

<b>Date Correction Plan Due</b> 11/26/2024	<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> Kindercare Learning Ctr - Security		<b>Provider Number / Facility ID Number</b> 0000 80590 / 012 - 1010023		
<b>Address - Facility (Street, City, State, Zip Code)</b> 600 Security Blvd Green Bay WI 54313		<b>Telephone Number</b> 920-434-2700	<b>Date - Regulation Visit</b> 10/31/2024	
	<b>Rule/Statute Number Noncompliance Statement</b>	<b>Correction Plan</b>	<b>Expected Completion Date</b>	<b>Verification Date</b>
1	<p>251.06(2)(gm) <b>Premises - Well Drained, Clean, In Good Repair</b></p> <p>Description: The center has a grease trap cover in the kitchen area that is in need of replacement. The center has areas downstairs in need of repair around the toilets in the restrooms.</p>	<p>Grease trap was evaluated by facilities. A project plan was submitted to completely remove the metal in ground trap, fill in with concrete, replace effected flooring, and install an above ground plastic trap under the dish washer unit in the existing space.</p> <p>Pictures have been submitted to our facilities team to address the bathroom stalls. A plan for replacement is being quoted.</p> <p>Toilet bases in downstairs bathroom will be re-caulked during December maintenance visit.</p>	January 2025	

**NAME** - Agency Worker

Jody Beyer

*Tasha Weinfurter*

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

DCF-F-CFS0294-E (R.06/2011)

Date Issued

11/12/2024

11/21/2024

Date Signed