

Date Correction Plan Due
12/26/2023

NONCOMPLIANCE STATEMENT AND CORRECTION PLAN

TO FILE A COMPLAINT CALL
715-361-7700

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		Provider Number / Facility ID Number	
Christys Child Care Center		1000559671 / 002 - 1009998	
Address - Facility (Street, City, State, Zip Code)		Telephone Number	Date - Regulation Visit
3217 Center St Stevens Point WI 544814217		715-341-9944	11/29/2023
	Rule/Statute Number	Correction Plan	Expected Completion Date
	Noncompliance Statement		Verification Date
1	<p>251.07(5)(b)5. Eating Surfaces - Cleaned, Sanitized</p> <p>Description: The table in the Kangaroo Classroom was not washed and sanitized prior to serving food.</p>	<p>The classroom table is washed and sanitized prior to eating and after.</p> <p>* The washing step was missed at visit</p>	11/29/23
2	<p>251.07(6)(dm)4. Medical Log - Reviewing Injury Records</p> <p>Description: The medical log book shall be reviewed every 6 months to ensure all possible preventative measures are being taken.</p> <p>The medical log book in the Kangaroo Classroom was not reviewed within the last 6 months.</p>	<p>The classroom medical log was tallied and dated bringing it current by the new classroom teacher.</p>	11/29/23

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3

251.07(6)(f)1.a.

Medication Administration - Parent Authorization

Description: A written authorization that includes the child's name, birthdate, name of medication, administration instructions, medication intervals and length of the authorization dated and signed by the parent was not on file for a medication in the Mighty Mice Classroom.

The updated medication authorization was re-dated + signed by the parent as well as an updated - signed dated medical treatment plan by the physician is on file

11/29/23

NAME - Agency Worker

Heather Struck

Date Issued

12/11/2023

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed

2/27/24