were present and posted in an area readily accessible to parents. Other required postings for emergency evacuation, emergency numbers, hand washing, diapering, daily schedule, lesson plans, and menu were also present. The center is currently using the Playground communication application to enroll and track information. The system does have an option to conduct a self-audit. Kathy stated that there a number of files which need updated information such as physicals and she has sent notice to all of those parents to provide updated information by the end of April. A random selection of 25% of staff files were reviewed and all were found to contain all required information.

All required inspection logs and certificates were available and current. Kathy it has been previously confirmed that the carbon monoxide detection is integrated into the fire alarm system. The center parent handbook was reviewed and found to contain all required written policies though some needed to be expanded. This included Transportation which only referenced fieldtrips, Health & Safety regarding immunization exemptions, Incident Reporting for substantial changes in functioning and sexualized behavior, and Access policies regarding sex offenders.

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3. Identify the aspects that fall below the standard

None Cited

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

A list of required written policies with guidance on implementation was provided.

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: 04/20/2026

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**.