

Received

Date Correction Plan Due 4/10/2026	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 715-361-7700
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APR 13 26
DCF - NRC

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 Kays Kids		Provider Number / Facility ID Number 1000580541 / 001 - 1009905		
Address - Facility (Street, City, State, Zip Code) 146218 Dalton Dr Mosinee WI 544554343		Telephone Number 715-693-3626	Date - Regulation Visit 3/23/2026	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	250.07(6)(g)6. Handwashing For Persons Working With Children Description: Per observation, Provider put a collar on one of the dogs and did not wash her hands before going back to preparing lunch. Provider also took a paper towel and picked up food items off of the floor and did not wash hands before going back to preparing lunch.	Wash my hands when talking them and washing my hand after picking up food from the floor.		
2	250.07(7)(f) Pets & Animals - Food Area Restrictions Description: There was a dog that was in the kitchen while Provider was preparing lunch. The dog was also around the children while they were eating.	Moved dogs into living with a dog leash to the end tables/or put them in the bed rooms.		

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			Verification Date

NAME - Agency Worker
Bonnie Davis

Date Issued
3/27/2026

SIGNATURE - Certified Operator or Designee/ Licensee or Designee

Kay M. Kshall

Date Signed

3-7-26