

<b>Date Correction Plan Due</b> 10/27/2025	<b>NONCOMPLIANCE STATEMENT AND CORRECTION PLAN</b>	<b>TO FILE A COMPLAINT CALL</b> 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.

<b>Name - Certified Operator / Licensed Center</b> Children Of America Appleton		<b>Provider Number / Facility ID Number</b> 6000585236 / 001 - 1014708		
<b>Address - Facility (Street, City, State, Zip Code)</b> W3117 Springfield Dr Appleton WI 549156183		<b>Telephone Number</b> 920-380-0554	<b>Date - Regulation Visit</b> 9/16/2025	
	<b>Rule/Statute Number</b> <b>Noncompliance Statement</b>	<b>Correction Plan</b>	<b>Expected Completion Date</b>	<b>Verification Date</b>
1	251.05(3)(gr)3.a. <b>Meal Prep Personnel - Training</b>  Description: Meal prep personnel files failed to have documentation of annual/current food safety and sanitation training.	Director and AD Completed Serv- Safe training	10/13/25	
2	251.06(2)(n) <b>Garbage Containers - Construction &amp; Disposal Schedule</b>  Description: Garbage containers containing food waste failed to be covered as required, 2's and preschool ii.	provided USDA training at professional Dev. Day on 10/13/25 & discussed health & safety regulations during meal times.	10/13/25	

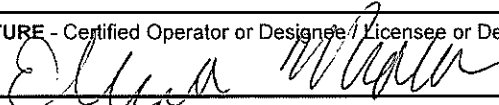
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3	251.07(4)(e) <b>Naps Or Rest Periods - Bedding Maintenance, Storage, Cleanliness</b>  Description: Cots/bedding failed to be covered and stored in a sanitary manner- preschool II and Pre-k A.	Confirmed both classrooms have the proper sheet to place over cots when not in use.	10/13/25	
4	251.09(4)(a)3. <b>Infant &amp; Toddler - Diaper Changing Surface Disinfection</b>  Description: Diaper changing surfaces failed to be easily cleanable/able to be disinfected. Pads were torn in the 2's and toddlers.	purchased new pads for both rooms and replaced torn ones.	10/13/25	
5	251.09(4)(a)5. <b>Infant &amp; Toddler - Soiled Diapers Disposal</b>  Description: Diaper disposal container in the toddlers room failed to be in working order- container lid did not close.	purchased new trash can w/ working lid.	10/13/25	

NAME - Agency Worker  
Ruth Sprangers

Date Issued  
10/13/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed



10/29/2025