

## NONCOMPLIANCE STATEMENT AND CORRECTION PLAN

**Date Correction Plan Due**  
2/12/2024

**TO FILE A COMPLAINT CALL**  
608-422-6765

**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 notice of the sanction and / or penalty and your appeal rights.

**Name - Certified Operator / Licensed Center**  
Gods Kids

**Provider Number / Facility ID Number**  
9000590539 / 001 - 2006100

**Address - Facility (Street, City, State, Zip Code)**  
1440 Central Ave Beloit WI 535113849

**Telephone Number**  
608-362-9437

**Date - Regulation Visit**  
1/22/2024

|   | Rule/Statute Number<br>Noncompliance Statement   | Correction Plan                                 | Expected<br>Completion Date | Verification<br>Date |
|---|--|---|-----------------------------|----------------------|
| 1 | <p>250.04(2)(g)<br/><b>Liability Insurance If Dogs Or Cats Are Accessible</b></p> <p>Description: The center did not maintain liability insurance coverage that includes pets accessible to the children, when during the visit dog, Diggy was in the kitchen with the children.</p> | <p>Diggy will not be assessable to children</p> | <p>2/5/2024</p>             |                      |
| 2 | <p>250.04(2)(i)1.a.<br/><b>Monitoring Results Posted</b></p> <p>Description: The current noncompliance statement and correction plan was not posted next to the license.</p>   | <p>will post next to the license</p>            | <p>2/5/24</p>               |                      |

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3 250.04(6)(a)4.  
Child Record - Physical Exam  
Description: Child 1 did not have documentation of a physical examination on file and Child 2 did not have an updated physical examination on file.

Parents will take children in.

2/5/2024

4 250.06(2)(m)  
Premises - Condition & Repair  
Description: The premises was not maintained in a sanitary condition when the playroom floor was visibly dirty with what the provider stated was dried spilt milk.

Cleaned up immediately

2/5/2024

NAME - Agency Worker  
Rebecca Brickson

Date Issued  
1/29/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee

*Christine Street*

Date Signed

2/5/2024