

<b>Date Correction Plan Due</b> 11/14/2025	<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> Kindercare Learning Ctr - Bellevue		<b>Provider Number / Facility ID Number</b> 0000580590 / 015 - 1010027		
<b>Address - Facility (Street, City, State, Zip Code)</b> 1510 Bellevue St Green Bay WI 543115608		<b>Telephone Number</b> 920-468-6503	<b>Date - Regulation Visit</b> 8/25/2025	
	<b>Rule/Statute Number Noncompliance Statement</b>	<b>Correction Plan</b>	<b>Expected Completion Date</b>	<b>Verification Date</b>
1	<p>251.04(2)(m) <b>Health, Safety &amp; Welfare Of Children</b></p> <p>Description: The program self reported that on August 15, 2025, a one-and-a-half-year-old child, who has a severe allergy to eggs, was served and ingested an egg patty during breakfast. The child had an allergic reaction and sought medical attention.</p>	<p>The individual teacher received immediate retraining on reviewing and verifying the posted, up to date allergy list prior to serving any food. The teacher was also retrained on appropriate food substitutions for children with documented allergies.</p>	8-25-2025	

**NAME - Agency Worker**  
Cassandra Debauche

**Date Issued**  
10/31/2025

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

*Shirley Malchow*

**Date Signed**

12-15-2025