

Date Correction Plan Due 7/14/2025	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 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.

Name - Certified Operator / Licensed Center Ebenezer Child Care Centers Inc Fond Du Lac		Provider Number / Facility ID Number 5000561255 / 019 - 2007691		
Address - Facility (Street, City, State, Zip Code) 103 W Scott St Fond Du Lac WI 549352235		Telephone Number 920-923-6989	Date - Regulation Visit 6/16/2025	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	<p>251.05(3)(c) Cardiopulmonary Resuscitation Training</p> <p>Description: Based on records review, the CPR certificate the center had on file for staff member A was issued by an agency not approved by the Department.</p>	<p>Staff member A will be enrolled in an approved Department course by 07/31/25.</p>	7/31/25	
2	<p>251.06(2)(i) Deteriorating Paint</p> <p>Description: In the 2.5 to 3 year olds room, one of the walls had chipped paint.</p> <p>Repeat violation: Previously cited on 4/8/2025</p>	<p>The chipped paint in this classroom has been Repaired.</p>	6/24/25	

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3	251.06(2)(m) Cleaning Aids - Equipment Description: In the girls' bathroom, there was a bucket and a plunger accessible to the children.	The bucket and plunger were removed From this bathroom. Additionally, the center Had all employees sign off on an acknowledgement Form that no cleaning supplies and/or equipment Should be stored in bathrooms and/or within the reach Of children.	6/17/25

NAME - Agency Worker
Cloribel Tegen

Date issued
6/23/2025

SIGNATURE - Certified Operator or Designer, Licensee or Designee

Date Signed