

Date Correction Plan Due 10/4/2024	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 608-422-6765
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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		Provider Number / Facility ID Number		
Kindercare Learning Ctr-Old Sauk		0000555710 / 016 - 120162		
Address - Facility (Street, City, State, Zip Code)		Telephone Number	Date - Regulation Visit	
7126 Old Sauk Rd Madison WI 53717		608-831-1223	8/19/2024	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	<p>251.05(2)(a) Staff Record - Maintenance & Availability</p> <p>Description: Staff B file was not available to be reviewed by the Licensing Specialist.</p> <p>Repeat violation: Previously cited on 10/25/2023</p>	<p><i>Staff B will is no longer working here</i></p>	<p><i>2/24/25</i></p>	
2	<p>251.05(2)(a)1. Staff Record - Personal Information</p> <p>Description: Staff A was missing documentation of personal information, previous work experience and emergency contact information.</p>	<p><i>staff A's file has been corrected</i></p>	<p><i>2/24/25</i></p>	

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3	251.05(2)(a)3.a. Staff Record - Physical Examination Description: Staff A did not have a physical examination report within the 30 days of being hired that indicated the person was free of illness and able to work with children.	Staff A has since gotten her physical in her file.	8/19/2024	
4	251.05(2)(a)6. Staff Record - Days & Hours Worked Description: Staff from Infants A and Infants C did not sign out to the rooms when there were not present.	Staff. has been returned and closely monitored while doing CPR's.	8/19/2024	
5	251.05(3)(c) Cardiopulmonary Resuscitation Training Description: Staff A did not have a current certificate of completion for infant and child cardiopulmonary resuscitation and automated external defibrillator use.	Staff A- is working with her team to get her CPR completed as quickly as possible.		

NAME - Agency Worker
Luzdarys Marquez

Date Issued
9/19/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed

Carla J. Nunez - Center Director

8/20/2024