

# DEEMED CAMP LICENSING STUDY REPORT

Michigan Department of Lifelong Education, Advancement, and Potential

<b>PROGRAM License Number</b>	<b>PROGRAM (Camp) Name</b>	<b>Inspection Date</b>	<b>Inspection Type</b>	
CR250200891	YMCA Camp Copneconic	7/25/2025	Renewal	
<b>PROGRAM Licensee Mailing Address</b>		<b>City</b>	<b>State</b>	<b>Zip</b>
719 Harrison St Suite 100		Flint	MI	48502
<b>SITE License Number</b>	<b>SITE Name</b>	<b>Accrediting Body:</b>		
SR250200060	YMCA Camp Copneconic	<input checked="" type="checkbox"/> American Camping Association (ACA) <input type="checkbox"/> National Camp Accreditation Program (Scouts)		
<b>SITE Address</b>		<b>City</b>	<b>State</b>	<b>Zip</b>
10407 N Fenton Rd		Fenton	MI	
<b>PROGRAM/SITE Affiliated Person with whom the LSR findings were shared.</b>	<b>Comprehensive Clearance on File (MCL 722.115c)</b>	<b>E-MAIL</b>		
Thomas Bawden	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	thomasb@flintymca.org		

## GENERAL PROVISIONS (PART 1)

<i>The listed rules below are summary statements. For the complete text of the rule go to licensing rules for Children's and Adult Foster Care Camps.[R400.11101-R400.11413]</i>	Compliant	Violation	N/A
<b>R 400.11105 Variance from rules; Parts 1,2,3, and 4.</b> A variance from an administrative rule including any conditions under which the variance was granted, is in effect and followed.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Findings:</b>			
<b>R 400.11102 Deemed Status.</b> (1) Evidence exists that the camp is currently accredited. (2) Camp has requested deemed status and has submitted verification of accreditation and is on a regular license.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Findings:</b>			
<b>R 400.11109 Staff.</b> (4) If the camp director is away from the operation for more than 12 hours, the person who is left in charge meets all the requirements of subpart (2) of this rule. (7) Personnel records include all the required information: Name, Position Documentation, Work History, References (3), Conviction record, and if needed, Central Registry. <i>(Sample size: minimum 5 for a camp staff less than 50 and minimum of 10 for a camp staff of 50 or more, if camp staff is less than 5 then all staff files must be reviewed)</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Camp Staff Size: 72  Files Reviewed: 10			
(8) Written job descriptions, which include all the required information, exist for each staff classification covered, and staff members have received a copy of their job description.			
<b>Findings:</b>			
<b>R 400.11122 Health care staff: residential; troop; travel camp</b> (1) The health officer has current CPR certification. (2) A health officer is on duty or in residence at the camp. (3) The health officer is on duty and properly licensed or certified. (4) A person who is licensed in another state or Canadian province as a physician, physician's assistant, nurse, or EMT is deemed to meet the requirements of subrules (3) and (4) of this rule.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Findings:</b>			
<b>R 400.11147 Reporting changes or cancellations to department.</b> A change or cancellation is reported by the licensee to the department.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Findings:</b>			
<b>R 400.11149 Site; emergency procedures; plans; use of facilities; equipment; fire drills.</b> (1) The site and facilities of the camp do not present a fire, health or safety hazard. (2) Written procedures for response to potential emergencies and disasters have been established. (3) The camp uses a campsite and facilities which comply with these administrative rules. (4) Equipment used in the camp is in good repair and is safe for campers. (5) Fire safety orientations are conducted for each new group of campers and written record maintained for the season.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Findings:</b>			

## FIRE SAFETY (PART 2)

<b>R 400.11201 Applicability:</b>	<b>Rating: A</b>	<b>QFI Name: Art Eastman</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>QFI Inspection Date:</b> 6/12/2024 (Completed within two-year period)					

<b>R 400.11227 Occurrence of fire.</b> (Upon review, all applicable reportable fire incidents were reported to the department and all incident reports since last onsite were reviewed as part of this inspection).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Findings:

### ENVIRONMENTAL HEALTH AND SAFETY (PART 3)

<b>R 400.11302 Applicability</b>	<b>Rating:</b> A	<b>Health Department Name:</b> Genesee Co. Health Department	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>EHI Inspection Date:</b> 5/2/2025 (Completed within one-year period)					

Findings:

### HIGH ADVENTURE ACTIVITIES (PART 4)

High Adventure Activity means "a camp program that requires specially trained staff or special safety precautions to reduce the possibility of an accident."  
[R400.11401(1)]

**Is the PROGRAM and SITE the same licensee?**  Yes  No  
If yes, then high adventure activities offered are identified under SITE below. If no, then licensee responsible for high adventure activities is identified in table below.

#### High Adventure Activities Offered and Responsibility for Operation

	PROGRAM	SITE	NOT APPLICABLE		PROGRAM	SITE	NOT APPLICABLE
Boating	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Archery	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sailing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Riflery	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Canoeing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Cycling	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Swimming	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Backcountry Camping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wading	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Obstacle Course (Low)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Water-Skiing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Rappelling/Climbing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Waterslide	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	High Ropes Course	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Go Carts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Zipline	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Travel Groups	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Horseback Riding	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Gymnastics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other: Tubing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other: Aqua Park	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>R 400.11401 High adventure activities; definition, written statement; adult activity leader.</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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- (1) The camp has accurately identified all high adventure activities that meets the definition of "high adventure activity".
- (2) Develop and assure adherence to a written program statement covering all the following:
  - (a) Activity leader training and experience qualifications
  - (b) Specific staff-to-camper ratio appropriate to the activity
  - (c) Classification and limitations for camper participation
  - (d) Arrangement, maintenance, and inspection of the activity area
  - (e) Appropriate equipment and inspection and maintenance
  - (f) Safety precautions
- (3) Conducted by an adult activity leader who has training or experience in conducting the activity.

Findings: A special investigation #2025C0434019 was completed and found in violation of R400.11401 for the zipline. The camp has submitted a written corrective action plan addressing violations cited in the special investigation report.

<b>R 400.11405 Certified aquatic supervisor.</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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- (1) The aquatic supervisor is an adult, properly trained and certified, responsible for the enforcement of safety rules and procedures governing all aquatic activity and be present during all aquatic activity.
- (2) The number of aquatic supervisors needed for an aquatic activity shall be 1 certified aquatic supervisor for up to 50 campers. For more than 50 campers, an additional certified aquatic supervisor is required.
- (3) Camps using MDEQ licensed public swimming pools shall verify the pool is currently licensed and in compliance with MDEQ standards for lifeguards. The camp is responsible for complying with R400.1111(number of staff) to ensure adequate supervision of campers. If pool not required to have lifeguards by MDEQ, the camp follows the standards for aquatic supervisors in subrule (2).
- (4) Certified aquatic supervisor is appropriate certified as specified in the high adventure statement for each aquatic activity and standards adopted by reference R400.11103.
- (5) The aquatics staff is not engaged in any activity that distracts them from their duties.

Findings:

### AREAS OF NON-COMPLIANCE/CORRECTIVE ACTION PLAN

Areas of non-compliance notated on this report as violations, require a corrective action plan (CAP). Violations requiring a written corrective action plan are noted within the report. If you fail to submit an acceptable corrective action plan, disciplinary action may result. The written corrective action plan is due 15 days from the date this inspection report was sent and must include the following:

- How compliance with each rule will be achieved.
- Identification of 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 designee and a date.

**Additional Comments:**  
C. Smith conducted the onsite inspection during summer 2025. There was an special investigation opened prior to the issuance of this report. The camp special investigation report #2025C0434019 included findings of violation. A corrective action plan was submitted on 12/12/25.

**RECOMMENDATION**

RENEWAL INSPECTION

- I recommend license issuance.
- CAP was received and approved onsite; I recommend license issuance.
- Contingent upon receipt of acceptable written CAP, I recommend a license issuance.
- Disciplinary action is recommended.

INTERIM INSPECTION

- I recommend the status of the license remains unchanged.
- CAP was received and approved onsite; I recommend license remains unchanged.
- Contingent upon receipt of acceptable written CAP, I recommend the status of the license remains unchanged.
- Disciplinary action is recommended.

Consultant's Signature	Consultant's Printed Name	Telephone Number	Date Report Sent
<i>James Vanden Heuvel</i>	James Vanden Heuvel	616-901-3730	12/15/2025

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