

Date Correction Plan Due 12/9/2025	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		Provider Number / Facility ID Number	
Merary's Family Daycare		4000588834 / 001 - 2002713	
Address - Facility (Street, City, State, Zip Code)		Telephone Number	Date - Regulation Visit
825 Michigan Ave Wisc Dells WI 539651229		414-614-0334	11/21/2025
Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1 250.04(6)(b) Current, Accurate Daily Attendance Record Description: Attendance record was inaccurate when children were not sign-in or out on multiple occasion. La Asistencia no estaba concreto cuando la entrada o salida no fue registrada en varias ocasiones.	Se anoto la salida del dia y la entrada del otro dia Children were signed in and out for the missing days.	12/01/25	12/01/25

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2	<p>250.05(2)(c) Staff File - Days, Hours Worked</p> <p>Description: Staff days and worked hours record was inaccurate when provider did not sign-in or out on multiple occasion.</p> <p>El record de las horas y días trabajados no estaba concreto cuando el proveedor no firmo su entrada o salida en varias ocasiones.</p>	<p>El proveedor anoto su entrada y salida del día olvidado</p> <p>Provide signed in and out the missing days</p>	12/01/25	12/01/25
3	<p>250.06(2)(c) Access To Materials Potentially Harmful To Children</p> <p>Description: Children had access to potential harmful materials when cleaning product and air freshener were accessible to children.</p> <p>Los niños tuvieron acceso a materiales potencialmente dañinos cuando los productos de limpieza y los ambientadores estaban a su alcance</p> <p>Repeat violation: Previously cited on 8/23/2024</p>	<p>Se movio del area los productos de limpieza fuera del alcance de los niños</p> <p>Products were moved and not accessible to children</p>	12/01/25	12/01/25
4	<p>250.06(9)(a) Kitchen Equipment, Utensils, Eating Surfaces</p> <p>Description: Eating surface was not washed after breakfast.</p> <p>Las mesitas de comer no se limpiaron despues del desayuno.</p>	<p>me puse enfasis en limpiar despues del desayuno</p> <p>Surfaces would be clean after meals</p>	12/01/25	12/01/25

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5	250.07(6)(g)1. Hand & Face Washing Description: Children's hands and face were not washed after breakfast. Las manos y la cara de los niños no fueron lavadas después del desayuno.	se esta haciendo lavado de manos después de las comidas	12/01/25	12/01/25

Children are washing their hands after every meal

NAME - Agency Worker Luzdarys Marquez	Date Issued 11/24/2025
SIGNATURE - Certified Operator or Designee / Licensee or Designee <i>Meradita M</i>	Date Signed 12/03/24