DEPARTMENT OF CHILDREN AND FAMILIES
Division of Early Care and Education

STATE OF WISCONSIN

Date Correction Plan Due 10/15/2026	**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		Provider Number / Facility ID Number
Safe Haven Christian Academy		1000594261 / 001 - 2009142
Address - Facility (Street, City, State, Zip Code) 9241 Cth J Minocqua WI 545489321	**Telephone Number** 715-358-5437	**Date - Regulation Visit** 9/22/2026

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.055(1)(a) **Supervision Of Children** Description: Per observation, children left the classroom to go down the hall. The teacher left the classroom to get the children, in turn, leaving the other children in the classroom unsupervised.	A gate installed on classroom door to prevent children from leaving.	10.20.26	
2	251.06(3)(b)4. **Emergencies - Record Of Fire / Tornado Drills** Description: There is no documentation of emergency drills being completed in August 2026.	Drills added to monthly calendar as to not be missed.	10.20.26	

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3	251.07(4)(e) **Naps Or Rest Periods - Bedding Maintenance, Storage, Cleanliness** Description: Bedding and blankets are not being stored in a sanitary manner. It is being stored on the floor or in a pile on a shelf where the items are touching.	Teachers reminded to use the storage shelf for bedding.	10.20.26	
4	251.07(5)(b)5. **Eating Surfaces - Cleaned, Sanitized** Description: High chairs were not cleaned and sanitized prior to eating snack. Per staff interview, the sanitizer is not being made per label instructions.	Re-educate staff that bleach & water ratios, as written on the bottles & remind that they are to be made each day. Re-train on proper sanitization within the classroom.	10.20.26	
5	251.07(6)(i)1. **Washing Child's Hands & Face** Description: Children did not wash their hands with soap and warm water prior to eating snack.	Retrain staff on proper hand washing and sanitation procedures.	10.20.26	

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6	251.07(6)(i)2. **Adult Handwashing** Description: A staff member did not wash her hands with soap and warm water after blowing her nose.	Retrain staff on proper handwashing and sanitation	10.20.26	
7	251.09(4)(a)3. **Infant & Toddler - Diaper Changing Surface Disinfection** Description: Per staff interview, the disinfectant used to clean the diaper changing surface is not being prepared as indicated on the bottle.	Reviews with staff the importance of waiting the designated time for proper disinfectant.	10.20.26	

NAME - Agency Worker
Brooke Lampe

Rachael Kirby

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Issued
10/1/2026

10.16.26
Date Signed