

<b>Date Correction Plan Due</b> 7/14/2025	<b>NONCOMPLIANCE STATEMENT AND CORRECTION PLAN</b>	<b>TO FILE A COMPLAINT CALL</b> 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.

<b>Name - Certified Operator / Licensed Center</b> Ginger Bread House Child Care		<b>Provider Number / Facility ID Number</b> 1000576821 / 002 - 1008974		
<b>Address - Facility (Street, City, State, Zip Code)</b> 4896 Larson Beach Rd Mcfarland WI 535588724		<b>Telephone Number</b> 608-838-5105	<b>Date - Regulation Visit</b> 6/19/2025	
	<b>Rule/Statute Number</b> <b>Noncompliance Statement</b>	<b>Correction Plan</b>	<b>Expected Completion Date</b>	<b>Verification Date</b>
1	251.04(3)(i) <b>Report - Unknown Whereabouts Or Left Premise</b>  Description: The center did not submit a report to the department after an incident occurred where they did not know the whereabouts of a child in care. While on a field trip, the program left a child at a park for 20 minutes on June 12, 2025.	Parents were notified at time of incident. We will submit all injuries and report all incidents to the department in 24 hours.	6/20/25	
2	251.04(6)(a)6. <b>Child Record - Health History</b>  Description: Health History information was not file for child A.	We will ensure all health histories are copied and in the assigned field trip binder	6/20/25	

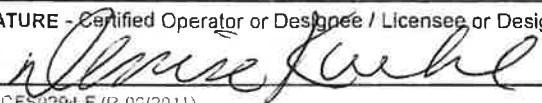
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3	251.055(1)(a) <b>Supervision Of Children</b>  Description: Each child was not supervised by a child care worker when the program left a child at a park for approximately 20 minutes during a field trip on June 12, 2025.	We will count multiple times and roll call children by names to ensure each child is accounted for and supervised	6/20/25	
4	251.055(1)(f) <b>Child Tracking Procedure</b>  Description: The center did not successfully implement a procedure to ensure that the number, names, and whereabouts of the children in care are known to assigned child care worker at all times. While on a field trip, the program left a child at a park for 20 minutes.	We will count kids. Do a roll call by each child's name we will also have them separated by class on the bus and do another count again	6/20/25	
5	251.08(2) <b>Permission &amp; Emergency Information</b>  Description: The center did not obtain or bring a emergency information each child to take during the field trip.	We will ensure we have all emergency information for each child in the field trip binder.	6/20/25	

**NAME - Agency Worker**  
Michelle Garcia, Sarah Stormont

**Date Issued**  
6/30/2025

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

**Date Signed**



7/11/2025