

<b>Date Correction Plan Due</b> 5/19/2025	<b>NONCOMPLIANCE STATEMENT AND CORRECTION PLAN</b>	<b>TO FILE A COMPLAINT CALL</b> 920-785-7811
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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.

<b>Name - Certified Operator / Licensed Center</b> Mequon Jewish Preschool		<b>Provider Number / Facility ID Number</b> 7000577727 / 002 - 1008734		
<b>Address - Facility (Street, City, State, Zip Code)</b> 11112 N Crown Ct Mequon WI 53092		<b>Telephone Number</b> 262-242-5437	<b>Date - Regulation Visit</b> 4/28/2025	
	<b>Rule/Statute Number</b> <b>Noncompliance Statement</b>	<b>Correction Plan</b>	<b>Expected Completion Date</b>	<b>Verification Date</b>
1	251.05(2)(a)4.a. <b>Staff Record - Registry Certificate</b>  Description: Based on records review, staff member B did not have a Registry Certificate on file.	Certificate is listed on Registry Website Staff B renewed her Registry account & will print the certificate as soon as she can	6/3/25	
2	251.06(2)(f) <b>Telephones &amp; Emergency Phone Numbers</b>  Description: Rooms #2,3 and the Gymnasium did not post emergency numbers for the following: The numbers for the local Fire Department, Police Department, Poison Control, and emergency medical services.  Repeat violation: Previously cited on 5/10/2023	Will update and post emergency numbers in all classrooms. (We are getting new intercom system so waiting to update with the new information)	6/3/25	

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3	251.06(2)(i) <b>Deteriorating Paint</b>  Description: In rooms #3 and #4, some of the walls had chipped paint.	Filled the holes and areas of chipped paint	Completed 5/1/25	
4	251.06(6)(b)2.a. <b>Private Well - Annual Nitrate Test</b>  Description: The center did not have a current water test result for nitrate.	Test had been taken; results were sent in as soon as they were received.	Completed 5/5/25	
5	251.06(9)(d)1.c. <b>Food Storage - Cold Storage Thermometers</b>  Description: The refrigerator in Infants Room #1, did not have a thermometer in the freezer.	Put thermometer in the freezer in Room #1	Completed 4/28/25	
6	251.07(4)(c) <b>Naps Or Rest Periods - Sleeping Surfaces - Children Under 1</b>  Description: In Infants Room # 1, there was a crib that was less than 2 feet apart from another crib.	Moved the cribs more than 2 feet apart.	Completed 4/28/25	

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7	251.09(1)(L) <b>Infant &amp; Toddler - Soft Materials In Cribs</b>  Description: In Infant's Room #1, there was a crib that had a sleep sack hanging down into the crib from a top rail.	Spoke with teacher when she returned from vacation, and with those that may substitute in the room about this	Completed 5/5/25

**NAME - Agency Worker**  
Gloribel Tegen

Date Issued  
5/5/2025

**SIGNATURE - Certified Operator or Designee / Licensee or Designee**

Date Signed

5/13/2025