

NONCOMPLIANCE STATEMENT AND CORRECTION PLAN

TO FILE A COMPLAINT CALL
608-422-6765

Date Correction Plan Due
3/5/2026

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

Great Beginnings Learning Ctr Llc

Provider Number / Facility ID Number

3000585773 / 001 - 1015579

Address - Facility (Street, City, State, Zip Code)
1285 N 2Nd St Platteville WI 53818

Telephone Number
608-348-7003

Date - Regulation Visit
1/27/2026

**Rule/Statute Number
Noncompliance Statement**

Correction Plan

**Expected
Completion Date**

**Verification
Date**

1
251.07(6)(f)1.a.
Medication Administration - Parent Authorization
Description: Medical authorization forms was not dated for the length of authorization.

Staff have been reminded that recurrent daily medications such as epi pens, lactose pills, and iron supplements still need a specific end date which can be the expiration date.

2/20/2026

2
251.07(6)(f)1.b.
Medication Administration - Containers & Labeling
Description: An epi pen was not in the original container.

All prescription medications will be stored in their original container. This specific epi pen will be placed with a note from the doctor with the child's name, dosage, and direction.

3/05/2026

NAME - Agency Worker
Jenny Capener, Sarah Stormont

Date Issued
2/19/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Nicole Smith

Date Signed
2/20/2026