

Date Correction Plan Due 11/13/2024	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 608-422-6765
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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.

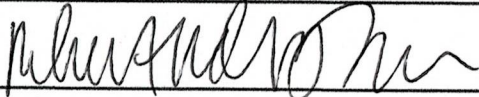
Instructions: The Noncompliance Statement below identifies the violation(s) of child care statute and / or administrative rule identified by the certification / licensing specialist. Complete the section labeled "Correction Plan" by indicating the steps that will be taken to address and correct each 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 New Morning Nursery School		Provider Number / Facility ID Number 1000577881 / 001 - 120035		
Address - Facility (Street, City, State, Zip Code) 718 Gilmore St Madison WI 53711		Telephone Number 608-233-0433	Date - Regulation Visit 10/18/2024	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.06(2)(b) Electrical Or Hot Surface Protection Description: Multiple electrical outlets were not protected by outlet covers, as required.	Director purchased 50 pack of outlet covers and covered all outlets not in use. Also passed out extras to each classroom in the case that an a previously used outlet would stop being used and need a cover.	11/10/24	
2	251.07(6)(dm)4. Medical Log - Reviewing Injury Records Description: Reviews of medical log books were last documented in October of 2023, and not every 6 months as required.	Director immediately reviewed all medical logs. Director scheduled the next check on her calendar and set a reminder on her phone so she will not miss it. March 1, 2025	11/10/24	

NAME - Agency Worker
Cierrena Schoville

Date Issued
10/30/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee



Date Signed
11/5/24