



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

May 26, 2022

Susan Mulvey
White Lake Area Community Education
541 E Slocum St
Whitehall, MI 49461

RE: License #: DC610269662
WLACE WHTL - Community Services Bldg
541 E. Slocum
Whitehall, MI 49461

Dear Mrs. Mulvey:

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 05/17/2022, I found 6 violations listed below and explained in the attached report: listed below and explained in the attached report:

R 400.8112 (1)(c) Comprehensive background check; fingerprinting.
R 400.8161 (2)(f) Emergency procedures.
R 400.8161 (2)(h) Emergency procedures.
R 400.8161 (3) Emergency procedures.
R 400.8335 (8)(a) Food services and nutrition; provided by center.
R 400.8350 (5) Toilets; hand washing sinks.

Due to the violations, you must send us a corrective action plan by 06/15/2022. 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.**

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

During calendar year 2021:	Total
Number of serious injuries that occurred in facility.	0
Number of deaths that occurred in the facility.	0
Number of substantiated cases of abuse and/or neglect of a child that occurred at the facility.	0

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,

Amanda Wendell

Amanda Wendell, Licensing Consultant
 Child Care Licensing Bureau
 611 W. Ottawa Street
 P.O. Box 30664
 Lansing, MI 48909
 (231) 492-5410

enclosure

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

I. IDENTIFYING INFORMATION

License #:	DC610269662
Licensee Name:	White Lake Area Community Education
Licensee Address:	541 E Slocum St Whitehall, MI 49461
Licensee Telephone #:	(231) 766-3443
Licensee/Designee:	Susan Mulvey, Designee
Name of Facility:	WLACE WHTL - Community Services Bldg
Facility Address:	541 E. Slocum Whitehall, MI 49461
Facility Telephone #:	(231) 893-1091
Original Issuance Date:	12/29/2004
Capacity:	180
Age Range:	Ages 2 years 6 months Thru 12 years
Program Components:	GSRP HEAD START BEFORE/AFTER SCHOOL

II. METHODS OF INSPECTION

Date of On-Site Inspection(s): 05/17/2022
Date of Environmental Health Inspection: N/A
Date of Fire Safety Inspection: 04/10/2022
Date of Lead Hazard Risk Assessment, if applicable: 03/03/2020
Date of Documentation of Playground Compliance, if applicable: 08/26/2006

		No. of Records Reviewed
No. of children enrolled in care	115	15
No. of staff employed	21	5
No. of volunteers	0	0
No. of children present at time of inspection	78	
No. of staff present at time of inspection	15	
No. of volunteers present at time of inspection	0	
No. of children interviewed/observed	78	
Persons Interviewed:		
Licensee/Licensee Designee	☐	
Program Director	☒	
Caregiving staff	☒	

Approved Child Use Space: LHLC B/A room, classrooms 106, 107, 501, 502, 503, 505, 506, and the gym
Approved Program Director: Amanda Miller and Janet Welch
Approved Central Administrator: Tom Moore
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 onsite inspection I observed five sections of preschool and two rooms of after-school programming. I observed children engaging in outdoor play, reading, choice time, small group activities, educational videos, and snack time. In each room, child care staff members were working with and engaging with children. I observed positive interactions and appropriate supervision.

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

R 400.8112 Comprehensive background check; fingerprinting.

(1) Pursuant to section 5n of the act, MCL 722.115n, before an individual has unsupervised contact with children, the department shall determine the individual's eligibility to be any of the following:

(c) A child care staff member.

Ms. Mulvey did not ensure that all staff members are determined eligible by the department prior to having unsupervised contact with children. A speech therapist employed by the school district had unsupervised contact with children while they were signed in to the child care. She had not been determined eligible by the department.

R 400.8161 Emergency procedures.

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

(f) A plan for how each child with special needs will be accommodated during each type of emergency.

Ms. Mulvey did not ensure that written emergency procedures include a plan for how each child with special needs will be accommodated during each type of emergency.

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. Mulvey did not ensure that written emergency procedures include a plan for how each child with chronic medical conditions will be accommodated during each type of emergency.

R 400.8161 Emergency procedures.

(3) The plans required by subrule (1)(a) to (d) of this rule must be posted in a place visible to staff and parents.

Ms. Mulvey did not ensure that written emergency procedures are posted in each licensed space. Complete emergency procedures were not posted in the LHLC room, the gym, or rooms 106, 502, 505, or 506.

R 400.8335 Food services and nutrition; provided by center.

(8) All of the following apply to milk:

(a) Containers must be labeled with the date opened.

Ms. Mulvey did not ensure that all milk containers are labeled with the date opened. There were three containers of milk or milk substitute that were not labeled with the date opened.

R 400.8350 Toilets; hand washing sinks.

(5) Hand washing sinks must have warm running water not to exceed 120 degrees Fahrenheit.

Ms. Mulvey did not ensure that all hand washing sinks have warm running water. The water in multiple hand washing sinks did not reach 75 degrees Fahrenheit.

During the exit conference, technical assistance/consultation was provided regarding the following:

- Fire drills must be completed quarterly.
- The licensing notebook must have a summary sheet and that must be completed with every new report or corrective action plan.
- Old recall lists are posted, in addition to the new list. I requested that, for clarity, the old lists be removed.
- Room 106 does not have a schedule posted for the after-school programming.
- Some classrooms have multiple emergency postings (that are not duplicates) hung in various locations around the room. I recommended that redundant plans be removed, and fire, tornado, disaster, and serious accident/injury plans be posted in one location.
- I reminded Ms. Miller and Ms. Welch that the 2022 Health and Safety refresher is available and must be completed prior to 11/01/2022 for all staff required.
- I reminded Ms. Miller and Ms. Welch that center staff must not complete any information on the child information cards that is required to be completed by parents. We discussed options for when parents are not immediately available to make updates, such as requiring a text or email that can be printed and attached to the child information card.
- The thermometer in the refrigerator in room 502 may be broken. Please check this and replace it if necessary.

IV. RECOMMENDATION

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

Amanda Wendell

05/26/2022

Amanda Wendell
Licensing Consultant

Date