

<b>Date Correction Plan Due</b> 3/17/2025	<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> Boys And Girls Club Of Oshkosh - Omro		<b>Provider Number / Facility ID Number</b> 9000559259 / 012 - 2005620		
<b>Address - Facility (Street, City, State, Zip Code)</b> 1000 N Webster Ave Omro WI 549631098		<b>Telephone Number</b> 920-233-1414	<b>Date - Regulation Visit</b> 2/26/2025	
	<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)3.a. <b>Staff Record - Physical Examination</b>  Description: Based on record review on 2/26/24 according to the Staff Record Checklist Staff Member A failed to have a Health Report on file.	<div style="border: 1px solid black; padding: 5px;">             Staff member will have the Health Report on file by 3.12.25           </div>	<div style="border: 1px solid black; padding: 2px;">             3.12.25           </div>	
2	251.05(4)(c)1. <b>Continuing Education Requirement - Full Time Staff</b>  Description: Based on record review on 2/26/25 according to the Staff Record Checklist Staff Member A and C failed to have any continuing education hours for 2024.	<div style="border: 1px solid black; padding: 5px;">             Staff member A now has continuing education hours on file (unofficial transcripts), and Staff Member C will have them on file by 3.12.25.           </div>	<div style="border: 1px solid black; padding: 2px;">             3.12.25           </div>	

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3	251.055(1)(a) <b>Supervision Of Children</b>  Description: Based on observation on 2/26/25 A four year old child was in the bathroom unsupervised for approximately 2-3 min.  Additionally Children ages 4-6 years of age were allowed to go wash their hands in the bathroom, use the bathroom, get a drink in the hallway, located outside the cafeteria with no supervision.	Staff have been retrained on supervision, and we will have one staff dedicated to staying inside to help supervision of children when they need to use the bathroom.	2.27.25
4	251.07(6)(dm)2. <b>Medical Log - Pages &amp; Entries</b>  Description: Based on record review on 2/26/25 the medical log book pages failed to be numbered, pages were skipped along with skipped lines, entries failed to be dated and failed to be entered correctly.	Medical Log Book pages are now n numbered, and staff have been retrained on entering into the Log Book.	3.3.25

**NAME** - Agency Worker  
Cassandra Debauche

Date Issued  
3/3/2025

**SIGNATURE** - Certified Operator or Designee / Licensee or Designee

**Katrina Gesell**

Date Signed  
3.4.25