



RICK SNYDER
GOVERNOR

State of Michigan
DEPARTMENT OF HUMAN SERVICES
BUREAU OF CHILDREN AND ADULT LICENSING



MAURA D. CORRIGAN
DIRECTOR

August 11, 2011

Jennifer Schroeder
536 Wildlife Road
Bronson, MI 49028

RE: Application #: DG120314250
Schroeder, Jennifer Lynn
536 Wildlife Road
Bronson, MI 49028

Dear Ms Schroeder:

Attached is the Original Licensing Study Report for the above referenced facility. The study has determined substantial compliance with applicable licensing statutes and rules. Therefore, a provisional license 12 is issued.

Please review the attached documentation for accuracy and feel free to contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please feel free to contact the local office at (517) 241-2585.

Per MCL 722.113g, this report must be filed in your Licensing Notebook.

Sincerely,

Timothy A Swope, Licensing Consultant
Bureau of Children and Adult Licensing
301 E. Louis Glick Hwy
Jackson, MI 49201
(517) 780-7907

enclosure

**MICHIGAN DEPARTMENT OF HUMAN SERVICES
BUREAU OF CHILDREN AND ADULT LICENSING
LICENSING STUDY REPORT**

I. IDENTIFYING INFORMATION

License #:	DG120314250
Applicant Name:	Jennifer Schroeder
Applicant Address:	536 Wildlife Road Bronson, MI 49028
Applicant Telephone #:	(517) 677-1570
Administrator/Licensee Designee:	N/A
Name of Facility:	Schroeder, Jennifer Lynn
Facility Address:	536 Wildlife Road Bronson, MI 49028
Facility Telephone #:	(517) 677-1570
Application Date:	07/06/2011
Capacity:	12
Program Type:	CHILD CARE GROUP HOME (CAPACITY 7-12)

II. METHODOLOGY

09/10/2008	Application Complete/Orientation Needed
07/05/2011	Inspection Completed-Heating Approved
07/06/2011	Enrollment
07/07/2011	PSOR on Address Completed
07/07/2011	Contact - Document Received Zoning approval
07/07/2011	Contact - Document Received Radon results 1.3 pCi/L
07/07/2011	Contact - Document Received Med cl's & TB's for Jennifer & Cheyanne, TB for Greg
07/07/2011	Contact - Document Received Verification of CPR, 1st Aid & BBP training for Jennifer, BBP training for Cheyanne
07/14/2011	Inspection Completed-Env. Health : A
08/10/2011	Inspection Completed On-site

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Description of Facility

Rooms and levels approved for child care use:

Ms. Schroeder resides in a two-story house with a basement located in a residential area in Bronson. The main floor living room, dining room, kitchen, play room and entryway are approved for child care use.

Areas not approved:

The upper and lower levels (basement) are not approved for child care use. The lower level will be only used for conducting tornado drills.

Ages of children served:

Ms. Schroeder will accept children from birth to 12 years old.

Equipment:

Ms. Schroeder has an adequate amount of age appropriate play and learning equipment to support the requested capacity of 12 children.

Proposed days and hours of operation:

The group child care home will operate Monday through Friday from 4:30 a.m. until 6:00 p.m.

Previous or concurrent licenses, including children's foster care:

Ms. Schroeder has been previously licensed to provide child care (DF120297301). She is not a licensed foster parent.

Exiting information (including second floor and basement):

There are two separate remote door exits located on the main floor that will be used for exiting; one is located in the front of the home and the other at the rear of the home.

Outdoor play area description:

The outdoor play area is partially fenced and located in the rear of the home. The outdoor play area exceeds the minimum square footage requirements for outdoor play space. There is a variety of outdoor play equipment available such as Little Tykes portable toys, a swing set and a climber. The swing set and climber are placed on a sufficient amount of wood chip ground covering. There are no water hazards or any other obvious outdoor hazards.

Additional information:

- Pets? No Yes If yes, describe. Ms. Schreider has one small-sized and one medium-sized dog.
- Hot tubs or spa pool? No Yes If yes, are there appropriate barriers?
- Swimming pool? No Yes If yes, describe pool and barriers.
- Other water hazards? No Yes If yes, describe.
- Fireplace or wood burning stove? No Yes If yes, describe. The dining room contains a fireplace that is not used. The hearth is protected by cushioning.
- Fireplace/wood burner in use during child care hours? No Yes If yes, describe barriers to protect children from burns:

- CPR, first aid, and blood borne pathogen training current? No Yes

Radon test results:

Ms. Schroeder completed the required radon test on 6/13/11 in the lowest level of her home with a result of 1.3 picocuries per liter of air. This is within an acceptable range and complies with the licensing rule.

Explanation of variances, if any:

There are no variances.

B. Rule/Statutory Violations

Ms. Schroeder is in compliance with the applicable administrative rules and licensing statutes.

IV. RECOMMENDATION

I recommend issuance of a provisional license to this child care group home (capacity 7-12).

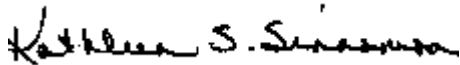


08/11/11

Timothy A Swope
Licensing Consultant

Date

Approved By:



08/11/11

Kathleen S. Sinnamon
Area Manager

Date