Date Correction Plan Due 3/9/2022

## NONCOMPLIANCE STATEMENT AND CORRECTION PLAN

TO FILE A COMPLAINT CALL 262-446-7800

**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                                  |   |                                  | Provider Number / Facility ID No    | r / Facility ID Number |  |
|--|---|----------------------------------|-------------------------------------|------------------------|--|
| Kind   | lercare Learning Ctrs-Bluemound   | 0000555710 / 009 - 220260        |                                     |                        |  |
| Address - Facility (Street, City, State, Zip Code)  18205 W Bluemound Rd Brookfield WI 53045 |   | Telephone Number<br>262-792-1112 | Date - Regulation Visit<br>2/8/2022 |                        |  |
|  | Rule/Statute Number<br>Noncompliance Statement  | Correction Plan                  | Expected<br>Completion Date         | Verification<br>Date   |  |
| 1  | 251.04(3)(m)  Report - Communicable Disease  Description: Center failed to report multiple cases of a communicable disease to the Department.   | Report Disease<br>to licensing   | 21812022                            | 2/8/2022               |  |
| 2  | 251.04(6)(b)  Current, Accurate Daily Attendance Record  Description: Attendance was not current and accurate at the time of licensing review. A child was checked into a classroom but was not present at the facility, child had departed for school earlier. | Reviewed CSR/APP<br>expectations | 21812027                            | 21812022               |  |

| Name - Certified Operator / Licensed Center Provide  |   |  | ler Number / Facility ID Number     |                      |
|--|---|--|-------------------------------------|----------------------|
| Kin  | dercare Learning Ctrs-Bluemound   | 555710 / 009 - 220260  |                                     |                      |
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| 3  | 251.055(1)(f) Child Tracking Procedure  Description: The implemented tracking procedure failed at the time of licensing visit. 14 children were noted on the PreK classroom list, however 15 children were observed in the room. A child was not properly tracked from a different classroom.   | Reviewed App/tracking<br>Procedures                              | 21812022                            | 21812022             |
| 4  | 251.055(2)(a) <b>Group Size - Maximum</b> Description: Center exceeded the maximum group size when nine (9) infants were together in a group in the morning; the maximum group size is eight (8) for children under the age of two.   | Reviewed rotto / group<br>Sizes w/ Staff<br>made on Am Plan      | 21912022                            | 2/9/2022             |
| 5  | 251.06(2)(d)  Access To Materials Potentially Harmful To Children  Description: Materials potentially harmful were not stored in areas inaccessible to children at the time of licensing visit. An unlocked cabinet, with chemicals inside labeled keep out of reach of children, was accessible in the bathroom in the PreK classroom. | Ordered a lock on 2/8/2022 Recived lock 2/10/2022 Placed on Poor | 2/10/2022                           | 2/10/2022            |

| Name - Certified Operator / Licensed Center  Kindercare Learning Ctrs-Bluemound |   | Provider Number / Facility ID Number 0000555710 / 009 - 220260                        |                             |                      |
|---|---|---|-----------------------------|----------------------|
|   |   |   |                             |                      |
|   | Rule/Statute Number<br>Noncompliance Statement  | Correction Plan   | Expected<br>Completion Date | Verification<br>Date |
| 6   | 251.06(2)(n)  Garbage Containers - Construction & Disposal Schedule  Description: A garbage container located in the Pre-K classroom lacked a complete cover at the time of licensing visit. The cover was broken and unable to fully close.  | ordered a new garbage<br>Cantid 21812022<br>lid carrived treplaced on<br>211012022    | 211012022                   | 2110/2032            |
| 7   | 251.06(9)(c)1.  Safe Food  Description: Food observed at the facility was not free from spoilage and safe for human consumptions at the time of licensing visit. An open container of infant rice cereal was observed dated November 2021, container states to use within 30 days of opening. | Reviewed food Softry<br>Up Staff<br>2/8/2022  | 21812022                    | 21812022             |
| 8   | 251.06(9)(d)1.c. Food Storage - Cold Storage Thermometers  Description: The kitchen freezer lacked a clearly visible, accurate thermometer at the time of licensing visit.  | ordered New thermometer for freezer 189 2/8/2022 recieved / placed in freezer 2/10/20 | 2/1012022<br>32             | 2/10/2022            |
| 9   | 251.07(6)(dm)3.a.  Medical Log - Observation Or Evidence Of Injury  Description: A child was observed at the facility with a cut above their eye, which was stated to have occurred at home. The injury was not documented in the medical log book.   | Reviewed medical log<br>expectations<br>W/ Staff                                      | 219/2022                    | 219/2022             |

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|--|--|---|--------------------------------------|----------------------|
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| Address - Facility (Street, City, State, Zip Code)  18205 W Bluemound Rd Brookfield WI 53045 |  | <b>Telephone Number</b> 262-792-1112                        | Date - Regulation Visit<br>2/8/2022  |                      |
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| 10   | 251.07(6)(dm)3.b.  Medical Log - Injury In Care  Description: A child received an injury while in care of the center, the injury was not logged in the medical log book. Injury was noted on the center accident form.                                       | Reviewed medical log<br>expectornts woll                    | 211012022                            | 211612022            |
| 11   | 251.09(1)(b) Infant & Toddler - Location & Sharing Intake Information  Description: A child, present in the toddler room, lacked an intake form available within the room they were being cared for in. The intake form was located in the infant room/area. | Reviewed / up dated<br>Intake firms<br>2/8/2022 - 2/10/2022 | 2/10/2022                            | 2/10/2022            |

**NAME** - Certification Worker / Licensing Specialist Kayla Sands

Date Issued 2/22/2022

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed
3/1/2622