

Date Correction Plan Due 6/10/2025	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 715-930-1148
--	--	---

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 Superior Children's Center		Provider Number / Facility ID Number 9000578409 / 003 - 1014318	
Address - Facility (Street, City, State, Zip Code) 2416 Hill Ave Superior WI 54880		Telephone Number 715-395-1933	Date - Regulation Visit 5/16/2025
Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1 251.05(2)(a)3.a. Staff Record - Physical Examination Description: Staff C did not have a staff health report on file on the day of the monitoring visit. Repeat violation: Previously cited on 11/19/2024	Staff C was given health report form. Scheduled appointment for 6/17/25.	6/17/2025	
2 251.05(2)(a)5. Staff Record - High School Diploma Description: Staff C did not have documentation of having a high school diploma or it's equivalent on the day of the monitoring visit. Repeat violation: Previously cited on 11/19/2024	Staff C contacted family member for copy of diploma; also contacted school in North Dakota.	7/1/2025	

P.002/004

(FAX)

15:37

06/10/2025

P. 003/004

(FAX)

Name - Certified Operator / Licensed Center		Provider Number / Facility ID Number	
Superior Children's Center		9000578409 / 003 - 1014318	
Address - Facility (Street, City, State, Zip Code)		Telephone Number	Date - Regulation Visit
2416 Hill Ave Superior WI 54880		715-395-1933	5/16/2025
Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3 251.05(3)(c) Cardiopulmonary Resuscitation Training Description: Staff B did not have documentation of having current CPR on the day of the monitoring visit. Repeat violation: Previously cited on 11/19/2024	Staff Member B was given ProTraining.com site to complete the CPR course.	June 16, 2025	
4 251.05(3)(g)2. Assistant Child Care Teacher - Qualifications Description: Staff C has been employed as an assistant teacher since 2/19/24 and did not have documentation of qualifications in the file on the day of the monitoring visit.	Staff C given Registry information to complete on-line required training.	July 16, 2025	
5 251.06(2)(a) Potential Source Of Harm On Premises Description: On the day of the monitoring visit the parking lot had multiple pot holes in it, the back exit to the playground was partially obstructed with hoses and there were broken screens near or on windows.	Contacted contractor to complete screen repairs and parking lot pot holes. Staff removed hose from playground exit area and instructed to store hose in the outdoor shed at all times.	August 31, 2025 May 19, 2025	

06/10/2025 15:38

P. 004/004

(FAX)

Name - Certified Operator / Licensed Center Superior Children's Center		Provider Number / Facility ID Number 9000578409 / 003 - 1014318	
Address - Facility (Street, City, State, Zip Code) 2416 Hill Ave Superior WI 54880		Telephone Number 715-395-1933	Date - Regulation Visit 5/16/2025
Rule/Statute Number Noncompliance Statement		Correction Plan	Expected Completion Date
6	251.06(4)(d) Exits & Passageways - Unobstructed, Minimum Width Description: Exits and passageways shall have a minimum clear width of 3 feet and be unobstructed by furniture or other objects. The center has multiple 1/2 doors that do not have a one hand one motion handle which is considered an obstruction.	Contractors contacted to review options to replacing handles.	August 31, 2025

06/10/2025 15:38

NAME - Agency Worker
Kimberly Jasper

Date Issued
5/27/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed
6/9/2025