



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF
LIFELONG EDUCATION, ADVANCEMENT, AND POTENTIAL
LANSING

Michelle Richard
ACTING DIRECTOR

Report Type : Renewal
Inspection Type: Renewal

Date of Inspection: 5/22/2024
Date of Report: 5/22/2024

| Licensee Name(s) | License Number |
|--|--|
| Northwest Michigan Community Action Agency Inc | DC150402347 |
| Capacity | Facility Name |
| 16 | NMCAA Preschool Charlevoix |
| Program Type | Licensee Designee(s) |
| Center | Karen P Lenaghan-Baughman Kimberly Jean Aultman Shannon E Phelps Teasha Shantal Lawson Kristin Lea Ruckle Kaylee Lovejoy Kelly A Sedwick |
| Central Administrator(s) | Program Director(s) Name |
| | Rebecca A Resch Qualifications: R 400.8113(7)(d) (9). Date PD Approved: 9/21/2022 |
| Facility Address | Mailing Address |
| 108 E Garfield, Charlevoix, MI, 49720 | 3963 Three Mile Rd, Traverse City, MI, 49686 |
| Facility Phone Number | Facility Email Address |
| 2313416211 | klovejoy@nmcaa.net |

Findings of the Inspection

A copy of this renewal inspection report and any associated corrective action plans is available on the Child Care Licensing Bureau [website](#) under [Statewide Search for Licensed Child Care Centers and Homes](#). A description of when renewal inspection reports are completed can be found under [Overview of Licensing Reports](#).

The renewal inspection involved a review of all applicable child care center [administrative rules](#) and [statutes](#). Verification of compliance included direct observations of the physical environment and the program, discussions with staff, and a review of the center's records, including staff records and children's records. Staff records include background checks and training information. Children's records include child information cards, physical examination dates, and immunizations.

If you have any questions regarding the report, please contact licensing consultant, Codie Mayhew, at 231-342-5006. In the event that Codie Mayhew is not available and you need to speak to someone immediately, please contact the Child Care Licensing Bureau at 517-284-9730.

| Inspection Details | | |
|---|---|--|
| <i>Number of Rules/Statutes Reviewed</i> | <i>Number of Rules/Statute Violations</i> | <i>Number of Rules/Statutes where Technical Assistance was Provided</i> |
| 613 | 0 | 5 |
| <i>Number of Children's Records Reviewed : Number of Children Enrolled</i> | <i>Number of Child Care Staff Member Records Reviewed : Number of Staff Employed</i> | <i>Number of Volunteer Records Reviewed : Number of Volunteers</i> |
| 10 : 16 | 5 : 5 | 16 : 14 |
| <i>Number of Children Observed : Number of Children Present During Inspection</i> | <i>Number of Child Care Staff Members Observed : Number of Child Care Staff Members Present During Inspection</i> | <i>Number of Volunteers Observed a: Number of Volunteers Present During Inspection</i> |
| 13 : 13 | 2 : 2 | 3 : 3 |
| <i>Licensee Interviewed</i> | <i>Program Director Interviewed</i> | <i>Child Care Staff Members Interviewed</i> |
| Yes | Yes | Yes |


| Documentation of Required Inspections | | |
|---|---------------------------|-----------------|
| <i>Type of Inspection</i> | <i>Date of Inspection</i> | <i>Findings</i> |
| Fire Safety Provision's form signed by the superintendent | 4/10/2024 | A Rated |

| Technical Assistance | |
|-----------------------------|---|
| <i>Rule Number</i> | <i>Rule</i> |
| R 400.8161(7) | A written log indicating the date and time of fire and tornado drills must be kept on file at the center. |
| R 400.8134(4) | Guidelines for hand washing must be posted in food preparation areas, in toilet rooms, and by all hand washing sinks. |
| R 400.8310(2) | Carpeting is prohibited in food preparation areas. |
| R 400.8325(4)(b) | A residential dishwasher with sanitizing capability. |

| | |
|-------------------|--|
| R 400.8176(17)(b) | Bedding must not come in contact with other bedding. |
|-------------------|--|

| Hours of Operation | | | | | | |
|---------------------------|---------------------------|---------------------------|---------------------------|---------------------------|----------|--------|
| Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
| 07:30 AM To 3:00 PM | 07:30 AM To 3:00 PM | 07:30 AM To 3:00 PM | 07:30 AM To 3:00 PM | 07:30 AM To 3:00 PM | | |

| Bureau Recommendation |
|--|
| I recommend the issuance of a regular license. |

| | | | |
|---|--|------------|--|
| Approved By: | | | |
|  | | | |
| | | 05/22/2024 | |
| Codie Mayhew Licensing Consultant | | Date | |