NONCOMPLIANCE STATEMENT AND CORRECTION	TO FILE A COMPLAINT CALL	
PLAN	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 Growing Stars Child Development Center			Provider Number / Facility ID Number 3000588983 / 001 - 2003114		
Address - Facility (Street, City, State, Zip Code) 711 W Montgomery St Sparta WI 546561161 NOV 3 0 2022		Telephone Number 608-269-2271	Date - Regulation Visit 11/14/2022		
Rule/Statute Number Noncompliance Statement	Skate of Wisconsin	milies	Correction Plan	Expected Completion Date	Verification Date
1 251.04(8)(b) Biennial Training - Child Abuse & Ne Description: Staff C was missing docur training within the past two years on ch identification, and reporting. Repeat violation: Previously cited on 2	nentation of having received abuse and neglect laws,	Staff that have left and come back to fill in will be treated like a new employee and will get full orientation with required trainings.		11/30/22	
2 251.06(3)(b)2. Emergencies - Practice Written Plans Description: The center did not practice drill in October 2022.		pla	endou tand preformed throse dougs.	11/30/22	

Name - Certified Operator / Licensed Center Provider Number / Facility ID Number					
Growing Stars Child Development Center Address - Facility (Street, City, State, Zip Code) 711 W Montgomery St Sparta WI 546561161		300058 Telephone Number 608-269-2271	Date - Regulation Visit 11/14/2022		
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date	
3	251.06(4)(j) Fire Alarms & Smoke Detectors - Maintenance, Drills, Testing Description: There was no documentation showing that fire alarms and smoke detectors were tested for the month of October 2022 due to not practicing a fire drill during this month. All fire alarms and smoke detectors shall be tested monthly and a record kept of the test results.	Fire drills will be planned and written on the calendar and preformed on those clays. Smoke detectors/Exit lights will be Checked Same day.	11/30/22		
4	251.07(6)(f)6. Current Authorizations For Medications On Premises Description: The center did not have a current parent authorization form for one child's prescription medication. A current medical authorization from the parent is required when medication is kept on the daycare premises. In addition, the medication itself had expired in September.	We will carefully look at the prescription and box of medication to have arrect date of non-use or expiration dott. We will have list of medications and expiration dates listed in office	11/30/22		

NAME - Agency Worker Jennifer Stubbe	Date Issued 11/25/2022
SIGNATURE - Agency Worker Wichelle Schulin	Date Signed
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