



STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

GRETCHEN WHITMER  
GOVERNOR

ORLENE HAWKS  
DIRECTOR

January 25, 2023

Shannon Galla  
Grand Traverse Bay YMCA  
3700 Silver Lake Drive  
Traverse City, MI 49684

RE: License #: DC280379266  
**YMCA Child Development Center**  
**1027 McRae Hill Rd**  
**Traverse City, MI 49685**

Dear Ms. Galla:

Attached is your renewal inspection report. You can find a copy of this renewal inspection report and any associated corrective action plans on our [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](#).

During the renewal inspection on 01/12/2023, I found 14 violation(s) listed below and explained in the attached report: listed below and explained in the attached report:

- R 400.8161(2)(h)      Emergency procedures.**
- R 400.8176(6)        Sleeping equipment.**
- R 400.8550(6)        Electrical service.**
- R 400.8520(3)        Interior finishes.**
- R 400.8520(4)        Interior finishes.**
- R 400.8520(6)        Interior finishes.**
- R 400.8525(1)        Exits.**
- R 400.8530(1)(c)(i) Hazard Areas.**
- R 400.8530(9)        Hazard Areas.**
- R 400.8530(10)      Hazard Areas.**
- R 400.8515(6)        Construction.**
- R 400.8540(1)        Smoke detectors; carbon monoxide detectors.**
- R 400.8540(2)        Smoke detectors; carbon monoxide detectors.**
- R 400.8550(1)        Electrical service.**

Due to the violations, you must send us a corrective action plan by 02/14/2023. 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.

Due to the infant safe sleep violation(s), all of your infant child care staff members must take training on infant safe sleep. This must be included in your corrective action plan. In addition, a follow up inspection may be made to check compliance with the infant safe sleep rules.

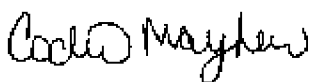
Upon receipt of an acceptable corrective action plan, a regular license will be issued. You will receive it in the mail.

<b>During calendar year 2022:</b>	<b>Total</b>
Number of serious injuries that occurred in facility.	<b>0</b>
Number of deaths that occurred in the facility.	<b>0</b>
Number of substantiated cases of abuse and/or neglect of a child that occurred at the facility.	

Please contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please contact the local office at 517-284-9730.

Per MCL 722.113g, this report and any related corrective action plans must be filed in your Licensing Notebook.

Sincerely,



Codie Mayhew, Licensing Consultant  
Child Care Licensing Bureau  
611 W. Ottawa Street; P.O. Box 30664  
Lansing, MI 48909  
(231) 342-5006 – Cell  
(517) 284-9730- Main  
(517)-763-0217- Fax  
MayhewC@michigan.gov

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
CHILD CARE LICENSING BUREAU  
RENEWAL INSPECTION REPORT**

**I. IDENTIFYING INFORMATION**

**License #:** DC280379266

**Licensee Name:** Grand Traverse Bay YMCA

**Licensee Address:** 3700 Silver Lake Drive  
Traverse City, MI 49684

**Licensee Telephone #:** (231) 933-9622

**Licensee/Designee:** Shannon Galla, Designee

**Name of Facility:** YMCA Child Development Center

**Facility Address:** 1027 McRae Hill Rd  
Traverse City, MI 49685

**Facility Telephone #:** (231) 346-4968

**Original Issuance Date:** 06/10/2016

**Capacity:** 90

**Age Range:** Ages Birth Thru 6 years

**Program Components:** PRESCHOOL  
INFANT/TODDLER  
FOOD SERVICE

**II. METHODS OF INSPECTION**

Date of On-Site Inspection(s): 01/12/2023  
 Date of Environmental Health Inspection: 12/28/2022  
 Date of Fire Safety Inspection: 01/06/2023- A rated Needed  
 Date of Lead Hazard Risk Assessment, if applicable: 12/20/2020  
 Date of Documentation of Playground Compliance, if applicable: N/A

		No. of Records Reviewed
No. of children enrolled in care	46	10
No. of staff employed	18	5
No. of volunteers	1	1
No. of children present at time of inspection	40	
No. of staff present at time of inspection	10	
No. of volunteers present at time of inspection	0	
No. of children interviewed/observed	40	
Persons Interviewed:	Licensee/Licensee Designee	<input checked="" type="checkbox"/>
	Program Director	<input checked="" type="checkbox"/>
	Caregiving staff	<input checked="" type="checkbox"/>

Approved Child Use Space: The gym, library, and classrooms 107, 108, 109, 110, 111, 112, 113, and 114.  
 Approved Program Director: Shannon Galla  
 Approved Central Administrator: None  
 Approved Variances: None  
 Key Indicator Inspection: No

**III. DESCRIPTION OF FINDINGS & CONCLUSIONS**

This 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.

During the inspection, there were 46 children present with 10 child care staff members. While onsite, I observed programming, snack time, lunch time, nap time, and free play. The center is made up of seven classrooms, but currently only five classrooms are operating. Each classroom was found to be compliant with ratio and group size requirements. Each classroom has a sufficient amount of developmentally age-appropriate toys and equipment accessible to children. I found

all child care staff members positively interacting with children. I found all child care staff members working with infants and toddlers to be nurturing to the children. A modification is needed to remove food service as a program component.

During the inspection, the center was found to be in compliance with all applicable rules and statutes except for the following violations:

**R 400.8161            Emergency procedures.**

(2) The written procedures must include all of the following:

(h) A plan for how children with chronic medical conditions will be accommodated during each type of emergency.

Ms. Galla did not ensure that all children with chronic medical conditions had an individual plan onsite identifying how they would be accommodated in each type of emergency. During the inspection, I found a child with asthma, a child with a milk protein allergy, and a child with an allergy to penicillin without an individualized chronic medical plan onsite.

**R 400.8176            Sleeping equipment.**

(6) Car seats, infant seats, swings, bassinets, and play yards are not approved sleeping equipment.

Ms. Galla did not ensure that all infants slept in approved sleeping equipment. During the inspection, I observed a six-month-old male infant asleep in an infant bouncer.

**R 400.8550(6)        Electrical service.**

(6) All electrical outlets in approved child use space located within 6 feet of a sink or other water source shall be protected by a ground-fault circuit interrupter (GFCI).

QFI Inspector Art Shaw reported Portable sinks are used in several use rooms that contain a stored water source and a wastewater container and are plugged into an electrical receptacle. Any electrical receptacle within 6 feet of a water source needs to have ground-fault circuit interrupter (GFCI) protection.

**R 400.8520(3)        Interior finishes.**

(3) Basic materials in all other areas shall be class C or III.

QFI Art Shaw reported basic materials in all other areas shall be class C or III.

**R 400.8520(4) Interior finishes.**

(4) Interior finish material more hazardous than class C or III is prohibited in child use areas.

QFI Art Shaw reported interior finish material more hazardous than class C or III is prohibited in child use areas.

**R 400.8520(6) Interior finishes.**

(6) In an existing licensed center or conversion, existing interior finishes that do not comply with the classifications in subrule (1) of this rule may have their surfaces protected with an approved fire-retardant coating to meet the classifications for interior finishes. The coatings shall be applied to interior finishes that are attached to or furred out not more than 1 inch from a noncombustible backing and applied according to manufacturer's recommendations. Documentation shall be provided as required by the department.

QFI Art Shaw inquired about the interior finish rating of the paneling on a wall in room 107? He reported that a minimum class C interior finish rating is required. It appears that this paneling has been in place for some time even prior to licensing. If this is the case a fire-retardant coating can be applied to meet this requirement. If a coating is applied be able to show what the product is, and how it was applied to meet the manufacturer's thickness requirements.

**R 400.8525(1) Exits.**

(1) Except as referenced in R 400.8515(4)(b) and subdivision (c) of this subrule each occupied floor shall have not less than 2 approved exits directly to the outside with proper termination to grade, remote from each other by 50% of the longest dimension of the floor or area served, and occupied rooms within the center shall be located between means of egress, unless a first floor, self-contained, occupied room has an approved exit direct to the outside with proper termination to grade with a maximum travel distance of 50 feet from the most remote point in the room to the exit.

QFI Art Shaw reported that The Technical Assistance Handbook used by the plan reviewers and the QFI indicates when a basement is not considered a basement as defined in these rules. In this building rooms 110, and 100 have direct exiting to the outdoor. Room 109 exits through room 110. Rooms 111, and 112 exit through room 100. There is a corridor that services these room and rooms 108, 107, and 114 that has a direct exit to the outdoors. This corridor continues around the back of the center and ends at a door that access a short corridor that accesses the kitchen area and room 100. The floor plans indicated that the door at the end of the corridor swings into the corridor, so it is not an exit from the corridor. At this end of the corridor there are boys and girls toilet rooms and a library in a bump out in the corridor. Before reaching the library there is a stairway to the main level with an exit door at the top of the stairway. This upper level also serves as a means of egress from the main floor level which is not used by the childcare program.

The Technical Assistance Handbook notes that while the childcare center level is not being treated as a basement this stairway must be treated as an enclosed stairway for exiting purposes, the same as a basement. This stairway (106) will need to be enclosed to have a 1-hr fire resistance rating so that once a person enters the stairway from the lower level the door to the stairway will close and limit smoke and heated gases from entering. If a variance request were to be made and granted the floor separation at the main floor level does not meet the requirements for a 30-minute rated fire separation. These requirements are that same going back into the 2002 edition of the rules. Note this is not the same for room 100. Room 100 has a direct exit. The exit corridor being discussed is technically a dead-end corridor and must have 2 ways out.

**R 400.8530(1)(c)(i) Hazard Areas.**

(1) Hazard areas shall be separated from the parts of the building used as a center in the following manner:

(c) In centers licensed after July 1, 2000, the following shall apply:

(i) Where the area used for the storage of combustibles exceeds 100 square feet, by construction having a minimum 1-hour fire resistance rating, openings in the separation shall be protected with a minimum of 1-hour or "B" labeled fire door and frame assembly, including an approved self-closing device and positive latching hardware.

QFI Art Shaw reported that the area under the stairway 106 is being used for storage. There are 2 halves to this area, that directly under the stairway and that under the approach landing above. There is a door between these 2 halves which was found to be open during this inspection. Ensure that this storage area is constructed to have a 1-hr fire resistance rating and the door from the corridor to

this space is a minimum 1-hr fire rated fire door and frame assembly with an approved self-closing device and positive latching hardware.

**NOTE:** The local Fire Inspecting authority required that 5/8-inch fire rated gypsum board be installed under the stairs. There is no finished ceiling, only open bar joist and metal decking to support the concrete floor above. It is not known if this open bar joist construction has a fire rating.

Art Shaw reported that the church storage room behind the library area has a 3-hr labeled fire door and frame assembly. Someone has placed a ventilation grill in the lower half of this door, violating the fire resistance rating of the door. Replace this door with a new door that has a minimum ¾-hr fire resistance rating.

**R 400.8530(9) Hazard areas.**

(9) The center shall not store flammable materials, including fuels, pressurized cans, cleaning fluids and supplies, polishes, and matches, in heat plant enclosures. These items may be stored outside of child use areas in metal cabinets or storage facilities accessible only to authorized personnel.

QFI Art Shaw reported that the center shall not store flammable materials, including fuels, pressurized cans, cleaning fluids and supplies, polishes, and matches, in heat plant enclosures. These items may be stored outside of child use areas in metal cabinets or storage facilities accessible only to authorized personnel.

**R 400.8530(10) Hazard areas.**

(10) The center shall not store combustible materials within the central heating plant or fuel-fired water heater rooms or in basements containing fuel-fired heating equipment, without a proper fire separation.

QFI Art Shaw reported that the center shall not store combustible materials within the central heating plant or fuel-fired water heater rooms or in basements containing fuel-fired heating equipment, without a proper fire separation.

**REPEAT VIOLATION ESTABLISHED:  
INTERIM REPORT DATED: 03/31/2022  
CORRECTIVE ACTION REPORT DATED: 03/31/2022**

**R 400.8515(6) Construction.**

(6) All vertical openings and stairways that are not required shall be constructed and arranged with effective fire and smoke separation under the requirements of standard partition construction. All door openings shall be as follows:

(a) Protected with 1<sup>3</sup>/<sub>4</sub>-inch flush solid core wood doors or 20-minute labeled fire-rated doors.

(b) Installed in fully stopped smoke-tight substantial frames.

(c) Equipped with approved self-closing devices and non-locking-against-egress positive latching hardware.

QFI Art Shaw reported that the second exit from room 100 is a stairway leading to an exit on the north side of the building. At the time of this inspection 1 of 2 door opening into this stairway landing as propped open. This door is required to be kept closed unless it is held open and an electrical-magnetic hold open device that is tied to the fire alarm system. Ensure that these doors do not any kick down hold devices or brick or stones, etc. to hold the doors open.

**R 400.8540(1) Smoke detectors; carbon monoxide detectors.**

(1) All child care centers shall, at a minimum, be equipped with approved single station smoke detectors covering all use areas and their means of egress. These smoke detectors shall be located and spaced according to NFPA-72.

QFI Art Shaw reported that the center must provide documentation that sensitivity testing of the smoke detectors has been conducted within the last 5 year. Sensitivity testing is supposed to be completed within 1 year after the system was installed and every 2 years after that for a total of five years. If there is no change in the sensitivity compared to the manufacturer's listing that the next test is 5 years after the last test. If there is a change or if a smoke detector has been changed you are back to the beginning.

**R 400.8540(2) Smoke detectors; carbon monoxide detectors.**

(2) Centers with any fuel-fired heating systems shall have a carbon monoxide detector, listed by a nationally recognized testing laboratory, on all levels approved for child care and in each use area covered by a different furnace zone.

QFI Art Shaw reported that the center needs to have a carbon monoxide alarm if it is not a part of the fire alarm system. If the center has a standalone CO alarm

document that they are maintaining the CO alarm in accordance with the manufacturer's installation and maintenance requirements.

**R 400.8550(1) Electrical service.**

(1) The electrical service shall be maintained in a safe condition.

QFI Art Shaw reported that the center must ensure that there is 3 feet of clearance in front of all electrical panel in the boiler room.

**Technical Assistance and Consultation were provided on the following:**

- I provided guidance on the Child Care Background Check (CCBC) website.
- I provided individual chronic medical condition plan templates.
- Please ensure that all consent and disclosure forms have signature in each section. Signatures are not allowed to be typed.
- **R 400.8131(8)- Technical Assistance:** An on-going professional development plan must be developed and implemented to include all the training and professional development required by these rules.
- **R 400.8161(8)- Technical Assistance:** Each child care staff member shall be trained at least twice a year on his or her duties and responsibilities for all emergency procedures referenced in subrule (1) of this rule.
- **R 400.8330(24)(c)- Technical Assistance:** Child care staff members shall foster and facilitate toddlers' independence, language, and social interactions by doing all of the following: (c) Sitting with toddlers during meal times.
- **R 400.8380(1)- Technical Assistance:** Please ensure all diaper wipes marked keep out of reach of children are not accessible to children in approved child use space.

#### IV. RECOMMENDATION

Upon receipt of an acceptable corrective action plan and an A rated fire inspection, I recommend issuance of a regular license to this child care center.



01/25/2023

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Codie Mayhew  
Licensing Consultant

Date