

Date Correction Plan Due 12/3/2024	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 B-G Club Sch Age - Shapiro		Provider Number / Facility ID Number 9000559259 / 004 - 420129		
Address - Facility (Street, City, State, Zip Code) 1050 W 18Th Ave Oshkosh WI 549026602		Telephone Number 920-233-1414	Date - Regulation Visit 11/12/2024	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.04(6)(a)1. Child Record - Enrollment Information Description: 9 out of the 20 children did not have their emergency contact info listed on their enrollment form - parents name were listed. One child was missing their physicians information on their enrollment form. Repeat violation: Previously cited on 10/18/2023, 11/28/2022	Emergency Contact Information will be documented in all children records.	12/15/24	
2	251.04(6)(a)6. Child Record - Health History Description: One child was missing their health history information on the printout form - see checklist. Repeat violation: Previously cited on 10/18/2023	All child records will include health history information.	12/15/24	

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3	251.05(2)(a)3.a. Staff Record - Physical Examination Description: One staff member did not have her physical in her file after 30 days of employment - see checklist.	All staff members will have their physical information in their file after 30 days of employment.	12/15/24
4	251.055(1)(b) Supervision - Teacher Per Group Of Children Description: Their was not qualified teacher with the group of children on 11/12/24. Repeat violation: Previously cited on 5/20/2024, 10/18/2023	Registered school age program leader/teacher will be present at the Site.	12/15/24

NAME - Agency Worker
Jill Kellner

Date Issued
11/19/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed

11/25/24