DEPARTMENT OF CHILDREN AND FAMILIES
Division of Early Care and Education

STATE OF WISCONSIN

Date Correction Plan Due 4/25/2024	**NONCOMPLIANCE STATEMENT AND CORRECTION PLAN**	TO FILE A COMPLAINT CALL 715-930-1148

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**	
All My Friends Childcare Llc		8000591298 / 001 - 2006469	
Address - Facility (Street, City, State, Zip Code) 143 N Jennifer Rae Jct N Roberts WI 540238649	**Telephone Number** 715-222-9035	**Date - Regulation Visit** 4/11/2024	

	Rule/Statute Number Noncompliance Statement	**Correction Plan**	**Expected Completion Date**	**Verification Date**
1	251.06(10)(dm)2. **Potty Chairs - Disinfected** Description: Contrary to rule, the potty chair receptacle in the outdoor play area shed was not emptied, rinsed, and disinfected immediately after use.	Emptied and disinfected the potty chair - looking for a different potty chair to make a more sanitary chair	4-11-24	
2	251.06(11)(bm)3. **Outdoor Play Equipment - Construction, Condition** Description: The climbing wall in the outdoor play space had broken boards and is in need of repair/replacement. Rule, in part, states outdoor play equipment shall be of sturdy construction with no sharp, rough, loose, or pointed edges and shall be in good operating condition.	Replaced boards and secured all screws and boards in place	5-10-24	

Name - Certified Operator / Licensed Center		Provider Number / Facility ID Number	
All My Friends Childcare Llc		8000591298 / 001 - 2006469	
Address - Facility (Street, City, State, Zip Code) 143 N Jennifer Rae Jct N Roberts WI 540238649	**Telephone Number** 715-222-9035	**Date - Regulation Visit** 4/11/2024	

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3	251.06(9)(d)2.a. **Food Storage - Dry Food** Description: Open packages of dry foods were observed in cupboards in the kitchen area. Dry foods, if opened, are required to be stored in bags with zip-type closure or containers with a tight-fitting cover and should be labeled.	All open food was put in zip-lock baggies	4-11-24	
4	251.07(6)(dm)4. **Medical Log - Reviewing Injury Records** Description: An inspection of the medical log book revealed the log hasn't been reviewed every 6 months as required by rule.	Samantha reviewed the medical log and signed her name	4-11-24	

NAME - Agency Worker
Matthew Peterson

Date Issued
4/11/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee
Samantha

Date Signed
5/15/24