

Date Correction Plan Due 9/29/2025	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 608-422-6765
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Use of Form: This form is used by certification / licensing staff to identify statute and / or administrative rule violation(s) and to outline imposed plans of correction, if applicable. This form is used by certified operators / licensed centers to meet the requirements of DCF 202.065, DCF 250.04(2)(i) and (3)(d), DCF 251.04(2)(L) and (3)(f), DCF 252.41(1)(L) and (2)(k). Failure to submit an appropriate correction plan by the due date listed above may result in sanctions identified in the statute and / or administrative rule. Public Schools may submit plans of correction however are not required to do so.

Instructions: The Noncompliance Statement below identifies the violation(s) of child care statute and / or administrative rule identified by the certification / licensing specialist. Complete the section labeled "Correction Plan" by indicating the steps that will be taken to address and correct each of the listed noncompliance(s). Identify expected completion date(s) for each item. Return the original to your certification / licensing specialist for approval and retain a copy. If this is a licensed child care, post your copy of the noncompliance statement and correction plan near the license in accordance with Wis. Stat. 48.657. This request for a correction plan is not an order imposing a sanction or penalty pursuant to Wis. Stat. 48.715. If the department decides to apply a statutory sanction and / or penalty for facts arising from this finding or a future finding, you will be given a notice of the sanction and / or penalty and your appeal rights.

Name - Certified Operator / Licensed Center Westside Christian Preschool		Provider Number / Facility ID Number 4000577824 / 001 - 1004344		
Address - Facility (Street, City, State, Zip Code) 6815 Schneider Rd Middleton WI 53562		Telephone Number 608-831-8540	Date - Regulation Visit 9/11/2025	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.05(2)(a)1. Staff Record - Personal Information Description: Staff A was missing documentation of personal information, previous work experience and emergency contact information. Repeat violation: Previously cited on 4/4/2025	① print documents as soon as they are emailed, & file ② create a packet for new hires	9/20/25	
2	251.05(2)(a)3.a. Staff Record - Physical Examination Description: Staff A did not have a physical examination report within the 30 days of being hired that indicated the person was free of illness and able to work with children. Repeat violation: Previously cited on 4/4/2025	① <u>Request this at the time of the interview</u> , not later on.	9/20/25	

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3	<p>251.05(3)(b) Abusive Head Trauma Prevention Training</p> <p>Description: Staff A did not have documentation of having completed Shaken Baby Syndrome/Abusive Head Trauma Prevention Training prior to beginning to work with children under 5 years of age.</p>	<p>① Print documents as soon as they are emailed & file.</p>		
4	<p>251.05(3)(cm) Child Abuse & Neglect - Biennial Training</p> <p>Description: Staff A was missing documentation of having completed a child abuse and neglect training.</p> <p>Repeat violation: Previously cited on 4/4/2025</p>	<p>① Print documents as soon as they are emailed & file</p>		
5	<p>251.05(4)(a) Staff Orientation - Develop, Implement, Document</p> <p>Description: Staff A was missing documentation of having received an orientation within the first week of being hired.</p> <p>Repeat violation: Previously cited on 4/4/2025</p>	<p>Have the staff orientation check list be part of a new hire forms packet.</p>		
6	<p>251.06(11)(bm)3. Outdoor Play Equipment - Construction, Condition</p> <p>Description: Outdoor equipment was not safe when a children outdoor table was broken with sharp edges were accessible to children.</p>	<p>① Conduct a safety check of the playground 2x a year. The plastic table was removed.</p>		

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NAME - Agency Worker
Luzdarys Marquez

Date Issued
9/15/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Ellen Goetz

Date Signed
9/18/25