

NONCOMPLIANCE STATEMENT AND CORRECTION PLAN

Date Correction Plan Due
10/17/2025

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 / Facility ID Number		
The Nestling Place Childcare Ctr		9000557699 / 001 - 225181		
Address - Facility (Street, City, State, Zip Code)		Telephone Number	Date - Regulation Visit	
4214 Sheridan Rd Racine WI 53403		262-554-6515	10/2/2025	
Rule/Statute Number	Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.05(2)(a)3.a. Staff Record - Physical Examination Description: Documentation of a physical exam was not observed for an employee. Repeat violation: Previously cited on 1/23/2025	Director will review staff files monthly. Staff has a scheduled doctor appointment	10/10/25	
2	251.05(2)(a)6. Staff Record - Days & Hours Worked Description: Staff were not all signed into the classrooms they were working in to document for staff to child ratio is met.	Management will go around daily to verify sign ins	10/31/25	

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3 251.06(4)(a) Fire Extinguishers - Operable, Inspected, Labeled Description: Fire extinguishers were tagged August of 2024	Custodial is contacting Puell City for inspection	10/31/25	
4 251.06(9)(d)1.b. Food Storage - Refrigeration Units Description: The refrigerator in Caterpillars measured above 40 degrees Repeat violation: Previously cited on 4/4/2024	Management will perform weekly checks. Will replace fridge	10/31/25	
5 251.09(1)(c) Infant & Toddler - Documenting Changes In Development Description: Documentation of changes in development was not observed for several children. Repeat violation: Previously cited on 1/23/2025	One point person being established by manage- ment to follow up & document changes Pre - stating not ok	10/31/25	
6 251.09(1)(k) Infant & Toddler - Bedding Description: An infant was observed to be wrapped in a blanket, which was near his face, while sleeping. Repeat violation: Previously cited on 1/23/2025	Management had verbal conversation w/ staff will continue to monitor and follow up w/ training as needed.		

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7	<p>251.09(2)(bm) Infant & Toddler - Sleep Position Description: Two infants were observed sleeping on the floor in boppy pillows.</p>	<p>Management had verbal conversations with staff will monitor and follow up with training as needed</p>	10/31/25	
8	<p>251.09(3)(a)2. Infant & Toddler - Food & Formula Brought From Home Description: Containers of rice cereal and formula were not dated.</p>	<p>Rice cereal and formula was dated. followed up with staff + families to date appropriately</p>	10/10/25	

Date Issued
10/3/2025

NAME - Agency Worker
Colleen Hanser, Tiisha Harrell

Date Signed
10/10/25

SIGNATURE - Certified Operator or Designee / Licensee or Designee