

NONCOMPLIANCE STATEMENT AND CORRECTION PLAN

PLAN

TO FILE A COMPLAINT CALL
715-930-1148

Date Correction Plan Due
6/28/2024

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 Bear Buddies Child Dev Ctr
Provider Number / Facility ID Number 9000577779 / 002 - 1006715

Address - Facility (Street, City, State, Zip Code) 245 W Paperjack Dr New Richmond WI 54017
Telephone Number 715-246-7600
Date - Regulation Visit 5/8/2024

Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
<p>1 251.07(6)(dm)3.a. Medical Log - Observation Or Evidence Of Injury</p> <p>Description: During the course of a complaint investigation, it was determined staff did not record any evidence of unusual bruises seen on a child in the medical log as required by rule.</p>	<p>Any marks on a child will be documented immediately in the log book.</p>	06/14/24	
<p>2 251.07(6)(f)1. Washing Child's Hands & Face</p> <p>Description: During the course of a complaint investigation, multiple staff in the Yogi room were observed not washing children's hands after diapering as required by rule.</p>	<p>Diaper changing steps were reviewed by staff. All children's hands will be washed after diaper changing.</p>	06/14/24	

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Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3 Adult Handwashing Description: During the course of a complaint investigation, multiple staff in the Yogi room were observed not washing their hands before and after assisting with toileting and diapering. Rule requires hands to be washed with soap and running water before and after each diapering.	Diaper changing steps were reviewed by staff. Hands will be washed before and after diaper changing.	06/14/24	

NAME - Agency Worker
 Matthew Peterson
 Date Issued
 6/14/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee

 Date Signed
 06/19/2024