

Date Correction Plan Due 11/13/2025	<b>NONCOMPLIANCE STATEMENT AND CORRECTION PLAN</b>	TO FILE A COMPLAINT CALL 262-446-7800
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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> St Edward's Child Development Ctr		<b>Provider Number / Facility ID Number</b> 3000566833 / 001 - 1000154		
<b>Address - Facility (Street, City, State, Zip Code)</b> 1430 Grove Ave Racine WI 53405		<b>Telephone Number</b> 262-636-8051	<b>Date - Regulation Visit</b> 10/29/2025	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.06(9)(b)5. <b>Mechanical Dishwashing - Home-Type Dishwasher</b>  Description: The dishes were not sanitized after washing in the home-your dishwasher or after hand washing.	Food Grade sanitizer will be used after dishwasher.  Dishes will go through dishwasher and then be submerged into sanitizer then left to air dry on drying racks.	11/4/2025	
2	251.06(9)(d)1.b. <b>Food Storage - Refrigeration Units</b>  Description: The refrigerator registered a temperature above 40 degrees.  Repeat violation: Previously cited on 11/8/2023	Refrigerator was open and being stocked prior to checking the temperature.  Temperature was adjusted and proper cooling was verified on thermometer within 30 minutes.  Refrigerator is checked daily to ensure proper temperatures are registering	11/4/2025	

**NAME - Agency Worker**  
Jennifer Brees

**Date Issued**  
10/29/2025

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

*J. Gurbelt*

**Date Signed**

*11/4/2025*