



STATE OF MICHIGAN
 DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
 LANSING

GRETCHEN WHITMER
 GOVERNOR

ORLENE HAWKS
 DIRECTOR

November 3, 2022

Cara LaFaver
 Eastern Upper Peninsula ISD
 315 Armory Place
 Sault Ste. Marie, MI 49783

RE: License #: DC170381903
 Investigation #: 2022D0720008
 Superior Start- The School Readiness Center

Dear Ms. LaFaver:

I conducted a special investigation because the child care licensing division received a complaint against your facility that related to licensing rules or law. The allegations were related to the following:

R 400.8140 (3)	Discipline.
R 400.8155 (1)(b)	Child accidents and incidents; child and staff illness.
R 400.8155 (4)	Child accidents and incidents; child and staff illness.

The details of the allegations are in the attached report. To investigate the allegations, I completed an onsite inspection on 06/06/2022. I interviewed program director, licensee, licensee designee, caregivers, parents, and observed children.

As a result of this investigation, I found one violation.

R 400.8155	Child accidents and incidents; child and staff illness.
	<p>(4) If a center becomes aware that a staff member, volunteer, or child in care has contracted a communicable disease, then the center shall notify parents and provide all of the following information:</p> <p>(a) The name of the communicable disease the children were exposed to.</p> <p>(b) The symptoms of the disease.</p> <p>(c) Prevention measures as recommended by the U.S. Centers for Disease Control and Prevention (CDC) at the following website: https://www.cdc.gov/DiseasesConditions.</p>

I recommend no change to the current license status. Due to the violations, you must send us a corrective action plan by 11/24/2022. You can use our corrective action plan form or create your own.

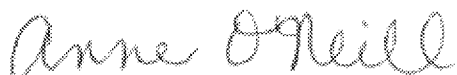
If you need help writing the corrective action plan, please contact me. If you do not send a corrective action plan, you may face disciplinary action. The corrective action plan must include the following:

- How compliance with each rule will be achieved.
- Who is directly responsible for implementing the corrective action for each violation.
- Specific time frames for each violation as to when the correction will be completed or implemented.
- How continuing compliance will be maintained once compliance is achieved.
- The signature of the responsible party and a date.

	Yes	No
A rule or law violation was found and a serious injury or death occurred.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
A rule or law violation was found and abuse and/or neglect of a child occurred.	<input type="checkbox"/>	<input checked="" type="checkbox"/>

This report and any related corrective action plans must be filed in your licensing notebook. This report and any related corrective action plans will be online for parents to review under the [Statewide Search for Licensed Child Care Centers and Homes](#).

Sincerely,



Anne O'Neill, Licensing Consultant
Child Care Licensing Bureau
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(906) 290-2131

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
SPECIAL INVESTIGATION REPORT**

I. IDENTIFYING INFORMATION

License #:	DC170381903
Investigation #:	2022D0720008
Complaint Receipt Date:	06/03/2022
Investigation Initiation Date:	06/03/2022
Report Due Date:	08/02/2022
Licensee Name:	Eastern Upper Peninsula ISD
Licensee Address:	315 Armory Place Sault Ste. Marie, MI 49783
Licensee Telephone #:	(906) 632-3373
Administrator:	Cara LaFaver, Designee
Licensee Designee:	Cara LaFaver, Designee
Name of Facility:	Superior Start- The School Readiness Center
Facility Address:	943 S. Campus Court Sault Ste. Marie, MI 49783
Facility Telephone #:	(906) 632-3373
Original Issuance Date:	07/06/2016
License Status:	REGULAR
Effective Date:	01/06/2021
Expiration Date:	01/05/2023
Capacity:	30
Program Type:	CHILD CARE CENTER

II. ALLEGATION(S)

	Violation Established?
There have been incidences of injuries on a child with no information or incident report provided by staff members.	No
There was no communication to parents regarding the transmission of pink eye.	Yes
There is ongoing use of illegal restraints without proper documentation or training.	No

III. METHODOLOGY

06/03/2022	Special Investigation Intake 2022D0720008
06/03/2022	Special Investigation Initiated – Telephone Susie Rambo, Lead Caregiver
06/06/2022	Inspection Completed On-site Susie Rambo, Lead Caregiver Cara LaFaver, Licensee Designee Staff Members: Sabrina Kemppainen, Justice Kjolhed, Cassie Davis, Vivian Freeman, and Victoria Aikens
06/07/2022	Contact - Telephone call made Child A's Mother
06/08/2022	Contact - Telephone call made Child B's Mother
08/02/2022	Cara LaFaver, Exit Conference

ALLEGATION: There have been incidences of injuries on a child with no information or incident report provided by staff members. There was no communication to parents regarding the transmission of pink eye. There is ongoing use of illegal restraints without proper documentation or training.

INVESTIGATION: On Friday, 06/03/2022, I contacted Susie Rambo, the lead caregiver to find out additional details. There had been a concern about pink eye with Child B. Ms. Rambo stated that Child B, five-year-old female, had not shown any signs of pink eye at the center and had been diagnosed and treated over a period of time, while not in attendance at the child care center.

On Monday 06/06/2022, I completed an inspection on site. I interviewed Susan Rambo, lead caregiver, Cara LaFaver, licensee designee, and staff members Sabrina Kemppainen, Justice Kjolhed, Cassie Davis, Vivian Freeman, and Victoria Aikens.

Ms. Rambo indicated that Ms. Kjolhed received an email from a parent that Child B had pink eye around 05/11/2022. The staff member did not share the information properly.

Ms. Rambo described that Child A, five-year-old male, often runs, throws chairs, and climbs on table. Generally the staff members do not put hands on Child A. Sometimes they lift him off the table by his waist. There is no restraint or arms held. Child A often refuses to stay on his mat at rest time and staff members will sit next to him. He is given quiet activity bags and/or a book. He has thrown items from the bags. On occasion, Child A is placed on a staff member's lap. When Child A has these behaviors, he is directed to the calming corner and when he is no longer upset, rejoins the group on his own or by invitation.

A behavior intervention plan has been implemented. Ms. Rambo provided copies of it to me along with the 5/31/2022 parent meeting notes.

Ms. LaFaver has been involved in meeting with Child A's parents regarding Child A's behavior and the intervention plan.

Ms. LaFaver stated that she was not aware of the details of the pink eye report made by a parent until later in the month. Since the pink eye resolved, staff members believed the situation did not warrant further action.

Ms. Kjolhed is the primary caregiver for Child A. Child A is not "restrained" per se, but caregivers do have to lift him off the classroom table by picking him up around the waist. Child A runs around and throws chairs and things. He may need to be escorted to the calming corner. This assistance only occurs if it is a safety issue. Child A has a caregiver sit beside him or on occasion he sits on the caregiver's lap. His arms are not held and he is verbally instructed to remain in the calming corner location until he calms down. A behavior report has been created to track the types of problems, classroom activity/time, possible motivation, response by staff and administrative follow up. A behavior plan has been implemented to reward positive behavior with a ratio of 5:1 positive to negative attention.

Ms. Kjolhed stated that she received an email from Child B's Mother on 5/11/2022 that Child B had pink eye. Child B was out for four to five days while the parents treated the condition with prescribed drops.

Victoria Aikens said that Child B did have an occurrence of pink eye and went to the doctor a few weeks ago. Ms. Aikens said that Child B's Mother did let the staff know that Child B had gone to the doctor for it. Ms. Aikens was not aware of any other children being impacted by it and the time frame was confusing, because Child B has allergies and went to the doctor on a day when she was not in attendance.

Ms. Aikens did not have regular contact with Child A. She has not restrained a child nor observed restraint of a child. When a child is in the moment of a behavioral

problem, her experience and observations have been to provide appropriate choices to the child. Child A is lifted by the waist off the table if he will not move to the floor on his own, as it is considered a safety issue.

Ms. Kemppainen received a head injury when Child A was on her lap. As he was sitting she held his hands gently on his lap and he threw his head back, causing her head to hit the wall. When Child A needs to be removed from the table, she picks him up by the armpits and places him on the floor. There are times that Child A is escorted to the calming corner. They are working on a behavior plan to reduce the incidents of Child A running and screaming in the classroom.

Ms. Kemppainen was aware that pink eye was in the center because she had seen children with red eyes. She was unaware of any formal notification.

All staff members denied that there were any injuries to children. There had been an injury to a staff member with an incident report sent to child care licensing on 05/26/2022. The staff member did have a head injury from the incident.

The incident was phoned in on 05/26/2022 that Child A had thrown his head back and caused an injury to the caregiver, Sabrina Kemppainen.

Subsequently an incident report was received stating:

“Rest time

[Child A] was getting up from his mat and climbed on top of the table, then crawled underneath the table and walking away from his mat. There were other children sleeping in the area too. This was a safety issue for him and the other students. He was asked multiple times to stay on his mat. He folded up his mat and was asked to put it back out and refused. Sabrina moved over to sit by Child A and he wouldn't stay on his mat. Sabrina put Child A on her lap and he started biting, kicking, and punching her. Child A stood up on Sabrina's lap and pushed his back into her head, causing her to hit her head on the wall. Susie Rambo heard a bang on the wall and looked over. She got up and went over and asked if Sabrina was alright and did she need help. Sabrina told her she needed help and Susie told her to go take a break. Susie sat with Child A and calmed him down. He ended up falling asleep.

Sabrina came in and filled out an incident report and talked with her supervisor (Susie Rambo) about how she was feeling.”

Ms. LaFaver sent an email to me on 06/10/2022 stating that the accusations regarding restraint and injury are completely unfounded.

I contacted Child A's Mother by phone on 6/7/2022. A behavior plan had been started with Superior Start staff. She wants Child A to be given two choices when an issue arises. She has not observed any injuries or pink eye in the children.

I contacted Child B's Mother by phone on 6/7/2022. Child B did have pink eye on 5/11/2022 and was treated for it. She had emailed Justice about the issue. Child B was home for four days while under treatment for pink eye. Child B's Mother had no concerns about other issues at the child care center, nor had she observed any injuries or restraints.

APPLICABLE RULE	
R 400.8140	Discipline.
	(3) Non-severe and developmentally appropriate discipline or restraint may be used when reasonably necessary, based on a child's development, to prevent a child from harming himself or herself or to prevent a child from harming other persons or property, excluding those forms of punishment prohibited by subrule (2) of this rule.
ANALYSIS:	There was no use of restraint of a child. Child A was held on a staff member's lap at rest time, but he was free to move away as he wished. Encouragement was provided to Child A to remain on the mat, but no restraint was used and alternate sleeping/quiet activity arrangements were completed.
CONCLUSION:	VIOLATION NOT ESTABLISHED

APPLICABLE RULE	
R 400.8155	Child accidents and incidents; child and staff illness.
	(1)A center shall have a written plan for how and when a parent is notified when personnel observe any of the following: (b) A child experiences an accident, injury, or incident.
ANALYSIS:	There were no child accident, injuries or incidents that were required to be reported.
CONCLUSION:	VIOLATION NOT ESTABLISHED

APPLICABLE RULE	
R 400.8155	Child accidents and incidents; child and staff illness.
	(4) If a center becomes aware that a staff member, volunteer, or child in care has contracted a communicable disease, then the center shall notify parents and provide all of the following information: (a) The name of the communicable disease the children were exposed to.

	<p>(b) The symptoms of the disease.</p> <p>(c) Prevention measures as recommended by the U.S. Centers for Disease Control and Prevention (CDC) at the following website: https://www.cdc.gov/DiseasesConditions.</p>
ANALYSIS:	There was confusion on the part of the staff members if Child B had pink eye, when Child B was treated and when exposures occurred. Nonetheless, parents of all children in attendance should have been notified about the communicable disease.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

Upon receipt of an acceptable corrective action plan, I recommend no change in the license status.

Anne O'Neill November 3, 2022

 Anne O'Neill Date
 Licensing Consultant

Approved By:
Rose A. Rafferty November 3, 2022

 Rose A. Rafferty Date
 Area Manager