Date Correction Plan Due
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 - Ce	ertified Operator / Licensed Center	Provider Number / Facility ID Number		
Canaland Christian Acdmy Early Lrng		2000559632 / 001 - 620105		
Address - Facility (Street, City, State, Zip Code) 801 County Road Hh Stevens Point WI 544818415		Telephone Number 715-341-8747	Date - Regulation Visit 6/20/2023	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
Infa Des	1.09(4)(a)3.  Fant & Toddler - Diaper Changing Surface Disinfection  Escription: The diaper changing surface was not disinfected per the anufacturer's instructions on the disinfectant label.	The diaper changing area is now disinfected per the manufacturer's instructions on the disinfectant label.	07/10/2023	

NAME - Agency Worker Heather Struck	Date Issued 7/3/2023
SIGNATURE - Certified Operator or Designee / Licensee or Designee	Date Signed
Jennifer Kleiner, Program Director	07/10/2023