

Date Correction Plan Due 12/26/2022	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.

Name - Certified Operator / Licensed Center Little Scholars Cc And Preschool		Provider Number / Facility ID Number 5000571415 / 002 - 1012175	
Address - Facility (Street, City, State, Zip Code) 3301 John Joanis Dr Stevens Point WI 544828858		Telephone Number 715-344-0205	Date - Regulation Visit 11/30/2022
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date Verification Date
1	251.05(2)(a)2. Staff Record - Completed Background Check Description: Staff A, B, C, and D were working at the center without a completed DCF background check.	<i>Background checks have been completed and Admin. has a plan in place to have them done as the very 1st task when the employee is hired in the future.</i>	12/13/22
2	251.05(2)(a)6. Staff Record - Days & Hours Worked Description: Staff in Yellow Room were not signed in at the time of the visit.	<i>Staff in yellow room were re-shown where and how they need to sign in upon entering and working in the classrooms.</i>	12/13/22

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3	251.06(3)(b)2. Emergencies - Practice Written Plans Description: Documentation of tornado and fire drills was not on file for August, September or October 2022.	<i>Admin. has a checklist that's now followed as a reminder to document drills after they are done for future drills.</i>	<i>12/15/22</i>

NAME - Agency Worker
Dezarae Wierzba

Date Issued
12/12/2022

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed