

DEPARTMENT OF CHILDREN AND FAMILIES
Division of Early Care and Education

TO FILE A COMPLAINT CALL

Date Correction Plan Due
2/6/2025

NONCOMPLIANCE STATEMENT AND CORRECTION PLAN

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 202.005, DCF 250.04(2)(i) and (3)(d), DCF 251.04(2)(L) and (3)(i), 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. 48.057. 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

Mary's Child Care

0000560259 / 004

Address - Facility (Street, City, State, Zip Code)
4100 Saint Clair St Racine WI 534023008

Telephone Number
262-721-8721

Date - Regulation Visit
1/23/2025

Rule/Statute Number	Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	202.08(4)(a)1. For Each Child Under 2 Years Of Age, A Report Of A Physical Examination Conducted Not More Than 6 Months Prior To Nor Later Than 3 Months After The Child Is Admitted, And A Follow-Up Health Examination At Least Once Every 6 Months Thereafter. Description: Child 2 missing updated health report.	The parent correct it on 01/31/2025 Got the paper work from the parent 2-5-2025	1/31/2025	02-05-25

RECEIVED
FEB 05 2025
BY: *[Signature]*

Provider Number / Facility ID Number

9000566269 / 004

Name - Certified Operator / Licensed Center

Mary's Child Care

Address - Facility (Street, City, State, Zip Code)
4100 Saint Clair St Racine WI 534023008

Telephone Number
262-721-8721

Date - Regulation Visit
1/23/2025

Correction Plan

Expected Completion Date

Verification Date

2

Rule/Statute Number
Noncompliance Statement

202.08(5)(I)
The Certified Child Care Operator Shall Keep Current And Accurate Written Records Of The Daily Hours Of Attendance Of Each Child In Care, Including The Actual Arrival And Departure Time Times For Each Child. If Children Are Transported To Or From The Premises Or School By The Operator Or Another Provider On Behalf Of The Operator, The Daily Attendance Record Shall Include The Actual Time The Child Was Picked Up Or Dropped Off.

Description: Provider continues to round the arrival and departure times for each child in care on attendance records.

1/23/2025 i corrected the arrival time and departure time for each kid i can only have 3 on first shift so my 4th child comes later in the day. soon as they come in i write the time down and soon as they leave i write the time out they leave

1/23/2025

1/23/2025

RECEIVED
FEB 05 2025
BY: [Signature]

NAME - Agency Worker
emaja McClain

Date Issued
1/23/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

[Signature]

Date Signed
2/5/2025