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| <b>Date Correction Plan Due</b><br>12/27/2023 | <b>NONCOMPLIANCE STATEMENT AND CORRECTION PLAN</b> | <b>TO FILE A COMPLAINT CALL</b> |
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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.

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| <b>Name - Certified Operator / Licensed Center</b><br>Mps - Carver CLC                              |  | <b>Provider Number / Facility ID Number</b><br>2000563892 / 128 - 2100144  |   |                              |
| <b>Address - Facility (Street, City, State, Zip Code)</b><br>1900 N 1St St Milwaukee, WI 53212-3705 |  | <b>Telephone Number</b><br>414-267-5781  | <b>Date - Regulation Visit</b><br>12/7/2023 |                              |
|   | <b>Rule/Statute Number<br/>Noncompliance Statement</b>   | <b>Correction Plan</b>   | <b>Expected<br/>Completion Date</b>         | <b>Verification<br/>Date</b> |
| 1   | 251.05(3)(c)<br><b>Cardiopulmonary Resuscitation Training</b><br>Description: Staff A does not have a certificate of completion on file within 3 months after beginning to work with children demonstrating that she has completed CPR with AED. | BGCGM Area Director and CLC Site Coordinator will ensure that all Carver BGC CLC staff will have proof of CPR certification in staff file and/ or schedule training to maintain current certification. | 1/19/2024                                   |                              |
| 2   | 251.05(3)(cm)<br><b>Child Abuse &amp; Neglect - Biennial Training</b><br>Description: Staff A does not have documentation on file demonstrating that she has completed the required biennial Child Abuse & Neglect training.                     | BGCGM Area Director and CLC Site Coordinator will ensure that all Carver CLC staff complete the required biennial child abuse and neglect training and place in staff file.                            | 1/19/2024                                   |                              |

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| <b>Rule/Statute Number</b>  | <b>Correction Plan</b> | <b>Expected Completion Date</b>   | <b>Verification Date</b>                    |
| <b>Noncompliance Statement</b>  |                        |   |   |

**NAME - Certification Worker / Licensing Specialist**

Date Issued



12/8/2023

**SIGNATURE - Certified Operator or Designee / Licensee or Designee**

Date Signed

*Leighton Cook*

12/20/2023