

Date Correction Plan Due 12/11/2024	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 715-930-1148
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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.

Name - Certified Operator / Licensed Center Kiddle Campus Child Care And Preschool		Provider Number / Facility ID Number 1000588041 / 003 - 2002294		
Address - Facility (Street, City, State, Zip Code) 12137 State Road 70 Grantsburg WI 548408064		Telephone Number 715-463-5044	Date - Regulation Visit 11/25/2024	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	<p>251.04(6)(a)8.a. Child Record - Physical Exam - Under 2</p> <p>Description: Child # 10 was missing documentation of having received a follow up health examination within the past 6 months. The most current health exam on file was dated 11/27/23.</p>	<p><i>Parent completed health exam on 11-25-24.</i></p>	11-25-24	
2	<p>251.04(6)(b) Current, Accurate Daily Attendance Record</p> <p>Description: The attendance was not current and accurate in the Infant Room when four children were observed in care and no one was signed in on the attendance record.</p>	<p><i>Staff are trained to document attendance immediately after child arrives & departs.</i></p>	11-25-24	

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3	251.07(6)(f)6. Current Authorizations For Medications On Premises Description: There was not a current written authorization to administer medication form for a child's Ventolin. In addition, the previous authorization indicated to dispense, "as needed," without identifying symptoms or intervals by which to administer the medication.	Staff have been informed to document exact instructions of when to administer medications as per instructions from prescription.	11-25-24
4	251.09(1)(c) Infant & Toddler - Documenting Changes In Development Description: Documentation of changes in a child's development and routines every three months by a child care worker based on discussion with the parent were not observed for child # 5.	Staff will document due dates for updating changes in development in classroom calendar.	12-4-24

NAME - Agency Worker
Wendy Badzinski, April Callihan

Date Issued
11/27/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed

A. Phemetton

12-4-24