Date Correction Plan Due 3/30/2020

NONCOMPLIANCE STATEMENT AND CORRECTION PLAN

TO FILE A COMPLAINT CALL 262-446-7800

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.

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	ne - Certified Operator / Licensed Center	MAR 1 9 202	20	Provider Number / Facility ID Number 2000563552 / 002 - 2001765			
Tre	e Of Life Christian Preschool	SOUTHEASTERN REGIONA DCF DECF RECO					
	ress - Facility (Street, City, State, Zip Code) E Silver Spring Dr Whitefish Bay WI 532175233	DCF DECE BECR	Telephone Number 414-964-8733	3/12/2020	Date - Regulation Visit 3/12/2020		
	Rule/Statute Number Noncompliance Statement		Correction Plan	Expected Completion Date	Verification Date		
1	251.04(6)(b) Current, Accurate Daily Attendance Record Description: The Sunshine room did not maintain a of written record of the daily attendance, on 3-10-20 two not signed out and on this monitoring visit, 3-12-20, not signed in (2 of them were absent but it was indicated in the reviewing the attendance records.	o children were five children were	A new attendance sheet will be implimented upon teturn to school Teachers will be responsible for complete	4-13-20 or when school teopens.			
2	251.04(8)(b) Biennial Training - Child Abuse & Neglect Description: Staff A (hired 8-19-19) and Staff B (hired have documentation of current Child Abuse and Neglect training in their files.	ed 9-9-19) did not glect (CAN) biennial	The staff members have class information and will complete class				

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	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date		
3	251.05(2)(a)6. Staff Record - Days & Hours Worked Description: The center did not maintain documentation of the Teachers days and hours worked, and in which classroom they worked.	The new attendance Sheet will teflect what teacher was in each classroom.	U-13.20 Or whenour school reopens.			
4	251.05(4)(c)2. Continuing Education Requirement - Part Time Staff Description: Staff A did not have documentation of the required 15 hours of continuing education for 2019.	Staff member will complete the hours needed.	5-30-20			
5	251.055(1)(f) Child Tracking Procedure Description: The center did not follow their procedure to track children in care by use of the attendance records, because on this monitoring visit, 3-12-20, five children were not signed-in (2 of them were absent but it was indicated) and were being tracked after reviewing the attendance records.	The new attendance sheet will be implemented and teachers will be responsible for attendance	when our School teopens			
6	251.06(2)(b) Electrical Or Hot Surface Protection Description: There was no cover/guard on the outlet next to the sink in the Rainbow room.	A cover was put on the outlet	3-12-20			

Muna - Cortifica Operator Utleansch Center Address Facility (Street, City, State, Zip Code) CSSTTSS& MY ysg delibiting Dr. Mindelbridge Wy NY 582175230 Free Of Life Christian Preschool زم 3(6)(\$)(5).138 Visit, 3-12-20, five children sere not signed-lin to of east Record - Days & Hours Worked Description. The cancer did not maintain document Year mount a choice in the worker and in which a system free REMICH 261,05(4)(0)2. இந்த அள்ள சாள்ளை Requirement - Part Time - இந் The modern and the second of t 910% and neutropoleg gardeness to study 75, (17, Jack), 17, 5 Child Trecking Procedure Security from the content of the wolfer production of the content granding and the establishments sometime and the sear yet error at has hearing gried enew bas (belocification as in for ebrose conductions firemeals? consigmoned redmuy state Clebs ferequired fo and to more meads elevined. in to track children and principl redemail enantasis? 9 14 004 6133 Correction Plan

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7	251.06(4)(j) Fire Alarms & Smoke Detectors - Maintenance, Drills, Testing Description: There was no documentation of smoke detector testing for the months January and February 2020. (A signaling device, such as a smoke detector shall be used to conduct monthly fire evacuation drills. The licensee shall document that the fire detection and prevention systems are monitored by a fire prevention on the State form.)	A signaling device is currently used for monthly drills and will be tested and documented going forward.	5-12-20						

NAME - Certification Worker / Licensing Specialist Tony Paige

Date Issued 3/16/2020

Date Signed

3-16-20

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