



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

November 24, 2020

Todd Graham  
True North Community Services  
PO Box 149  
6308 S. Warner Ave.  
Fremont, MI 49412

RE: License #: DC610400560  
**Project FOCUS @ Holton Middle School**  
**6477 Syers Rd.**  
**Holton, MI 49425**

Dear Mr. Graham:

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 11/12/2020, I found two violation(s) listed below and explained in the attached report: listed below and explained in the attached report:

- R 400.8112(2)(b) Comprehensive background check; fingerprinting.
- R 400.8146(2) Information provided to parents.

Due to the violations, you must send us a corrective action plan by 12/14/2020. 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.

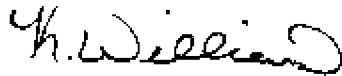
- Who is directly responsible for implementing the corrective action for each violation.
- Specific time frames for each violation as to when the correction will be completed or implemented.
- How continuing compliance will be maintained once compliance is achieved.
- The signature of the responsible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

<b>During calendar year 2019:</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.	<b>0</b>

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 (616)356-0183.

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

Sincerely,



Kortney Williams, Licensing Consultant  
 Bureau of Community and Health Systems  
 2700 Baker St.  
 P.O. Box 4290  
 Muskegon Heights, MI 49444  
 (231) 463-3177

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
BUREAU OF COMMUNITY AND HEALTH SYSTEMS  
RENEWAL INSPECTION REPORT**

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	DC610400560
<b>Licensee Name:</b>	True North Community Services
<b>Licensee Address:</b>	PO Box 149 6308 S. Warner Ave. Fremont, MI 49412
<b>Licensee Telephone #:</b>	(231) 924-0641
<b>Licensee/Designee:</b>	Todd Graham, Designee
<b>Name of Facility:</b>	Project FOCUS @ Holton Middle School
<b>Facility Address:</b>	6477 Syers Rd. Holton, MI 49425
<b>Facility Telephone #:</b>	(231) 335-8051
<b>Original Issuance Date:</b>	10/17/2019
<b>Capacity:</b>	50
<b>Age Range:</b>	Ages 11 years Thru 12 years
<b>Program Components:</b>	SCHOOL AGE FOOD SERVICE BEFORE/AFTER SCHOOL

**II. METHODS OF INSPECTION**

Date of On-Site Inspection(s): 11/12/2020  
 Date of Environmental Health Inspection: N/A  
 Date of Fire Safety Inspection: 09/06/2019  
 Date of Lead Hazard Risk Assessment, if applicable: N/A  
 Date of Documentation of Playground Compliance, if applicable: N/A

		No. of Records Reviewed
No. of children enrolled in care	12	12
No. of staff employed	2	2
No. of volunteers	0	0
No. of children present at time of inspection	0	
No. of staff present at time of inspection	1	
No. of volunteers present at time of inspection	0	
No. of children interviewed/observed	0	
Persons Interviewed:		
Licensee/Licensee Designee	<input type="checkbox"/>	
Program Director	<input checked="" type="checkbox"/>	
Caregiving staff	<input type="checkbox"/>	

Approved Child Use Space: The cafeteria, gymnasium, room 111, and room 113.  
 Approved Program Director: Mr. Carlos Flores.  
 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 on-site inspection there were no children present. I was told by the program director that programming was cancelled for the day due to staffing issues. I was able to review paperwork and all approved areas in the school.

**R 400.8112**

**Comprehensive background check; fingerprinted.**

(2) An applicant or licensee shall do all the following

(b) Maintain a copy of the completed and signed form or forms for each individual entered into the child care background check system under the license.

One of the two child care staff members files did not contain a Consent and Disclosure Form.

**R 400.8146(2)**

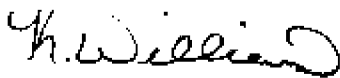
**Information provided to parents.**

(2) Written documentation that the parent received the written information packet as required by subrule (1) of this rule shall be kept on file at the center.

Six of the 12 children's files did not contain written documentation that the parent received the required written information packet.

**IV. RECOMMENDATION**

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



Kortney Williams  
Licensing Consultant

11/24/2020  
Date