

DEPARTMENT OF CHILDREN AND FAMILIES
Division of Early Care and Education

STATE OF WISCONSIN

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| Date Correction Plan Due 7/10/2024 | NONCOMPLIANCE STATEMENT AND CORRECTION PLAN | 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.

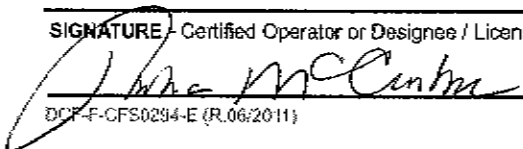
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| Name - Certified Operator / Licensed Center K's Play Days | | Provider Number / Facility ID Number 6000585746 / 001 - 1015380 | |
| Address - Facility (Street, City, State, Zip Code) 1300 Midway Rd Menasha WI 54952 | | Telephone Number 920-722-7102 | Date - Regulation Visit 6/25/2024 |
| | Rule/Statute Number Noncompliance Statement | Correction Plan | Expected Completion Date |
| 1 | 251.05(2)(a)2. Staff Record - Completed Background Check Description: Based on a complaint investigation a staff member's boyfriend is on the premise with unrestricted access to the center failed to have a background check. Repeat violation: Previously cited on 6/4/2024 | Boyfriend was told he has to remain in the vehicle or complete a background check. | July 4th 2024 |

NAME - Agency Worker
Cassandra Debauche

Date Issued
6/26/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed



7/4/24