

Date Correction Plan Due 2/17/2023

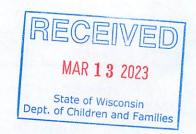
## NONCOMPLIANCE STATEMENT AND CORRECTION PLAN

TO FILE A COMPLAINT CALL 715-930-1148

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.

			der Number / Facility ID Number 579790 / 002 - 2001394	
Address - Facility (Street, City, State, Zip Code) 1419 Hill Ave B Superior WI 548801951		Telephone Number 715-392-2499	Date - Regulation Visit 2/2/2023	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.04(6)(a)8.a.  Child Record - Physical Exam - Under 2  Description: Each child under 2 years of age shall have an initial health examination not more than 6 months prior to nor later than 3	sheets neve handed	3-10-23	
	months after being admitted to the center, and a follow-up examination at least once every 6 months thereafter. Child #2 and #3 did not have documentation of a follow-up exam within the past 6 months.  Repeat violation: Previously cited on 4/4/2022			



Name - Certified Operator / Licensed Center			Provider Number / Facility ID Number			
Nev	born 2 School Education Inc			00005	79790 / 002 - 2001394	
			Telephone Number	Date - Regulation Visit		
1419 Hill Ave B Superior WI 548801951			715-392-2499		2/2/2023	
	Rule/Statute Number Noncompliance Statement		Correction Plan		Expected Completion Date	Verification Date
2	251.04(6)(a)8.b.  Child Record - Physical Exam - Over 2, Under 5  Description: Each child 2 years of age and under a initial health examination not more than one year p 3 months after being admitted to the center and a examination at least once every 2 years thereafter have been in care longer than 3 months and did no report on file. Child record #4 did not have docume health examination at least every 2 years.	age 5 shall have an prior to nor later than a follow-up health r. Child #7 and #9 not have a child health	out with a	nded	3-17-23	
3	251.07(6)(dm)4.  Medical Log - Reviewing Injury Records  Description: An inspection of the medical log books revealed the log books have not been reviewed ever required by rule.  Repeat violation: Previously cited on 4/4/2022		this has been y	avrwig	j- <b>b</b> -23	

NAME - Agency Worker Emily Johnson	Date Issued 2/3/2023
SIGNATURE - Certified Operator or Designee / Licensee or Designee	Date Signed
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