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| Date Correction Plan Due 8/25/2023 | NONCOMPLIANCE STATEMENT AND CORRECTION PLAN | TO FILE A COMPLAINT CALL 715-361-7700 |
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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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| Name - Certified Operator / Licensed Center Excel Preschool | | Provider Number / Facility ID Number 0000589650 / 001 - 2004278 | | |
| Address - Facility (Street, City, State, Zip Code) 4500 Industrial Park Rd Stevens Point WI 544815014 | | Telephone Number 715-544-0832 | Date - Regulation Visit 7/19/2023 | |
| | Rule/Statute Number Noncompliance Statement | Correction Plan | Expected Completion Date | Verification Date |
| 1 | 251.04(2)(L)1.a. Monitoring Results Posted Description: The 07/07/22 noncompliance statement was not posted in a conspicuous area and visible to parents. | The 7/7/22 noncompliance statement was posted on 8/15/2023 by the license in the lobby. | 8 / 15 / 23 | |
| 2 | 251.04(6)(a)6m. Child Record - Immunization History Description: Two children did not have record of immunization history or a religious/personal conviction exemption. | Child 1: Faxed doctor for info on: 1/19/2023 2/21/2023 7/10/2023 8/15/2023 Will continue to fax for document. Child 2: Parent signed immunization form and completed it 8/15/2023. Filed in child file. | 9 / 15 / 23 | |

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| 3 | 251.04(6)(a)8.b. Child Record - Physical Exam - Over 2, Under 5 Description: One child did not have record of a health report. | Faxed doctor for info on: 1/19/2023 2/21/2023 7/10/2023 8/15/2023 Will continue to fax for document. | 9 / 15 / 23 |
| 4 | 251.05(2)(a)8. Staff Record - Orientation Description: One staff did not have record of an orientation. | Orientation document found and scanned into file. | 8 / 15 / 23 |

NAME - Agency Worker
Heather Struck

Date Issued
8/10/2023

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed
8/15/2023

Brittany Printz, BCBA