Date Correction Plan Due	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL
7/29/2026		715-361-7700

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
Children's Discovery Center	5000569345 / 012 - 1014793

Address - Facility (Street, City, State, Zip Code)	Telephone Number	Date - Regulation Visit
3109 John Joanis Dr Stevens Point WI 544828800	715-544-4991	6/29/2026

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.06(2)(d) **Access To Materials Potentially Harmful To Children** Description: Diaper creams labeled "keep out of reach of children" were in reach of children in the bathroom of Room 8.	Moved to a new location	6/30	
2	251.07(5)(a)9. **Special Diets - Medical Condition** Description: Two supplements in Room 2 were not accompanied by written instruction from a doctor. Upon parent request one supplement was to be discarded six weeks after opening. The supplement was first administered on 02/09/26 and was not discarded within six weeks.	Sent home and Staff will go through the training process again for expectations	7/24	

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Children's Discovery Center		5000569345 / 012 - 1014793	
Address - Facility (Street, City, State, Zip Code) 3109 John Joanis Dr Stevens Point WI 544828880	**Telephone Number** 715-544-4991	**Date - Regulation Visit** 6/29/2026	

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3	251.07(6)(f)1.a. **Medication Administration - Parent Authorization** Description: The parent authorization for one medication in Room 4 was authorized as needed and did not include specific intervals. The length of the authorization exceeded the product label recommendations. The parent authorizations for two medications in Room 9 did not include specific dates and/or times to administer. Repeat violation: Previously cited on 9/20/2024	Staff will go through policy/procedure and practice. Sign will be added to support for follow-up w/ checking classroom documents.	7/24	
4	251.09(3)(a)10. **Infant & Toddler - Open Containers, Leftover Food** Description: A container of baby food in Room 2 had not been covered prior to refrigeration after being opened.	Closed containers were brought to be used w/ lids.	7/20	

NAME - Agency Worker	Date Issued
Heather Struck, Amanda Foley	7/15/2026
SIGNATURE - Certified Operator or Designee / Licensee or Designee Samantha Zimmerman	Date Signed 7/20/26