Date Correction Plan Due
10/5/2021

NONCOMPLIANCE STATEMENT AND CORRECTION
PLAN

TO FILE A COMPLAINT CALL
920-785-7811

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 Provide			er Number / Facility ID Number	
Kindercare Learning Ctr - Appleton 000058				
Address - Facility (Street, City, State, Zip Code) 332 Metro Dr Appleton WI 54913		Telephone Number 920-739-6963	Date - Regulation Visit 8/31/2021	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.05(3)(e)4.d. Center Director / Large Center - Entry-Level Training Description: The director has not completed one of the preservice training requirements in Table 251.05B prior to beginning work as a center director.	Jill Schlag is our designated director to support the new director until air training requirements are met.	9/21/21	
2	251.055(1)(b) Supervision - Teacher Per Group Of Children Description: The center did not have lead teachers supervising the Ps/PK room on August 27 and 30, 2021 and the Infant B room on August 26, 2021. Repeat violation: Previously cited on 7/27/2020, 3/12/2020	All staff records have been reviewed and all required courses have been ordered. All lead teachers are in place to ensure we are in complian	9/22/21	

Name	Name - Certified Operator / Licensed Center Provider Number / Facility ID Number					
Kind	ercare Learning Ctr - Appleton	0000580590 / 018 - 1010032				
Address - Facility (Street, City, State, Zip Code) 332 Metro Dr Appleton WI 54913		Telephone Number 920-739-6963	Date - Regulation Visit 8/31/2021			
	Rule/Statute Number	Correction Plan	Expected	Verification		
	Noncompliance Statement		Completion Date	Date		
3	251.055(2)(b) Staff-To-Child Ratios - Minimum Description: The infant room had one staff worker for 7-8 infants on	All Staff have been trained on Child Supervision	9/22/21			
	August 26, 2021 from 9:05am to 2:00pm.	Rostens to ensure				
	Repeat violation: Previously cited on 3/12/2020, 10/22/2019	their assigned Rooms. To have appropriate				

documentation to support our classroom ratio compliance.

NAME - Certification Worker / Licensing Specialist Linda Juckem

Date Issued 9/21/2021

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed

DOE DOESONA E (DOCIONAL)

9/22/21