

Date Correction Plan Due	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		Provider Number / Facility ID Number	
Hope Lutheran Church Preschool		9000574679 / 001 - 420290	
Address - Facility (Street, City, State, Zip Code)		Telephone Number	Date - Regulation Visit
260 Vincent St Fond Du Lac WI 54935		920-922-5130	10/16/2024
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date
1	251.05(2)(a)3.a. Staff Record - Physical Examination Description: Staff member B did not have the physical examination report on file.	Nov. 2024 Going in Nov.	NOV. 2024
2	251.05(3)(cm) Child Abuse & Neglect - Biennial Training Description: Staff member A did not have the biennial child abuse and neglect prevention training information on file. Repeat violation: Previously cited on 10/31/2023	Jan. 2025 Will take in Nov. + Dec. 2024	Jan. 2025

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3	251.05(4)(c)1. Continuing Education Requirement - Full Time Staff Description: Staff members A and B did not have the continuing education hours on file available for review.	One staff member has a life-time license <i>Will start</i> March ^{in Nov} 2025	March 2025	
4	251.06(11)(b)5. Outdoor Play Space - Energy-Absorbing Surfaces Description: The energy absorbing material around the 4 foot fall zone of one of the slides was less than the required 9 inches deep.	Oct 2024 corrected	Oct. 2024	
5	251.06(11)(b)7. Outdoor Play Space - Enclosure Description: There was a 4 foot x 4 inch gap at the base of the back side of the fence, and also a 4 by 12 inch gap at the base of the fence, on the right hand side.	Oct 2024 corrected	Oct. 2024	
6	251.06(3)(b)4. Emergencies - Record Of Fire / Tornado Drills Description: The center did not have records of the tornado drills for September, 2024.	tornado drill done 10/29, 24	Oct. 2024	

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7	251.06(4)(jm)2. Fire Alarms & Smoke Detectors - Testing Description: There were no records showing that the smoke detectors have been tested monthly.	test monthly record on sbt.	Oct. 2024	
8	251.07(6)(f)1.a. Medication Administration - Parent Authorization Description: There was a medication for a child that was missing the medication authorization form from the parent.	NOV. 2024 Gave parent at Parent teacher conferences in Oct.	NOV. 2024	

NAME - Agency Worker
Gloribel Tegen

Date Issued

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed

Lynn M. Schuel

Oct 30, 2024