

<b>Date Correction Plan Due</b> 8/26/2025	<b>NONCOMPLIANCE STATEMENT AND CORRECTION PLAN</b>	<b>TO FILE A COMPLAINT CALL</b> 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.

<b>Name - Certified Operator / Licensed Center</b> Ripon Children's Learning Ctr Inc		<b>Provider Number / Facility ID Number</b> 8000558508 / 001 - 420176		
<b>Address - Facility (Street, City, State, Zip Code)</b> 400 W Oshkosh St Ripon WI 54971		<b>Telephone Number</b> 920-748-9500	<b>Date - Regulation Visit</b> 8/6/2025	
	<b>Rule/Statute Number Noncompliance Statement</b>	<b>Correction Plan</b>	<b>Expected Completion Date</b>	<b>Verification Date</b>
1	251.05(2)(a) <b>Staff Record - Maintenance &amp; Availability</b>  Description: two staff members #B and #C were missing a staff record in their file - see checklist.	Form was completed 8/6/2025. Files for new hires will be reviewed by all administrative staff to ensure accuracy and completion of required paperwork. All new hires will have a DCF staff checklist in in their files to ensure accurate paperwork is acquired	8/6/2025	
2	251.05(2)(a)3.a. <b>Staff Record - Physical Examination</b>  Description: One staff member #A was missing her physical after 30 days of employment - see checklist.  Repeat violation: Previously cited on 3/24/2025	Staff Member A completed physical and passed 8/19/25. RCLC will ensure when corresponding with outside entities such as VA that if communication is not made in a timely manner staff member will be sent right away to our contracting clinic to complete physical before their first 30 days.	8/19/2025	

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3	251.05(3)(b) <b>Abusive Head Trauma Prevention Training</b>  Description: One staff member #B did not have her abusive head trauma training documented as being completed prior to working at the center - see checklist.	RCLC will ensure staff member training and documents of training be placed in their file in a timely manner and reviewed frequently. RCLC will ensure training is completed prior to start date.	8/7/25	
4	251.05(4)(a) <b>Staff Orientation - Develop, Implement, Document</b>  Description: One staff member #C did not have her orientation completed and in her file - see checklist.	RCLC will ensure that files will be organized regularly to ensure proper documentation is placed in appropriate folders. Form was located in another staff member's file.	8/7/2025	
5	251.055(1)(a) <b>Supervision Of Children</b>  Description: The infant orange room was very dark and you could not see in the room to see the children.  On 7/22/25 a one year old child left the room and went into another room and was unsupervised for approximately 1 minutes.  On 7/18/25 a child laid on top of another child during nap time and touched the child inappropriately.  Repeat violation: Previously cited on 2/6/2024, 10/17/2023	1.RCLC will implement the requirement of staff to utilize Face to Name feature in the Procure App as announced in 8/22/25 staff meeting. Any administrative staff will regularly check the app to ensure staff is utilizing this feature along with requiring staff to count children before and after each transition while utilizing the roster sheets each classroom has. Administrative staff will also do random number checks to ensure staff know how many children they have at all times. 2. Light sources will be added to rooms during rest time to allow better visibility.	8/22/2025	

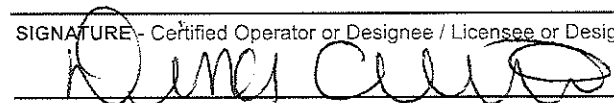
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6	251.055(1)(b) <b>Supervision - Teacher Per Group Of Children</b>  Description: There was no staff member in the orange room. There were 7 children napping and the room was very dark. There were teachers in the open room next to this room.	RCLC will maintain a light source in classrooms during rest periods ensure improved visibility. In addition to the current use of video surveillance and audio monitoring equipment a staff member will remain in the room at all times during rest periods. These steps will ensure that sight and/or sound supervision is continuously maintained as outlined in Administrative Code DCF 251.005(2)(g)1. This corrective action addresses licensing's determination that our previous method of supervision during rest periods did not meet their expectations. By implementing these measures, RCLC will ensure ongoing compliance with state regulations and provide a higher level of safety for all children in our care.	8/22/2025	
7	251.07(6)(dm)4. <b>Medical Log - Reviewing Injury Records</b>  Description: The logbooks in each room were not reviewed once every 6 months. They were last reviewed in December 2024.	RCLC will ensure administrative staff have dates applied to their shared calander to advise of when medical log books are up for review.	8/7/2025	
8	251.07(6)(f)1.a. <b>Medication Administration - Parent Authorization</b>  Description: There was one inhaler in the green room that did not have an authorization form filled out.	RCLC will ensure that administrative and teaching staff review children's files to ensure all proper documentation is present for medication distribution.	8/7/2025	
9	251.09(1)(c) <b>Infant &amp; Toddler - Documenting Changes In Development</b>  Description: The red room had 2 intakes that were not current (updated once every 3 months) The orange room had 5 intakes that were not current and the yellow room had 4 intakes that were not current.	RCLC will ensure that teaching and administrative staff review children's files to ensure proper documentation is completed in a timely manner. Administrative staff will also create a checklist for teaching staff to follow to ensure proper paperwork is being handed out and returned in a timely manner as announced in staff meeting.	8/22/2025	

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NAME - Agency Worker  
Jill Kellner

Date Issued  
8/12/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee



Date Signed

8/31/2025 resub 9/4/25