Health and Human Services

Iowa Department of Health And Human Services

CHILD CARE CENTER ANNUAL EVALUATION

Name of Center: The King's Kids Preschool

Provider No.: 18086

Address: 905 13th St SW, Humboldt, IA, 50548

County: Humboldt

Director's Name: Kelsey Wigans

On-Site Supervisor:

Phone Number: 5158900492

E-Mail: kingskidsiowa@gmail.com

HHS Visit Date: 09/17/2025

Licensing Period: 10/01/2025 to 10/01/2027

Fire Inspection:

Date Inspected: 06/08/2023

Comments:

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

Health and Human Services

Iowa Department of Health And Human Services

CHILD CARE CENTER ANNUAL EVALUATION

Program Population Served:

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

LICENSE CAPACITY	Infants	2 Years	Preschool	School-Aged	Capacity
General			67		67
Summer					0

1. Basic Overview

An unannounced annual visit was made to the Kings Kids Preschool on 09-17-25 where I met with the center director Kelsey Wigans. Kelsey is well qualified for the director position based on her experience and on-going training in early childhood education. The program is located in a wing of the Oak Hill Church in Humboldt and is overseen by a board of directors from the church. The program had previously been in operation and then discontinued operation for a brief period with Kelsey reopening the center in 2023. The program provides preschool programming only serving children 3 and 4 years of age with separate classes for each age group served by 3 teachers and several volunteers. Both classes were present on the day of my visit with each using different classrooms. All aspects of the program subject to licensing standards were reviewed during the visit.

The general layout of the building, and programming remains the same as in prior visits. The program has access to three classrooms with one used for more traditional programming with group learning, one with activity centers, and a larger classroom that is used for snack service, craft activities, and media presentations. The program also has access to a large indoor gymnasium for large motor skill play activities. Each classroom was observed to be clean with no issues related to maintenance or design. Each room has windows along the exterior walls that provide natural light, a view of the outdoors, ventilation, and secondary emergency egress. Each room has sinks in the classroom that provide for handwashing, and all but one of the classrooms have restroom facilities directly accessible from the room. For the classroom that does not have restroom facilities the children are escorted to a restroom in one of the other classrooms, or to the restrooms located off the main corridor space. Activity centers and equipment are arranged so as not to create any blind areas. The toys and materials present were observed to be in good repair and appropriate to the ages of the children present.

2. Identify Observed Strengths of the program

Good interactions were observed on the day of my visit with the teachers, and two volunteers being engaged with the children and presenting the planned curriculum. The center uses a curriculum plan that has a general learning theme each week, and also present several specific learning concepts of identified letters, numbers, colors, and shapes. These are presented in a manner that is focused on interaction with an example from the day of the visit where Kelsey had written the letters the class were learning on post-it notes which were then hidden around the room for the children to find. When talking to the children each teacher used calm and positive tones of voice and providing encouragement to the children. The center uses a proactive positive behavior support approach to behavior management with the use of routines, positive recognition/praise, and reminders of expected behavior. The teachers also had a focus on helping children identify natural consequences such the risk of injury or damage to equipment that could occur. This approach was very effective with no behavior issues arising during the visit other than a few minor situations that were easily resolved with simple redirection of the children. Ratio was maintained as required with at least one teacher present in the classrooms.

CHILD CARE CENTER ANNUAL EVALUATION

Good health and safety practices were observed during the visit. The teachers did ensure that the children washed their hands as needed and in an effective manner following restroom use, prior to snack service, and other times as needed. One example was with a teacher assisting a child with washing their hands after noticing the child putting their hands down their pants. Purses, chemical cleaners, and other items that could be a safety risk to children were stored in areas where they were not accessible to children. Tables were sanitized both before and after snack service. When using chemical cleaners to sanitize surfaces such as the tables where the children were eating the teachers did wait for the children to be out of the immediate area. First aid kits were present do contain items necessary to address most common first aid needs as well as supplemental items such as a response kit for the risk of accidental exposure to illicit drugs due to recent concerns of paraphernalia being found at local parks. Due to the limited hours of operation the center does not routinely administer medications but has policies in place should it become necessary. Response plans were present for children with identified health concerns.

Due to the limited hours of operation meals are not served but snacks are provided. The children take it in turn to provide snacks and a list of recommended snack items is provided to parents. The children did have snack during the visit and were provided with pretzels and bananas, and 100% juice. While the center does not know what snack options will be provided by parents beforehand a menu of the snacks that were served is maintained. A limited supply of snack items is maintained on site to supplement as needed and good food storage practices were observed during the visit. While the teachers did not eat with the children supervision was provided at the tables.

The center does not have a traditional outdoor playground but does have access to an indoor gymnasium with equipment that can be used for large motor skill activities. The program also has options for using grassy areas, sectioned off areas of the parking lot, or going for walks to community venues for outdoor programming.

In reviewing administrative information the required postings for No Smoking posting, Mandatory Child Abuse Reporting, and the Consultant Contact notice were present near the entrance used by parents. All other required postings including emergency evacuation, emergency contact numbers, handwashing, daily schedule, and program curriculum were present and posted. All child files were reviewed and found to contain all required information. All staff files were reviewed and found to contain all required information. The center handbooks were previously reviewed and found to contain all required written policies. All inspection logs and certificates were available and current with the exception of Fuel Burning Appliances, Radon, and a working carbon monoxide detector. Kelsey did note that the furnaces had been installed in the past year and that annual service has been scheduled prior to the start of the heating season. Kelsey also identified that Radon testing was schedule to be conducted over the Thanksgiving break. The center did have a carbon monoxide detector but the batter was dead, and it was noted that the unit was old enough that it exceeded the manufacturer date for replacement.

3. Identify the aspects that fall below the standard

109.11(8)b: Centers at ground level that use basement area as program space, or have a basement beneath program space: Testing and plan for remedy of radon is conducted.
-- The carbon monoxide detector was not functional on the day of the visit due to a dead battery. It was also noted that the unit exceeded the recommended replacement day identified by the manufacturer.

109.11(8)c: All centers: Annual inspection prior to heating season of all fuel-burning appliances to reduce risk of carbon monoxide poisoning and shall install one carbon monoxide detector on each floor that conforms to UL Standard 2034.
-- Documentation was not present on the day of the visit.

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

Confirmation was received on 09-18-25 that a new carbon monoxide detector had been installed.

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.

CHILD CARE CENTER ANNUAL EVALUATION

Date: 09/29/2025

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**.