



STATE OF MICHIGAN
 DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
 LANSING

GRETCHEN WHITMER
 GOVERNOR

ORLENE HAWKS
 DIRECTOR

March 8, 2022

Sarah Jung
 Kingdom Kids Christian Academy
 42693 Dequindre Road
 Troy, MI 48085

RE: License #: DC630384828

RE: SI LOG #: **Kingdom Kids Christian Academy
 42693 Dequindre Road
 Troy, MI 48085**

Dear Ms. Jung:

This letter is to advise you that the 03/08/2022 corrective action plan you submitted, regarding each rule violation cited in the recently completed Renewal Licensing Study Report, is approved.

You can find a copy of this corrective action approval letter and the associated report on our [website](#) under [Statewide Search for Licensed Child Care Centers and Homes](#). A description of each type of report and corrective action plans can be found under [Overview of Licensing Reports](#).

Violation cited	Noncompliance observed	Plan to correct	Date to be completed
R 400.8112 Comprehensive background check; fingerprinting.	The center did not have a completed consent and disclosure form on file for two child care staff members. One child care staff member did not have the correct consent and disclosure form on file.	Will have them sign and include in staff folder.	03/15/2022

R 400.8125 (3) Staff; volunteer; requirements.	The center did not complete a PSOR for their three volunteers.	Will complete	03/15/2022
R 400.8125 (4) Staff; volunteer; requirements.	The center's screening policy did not include the PSOR requirements for volunteers.	Will edit policy and post.	03/15/2022
R 400.8125 (5) Staff; volunteer; requirements.	One volunteer did not have a signed and dated abuse and neglect statement.	She will sign immediately.	03/08/2022
R 400.8128 Staff; volunteer; tuberculosis.	Two child care staff members did not have negative TB test on file at the center.	They will not be working until they provide negative TB tests.	03/08/2022
R 400.8131(1) Professional development requirements.	Two staff did not have documentation of a new hire orientation.	Going forward will keep track and document.	03/08/2022
R 400.8131(12) Professional development requirements.	Two staff did not complete the 2021 refresher training.	Going forward will keep track and document.	03/08/2022
R 400.8131(3) Professional development requirements.	The center did not have documentation of prevention of shaken baby syndrome, abusive head trauma and child maltreatment, and recognition and reporting of child abuse and neglect for five staff members.	Going forward will keep track and document.	03/08/2022
R 400.8131(4) Professional development requirements.	The center did not have documentation of prevention and control of infectious disease training, including immunizations for five staff members.	Going forward will keep track and document.	03/08/2022

R 400.8131(5) Professional development requirements.	The center did not have documentation of the above listed trainings for five staff members.	Going forward will keep track and document.	03/08/2022
R 400.8131(6) Professional development requirements.	Five staff members files were reviewed, and they had not completed the required 16 clock hours for 2020 and 2021.	Going forward will keep track and document.	03/08/2022
R 400.8134 Hand washing.	The children's hands were not washed after snack.	Usually do will be more vigilant.	03/08/2022
R 400.8143 (1) Children's records.	Ten child information cards were reviewed, and all were missing one or more of the following: parent's employment information, physician name and number, signature date, and other release person.	Will have parents complete	03/15/2022
R 400.8143 (2) Children's records.	Two child information cards were not updated annually.	Will have parents update and sign.	03/15/2022
R 400.8143 (3) Children's records.	Two children's files did not have documentation of 1 dose of each immunizing agent specified by the department of health and human services (DHHS).	Will request and file.	03/22/2022
R 400.8161(2) Emergency procedures.	The center did not have written procedures with a plan for shelter-in-place.	Will update and post.	03/15/2022
R 400.8161(2) Emergency procedures.	The center did not have written procedures with a plan for lockdown.	Will update and post.	03/15/2022

R 400.8161(2) Emergency procedures.	The center did not have written procedures with a plan for how children with chronic medical conditions will be accommodated during each type of emergency.	Will update and post.	03/15/2022
R 400.8161(5) Emergency procedures.	The center did not complete the required fire drills in 2020 and 2021.	Going forward drills will be conducted and document.	03/08/2022
R 400.8161(6) Emergency procedures.	The center did not complete the required 2 tornado drills in 2021. The required tornado drills were completed in 2020.	Going forward drills will be conducted and document.	03/08/2022
R 400.8161(8) Emergency procedures.	The center did not complete the required emergency procedures training for the staff in 2020 and 2021.	Going forward will document.	03/08/2022
R 400.8170 (10) Outdoor play area.	The edging around the outdoor play structure has raised bolts are a trip hazard.	Will repair.	03/22/2022
R 400.8173 (4) Equipment.	Room 1 The blue chair is torn and frayed. Room 2 the area rug is not secure creating a trip hazard.	We be removed until repaired.	03/08/2022
R 400.8325 (1) Sanitization.	The multi-purpose tables were not washed, rinsed, and sanitized after they are used for snack.	Will implement immediately and will be enforced.	03/08/2022
R 400.8340 (3) Food services and nutrition; provided by parents.	Food provided by the parents was not completely labeled and dated.	Will message parents.	03/08/2022

R 400.8380 (5) Maintenance of premises.	There is deteriorating paint on the housekeeping table and chairs.	We removed until repaired.	03/08/2022
R 400.8510 (5) Plans and specifications; submission; approval; inspections.	The center did not have the fuel-fired furnaces inspected.	Will schedule an inspection.	03/22/2022
R 400.8520 (14) Interior finishes.	Both classrooms have over 20% combustibles on the walls.	Will remove	03/15/2022

It is expected that the corrective action plan will be implemented within the time frames as outlined in your plan.

A follow-up evaluation may be made to verify compliance. Should the corrections not be implemented in the specified time, it may be necessary to reevaluate the status of your license.

The office provides technical assistance to meet the licensing requirements and consultation to improve services. Please contact me with any questions. In the event that I am not available and you need to speak to someone immediately, you may contact the local office at (517) 284-9730.

Sincerely,



Thomasa Bond, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(248) 860-2439