

<b>Date Correction Plan Due</b> 6/24/2025	<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> Kce Champions Llc At Forest Glen Elem		<b>Provider Number / Facility ID Number</b> 0000580590 / 038 - 1010358		
<b>Address - Facility (Street, City, State, Zip Code)</b> 1935 Cardinal Ln Green Bay WI 54313		<b>Telephone Number</b> 920-434-6115	<b>Date - Regulation Visit</b> 5/27/2025	
	<b>Rule/Statute Number Noncompliance Statement</b>	<b>Correction Plan</b>	<b>Expected Completion Date</b>	<b>Verification Date</b>
1	251.04(2)(c) <b>Current, Accurate Information</b>  Description: Based on observation and record review a staff member was present and onsite failed to be within the program's provider portal to prove/ensure the staff member had a current background check. The staff member had worked for the program for two months.  This was fixed during the licensing visit however this needs to be completed prior to the staff member being on the premise as staff members need to have pre-eligibility to be onsite.	This is corrected-as mentioned, corrected on site. There was a miscommunication between prior Site Director and Area Manager.  Shouldn't be an issue going forward.	5/27/25	

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2	<p>251.04(4)(f) <b>Copy Of Rules Available</b></p> <p>Description: Based on observation the program failed to have a copy of the licensing rules posted or available in an area of the center where parents are likely to see it. There was not a licensing book available.</p>	Licensing book has been printed and is available on the parent table for parents.	6/9/25	
3	<p>251.04(6)(a)6m. <b>Child Record - Immunization History</b></p> <p>Description: Based on observation and record review on 5/27/25 according to the Child Record Checklist Child 2 failed to have immunizations on file.</p>	With school ending on 6/5, this will be something that we ensure is completed for next year.	September 2025	
4	<p>251.05(2)(a) <b>Staff Record - Maintenance &amp; Availability</b></p> <p>Description: Based on observation and record review on 5/27/25 according to the Staff Record Checklist Staff Members A, B, D, and F failed to have a Staff Record Form on file.</p>	All staff have a staff record checklist on file.	6/13/25	

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5	<p>251.05(2)(a)3.a. <b>Staff Record - Physical Examination</b></p> <p>Description: Based on observation and record review on 5/27/25 according to the Staff Record Checklist Staff Member C, F, and D failed to have a Health report on file.</p> <p>Repeat violation: Previously cited on 7/3/2024, 11/21/2023, 7/14/2023, 5/31/2023</p>	All staff have a physical completed, or are signed up for their physical in the coming month.	July 25, 2025	
6	<p>251.05(2)(a)4.a. <b>Staff Record - Registry Certificate</b></p> <p>Description: Based on observation and record review Staff Member E failed to have a Registry Certificate on file.</p>	We will be signing staff member E up for the registry	July 25th, 2025	
7	<p>251.05(2)(a)4.d. <b>Staff Record - Educational Qualifications</b></p> <p>Description: Based on observation and record review on 5/27/25 according to the Staff Record Checklist Staff Member A, B, C failed to have any educational qualifications on file.</p> <p>Repeat violation: Previously cited on 7/14/2023</p>	All staff are obtaining their courses/transcripts or are in the process of completing and will have in their file when completed.	July 25, 2025	

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8	<p>251.05(2)(a)5. <b>Staff Record - High School Diploma</b></p> <p>Description: Based on observation and record review on 5/27/25 according to the Staff Record Checklist Staff Member A and B failed to have a High School Diploma on file.</p> <p>Repeat violation: Previously cited on 7/14/2023</p>	Staff will have a High School Diploma or GED.	July 25, 2025	
9	<p>251.05(3)(c) <b>Cardiopulmonary Resuscitation Training</b></p> <p>Description: Based on observation and record review on 5/27/25 according to the Staff Record Checklist Staff Member A, B, D, and F failed to have CPR on file.</p>	Many of these staff members have CPR, we need to obtain the card. For the ones who don't have it completed, they are in the process of completing and will have done by the end of the month	July 31st, 2025	
10	<p>251.05(3)(cm) <b>Child Abuse &amp; Neglect - Biennial Training</b></p> <p>Description: Based on observation and record review on 5/27/25 according to the Staff Record Checklist Staff Member A, B, D, F and G failed to have Biennial Child Abuse and Neglect on file.</p>	Each staff member will complete their updated Child Abuse and Neglect.	July 31st, 2025	

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11	<p>251.05(4)(a) <b>Staff Orientation - Develop, Implement, Document</b></p> <p>Description: Based on observation and record review on 5/27/25 according to the Staff Record Checklist Staff Member A, B, D and F failed to have orientation on file.</p>	Staff orientation has been completed for all incoming and current staff members.	July 25, 2025	
12	<p>251.06(3)(b)2. <b>Emergencies - Practice Written Plans</b></p> <p>Description: Based on observation and record review the program failed to practice any emergency plans and drills in the year of 2025. The program failed to practice in the months of January, February, March, April.</p>	Emergency drills/plans have been completed in summer months, also discussed at summer orientation.	July 25, 2025	
13	<p>251.06(3)(b)4. <b>Emergencies - Record Of Fire / Tornado Drills</b></p> <p>Description: Based on observation and record review the program failed to have any written record of dates/times of any emergency plans and drills. The program failed to have the emergency plans and drills form available for documentation within the year 2025.</p>	Emergency fire/tornado drills/plans have been completed in summer months, also discussed at summer orientation.	July 25, 2025	

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14	<p>251.06(4)(jm)2. <b>Fire Alarms &amp; Smoke Detectors - Testing</b></p> <p>Description: Based on observation and record review the program failed to test the fire alarms and smoke detectors in the year 2025. The program failed to practice in the months of January, February, March, April.</p>	<p>The Fire Dept comes in and tests them, our SD is supposed to mark down when they are tested.</p> <p>This will be completed going forward and was completed in June (AM happened to be on site)</p>	July 25, 2025	
15	<p>251.07(6)(dm)2. <b>Medical Log - Pages &amp; Entries</b></p> <p>Description: Based on record review and observation entries within the medical log book failed done correctly. The medical log book had skipped lines, entries completed by staff failed to be initialed or signed, entries completed by staff failed to use children's first and last names.</p>	<p>Medical Log Book Training was completed with all staff.</p> <p>It should be done correctly going forward.</p>	July 25, 2025	
16	<p>251.07(6)(dm)4. <b>Medical Log - Reviewing Injury Records</b></p> <p>Description: Based on observation and record review the medical log book failed to be reviewed by the director every six months.</p>	Director will review the book going forward	July 25, 2025	

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17	<p>251.07(6)(f)6. <b>Current Authorizations For Medications On Premises</b></p> <p>Description: Based on observation and record review the program had epi pens on the premise without current authorizations. The epi pens belonged to children who no longer attend the center.</p>	Current authorizations have been received for summer programming children.	June 15th, 2025	
18	<p>251.094(2m) <b>School-Age Administrator &amp; Director</b></p> <p>Description: Based on interviews and record review the program failed to have a SA director. Their failed to be a current staff member that would meet the qualifications. The current designated administrator failed to meet the education qualifications for an administrator.</p>	<p>Current administrator is in contact with registry-as they have an education (special ed) degree and are a level 15 on registry.</p> <p>SA director was qualified-as she was a DPI certified teacher, but is no longer in the role, currently hiring.</p>	August 22, 2025	
19	<p>251.094(5)(c)3. <b>School-Age Group Leader - Training</b></p> <p>Description: Based on observation and record review according to the Staff Record Checklist Staff Members A, B, C, D, E Failed to have qualifications/training of a SA group leader.</p> <p>Repeat violation: Previously cited on 7/3/2024</p>	Staff are being signed up for CDA or foundations courses. In process	August 22, 2025	

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20	251.095(2m)(c) <b>School-Age Care - Supervision Of Group Of Children</b>  Description: Based on observation and record review on 5/27/25 Each of the 3 Pods (1, 2, 3) failed to have a SA Group Leader present within each group during the entire duration of the visit.	Staff will be "lead" qualified after courses.	August 22, 2025

**NAME** - Agency Worker  
Cassandra Debauche

Date Issued  
6/10/2025

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

*Sheena Knoespel*

Date Signed

7/6/25