

Date Correction Plan Due 4/15/2026	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 715-361-7700
--	--	---

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 Grace Lutheran Child Care Center		Provider Number / Facility ID Number 9000566039 / 002 - 1001552		
Address - Facility (Street, City, State, Zip Code) 11266 State Highway 10 W Marshfield WI 54449		Telephone Number 715-676-2213	Date - Regulation Visit 3/10/2026	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.04(2)(L)1.a. Monitoring Results Posted Description: The most recent monitoring results were not posted in a visible area. Repeat violation: Previously cited on 9/5/2025	The director has posted the monitoring results back in their place on the parent wall and will make sure they remain there at all times.	3.10.2026	
2	251.05(2)(a)3.a. Staff Record - Physical Examination Description: Documentation of a physical examination was not on file for Staff A, B, E, and F. Repeat violation: Previously cited on 9/5/2025	Staff A & F have quit. Staff B had her physical on 4.20.2026 Staff E will have her physical on 4.24.2026	4.24.2026	

Name - Certified Operator / Licensed Center		Provider Number / Facility ID Number		
Grace Lutheran Child Care Center		9000566039 / 002 - 1001552		
Address - Facility (Street, City, State, Zip Code)		Telephone Number	Date - Regulation Visit	
11266 State Highway 10 W Marshfield WI 54449		715-676-2213	3/10/2026	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3	<p>251.05(2)(a)4.d. Staff Record - Educational Qualifications</p> <p>Description: Documentation of qualifications was not on file for Staff F.</p> <p>Repeat violation: Previously cited on 9/5/2025</p>	<p>Staff F has quit. Going forward (as stated before) staff will not be allowed to work until they have completed their courses to be qualified and have a certificate in hand.</p>	4.24.2026	
4	<p>251.05(3)(c) Cardiopulmonary Resuscitation Training</p> <p>Description: Documentation of current CPR training was not on file for Staff B.</p> <p>Repeat violation: Previously cited on 9/5/2025, 1/6/2025</p>	<p>Staff B completed and passed her CPR in person training on October Monday October 6th 2025. I have requested a reprint of her CPR card from the trainer.</p> <p>The Director will remind staff to give all certificates to her immediately upon completion.</p>	4.23.2026	
5	<p>251.05(3)(cm) Child Abuse & Neglect - Biennial Training</p> <p>Description: Documentation of current Child Abuse and Neglect training was not on file for Staff F.</p> <p>Repeat violation: Previously cited on 9/5/2025</p>	<p>Staff F completed Mandate Reporter Online training on 1.13.2025 & again on 9.8.2025 as the licenser from 9.5.2025 said they didn't see it in her file. Both are & were on file in staff F's file.</p> <p>Staff F has quit since the 3.10.2026 visit.</p>	<p>3.11.2026</p> <p>-was already on file under education & trainings</p>	
6	<p>251.055(1)(b) Supervision - Teacher Per Group Of Children</p> <p>Description: Staff F, who is not a qualified teacher, was the sole person supervising a group of infants.</p>	<p>Going forward when a lead teacher calls in the Director will move kids around or send kids home to make sure classrooms are in ratio with a qualified teacher or the Director who is qualified to be a teacher will cover that room.</p>	3.10.2026	

Name - Certified Operator / Licensed Center		Provider Number / Facility ID Number		
Grace Lutheran Child Care Center		9000566039 / 002 - 1001552		
Address - Facility (Street, City, State, Zip Code) 11266 State Highway 10 W Marshfield WI 54449		Telephone Number 715-676-2213	Date - Regulation Visit 3/10/2026	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
7	251.06(10)(dm)2. Potty Chairs - Disinfected Description: A potty chair in the toddler classroom had not been disinfected after use and contained dried urine in the bowl.	Staff have been retrained on potty training, potty chairs, and cleaning and disinfecting rules.	3.11.2026	
8	251.06(11)(b)7. Outdoor Play Space - Enclosure Description: Several areas of the outdoor space enclosure had gaps greater than four inches. Repeat violation: Previously cited on 9/5/2025, 6/6/2024	The Board of Directors were aware of gaps & had plans to fix them when the ground was not frozen. The Board President & Licensee came on 4.9.2026 and pounded the fence into the ground and fixed the gaps.	4.9.2026	
9	251.06(2)(b) Electrical Or Hot Surface Protection Description: Several outlets throughout the center were not protected by screens or guards to prevent children from touching them.	All staff have been reminded at our monthly staff meeting about replacing the outlet covers as soon as the outlet is done being used.	3.17.2026	
10	251.06(2)(i) Deteriorating Paint Description: There were several areas of deteriorating paint in indoor and outdoor areas of the center.	The Director and staff will make the time to repaint areas of each classroom where the paint is chipping/peeling off. We will keep extra of these colors on hand to repaint as soon as it is needed.	5.1.2026	

Name - Certified Operator / Licensed Center Grace Lutheran Child Care Center		Provider Number / Facility ID Number 9000566039 / 002 - 1001552	
Address - Facility (Street, City, State, Zip Code) 11266 State Highway 10 W Marshfield WI 54449		Telephone Number 715-676-2213	Date - Regulation Visit 3/10/2026
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date Verification Date
11	<p>251.07(6)(f)1.a. Medication Administration - Parent Authorization</p> <p>Description: A current parent authorization for an inhaler for Child 1 was not on file.</p> <p>A current parent authorization for Benadryl, an epi-pen, and an inhaler for Child 2 was not on file.</p> <p>A current parent authorization for an inhaler for Child 3 was not on file.</p> <p>Repeat violation: Previously cited on 9/5/2025</p>	<p>The Director has asked these families to provide an updated parent authorization to be put on file.</p> <p>The staff has been retrained on parent forms and life saving medication parent forms are good for one year.</p>	5.1.2026
12	<p>251.07(6)(f)1.b. Medication Administration - Containers & Labeling</p> <p>Description: An inhaler for Child 3 was not labeled with the child's name.</p> <p>Repeat violation: Previously cited on 9/5/2025</p>	<p>The parent of child 3 was asked to bring in the box for the inhaler whenever they wanted us to give child 3 their inhaler.</p>	3.10.2026

NAME - Agency Worker
Dezarae Wierzba

Date Issued
4/1/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Heather Stichel

Date Signed

4/23/2026