

Date Correction Plan Due	<b>NONCOMPLIANCE STATEMENT AND CORRECTION PLAN</b>	TO FILE A COMPLAINT CALL 920-785-7811
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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.

Name - Certified Operator / Licensed Center K's Play Days		Provider Number / Facility ID Number 6000585746 / 001 - 1015380	
Address - Facility (Street, City, State, Zip Code) 1300 Midway Rd Menasha WI 54952		Telephone Number 920-722-7102	Date - Regulation Visit 6/22/2022
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date
1	251.06(3)(b)2. <b>Emergencies - Practice Written Plans</b>  Description: Based on record review the program failed to practice and implement fire/tornado drills monthly. The center failed to practice and implement emergency drills in the month of May 2022.	The center will create an alarm to make sure fire & tornado drills are performed monthly	8/1/22
2	251.06(3)(b)4. <b>Emergencies - Record Of Fire / Tornado Drills</b>  Description: Based on record review the program failed to keep a record of dates and times all fire and tornado drills are practiced.	A reminder will be placed on the calendar to make sure drills are recorded.	8/1/22

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	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date Verification Date
3	<p>251.06(4)(j) Fire Alarms &amp; Smoke Detectors - Maintenance, Drills, Testing</p> <p>Description: Based on record review the program failed to test fire alarms and smoke detectors monthly. The center failed to test fire alarms and smoke detector in the month of May 2022.</p>	<p>A reminder will be placed on the calendar to ensure fire alarms and smoke detectors are tested monthly.</p>	<p>8/1/22</p>

NAME - Certification Worker / Licensing Specialist  
Cassandra Debauche

Date Issued  
6/29/2022

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed  
6/30/22