Date Correction Plan Due 6/29/2023

NONCOMPLIANCE STATEMENT AND CORRECTION
TO FILE A COMPLAINT CALL 262-446-7800

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 ysubmit 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 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 notice of the sanction and / or penalty and your appeal rights.

Name - Certified Operator / Licensed Center	Provider Number / Facility ID Number		mber
Kindercare Learning Ctrs-Howell	000058	30590 / 022 - 1010086	
Address - Facility (Street, City, State, Zip Code) 7677 S Howell Ave Oak Creek WI 531542112	Telephone Number 414-762-9050	Date - Regulation Visit 1/9/2023	
Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
251.04(6)(a)6m. Child Record - Immunization History	Children files reviewed upon enrollment and monthly to	1/16/23	
Description: Required immunization records not on file	ensure proper documentation In files		
251.06(2)(n) Garbage Containers - Construction & Disposal Schedule Description: Garbage can in classroom overflowing and required removal	A second garbage can added to classroom teachers re-trained on taking garbage out as needed	1116123	
251.06(3)(b)2. Emergencies - Practice Written Plans Description: Drills not practiced in October of 2022	Ensure arills are being done monthly and documented	111192	

Name - Certified Operator / Licensed Center	Provid	Provider Number / Facility ID Number		
Kindercare Learning Ctrs-Howell	0000580590 / 022 - 1010086			
Address - Facility (Street, City, State, Zip Code) 7677 S Howell Ave Oak Creek WI 531542112			ion Visit	
Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date	
251.06(4)(j) Fire Alarms & Smoke Detectors - Maintenance, Drills, Testing Description: Alarm system not tested in October of 2022	Ensure Alarm system tested monthly and documented	111123		
251.09(4)(a)2. Infant & Toddler - Wet Or Soiled Diapers Description: Soiled diaper not changed promptly.	Retrained teachers on proper "Diapering Procedures"	1110123		

NAME - Agency Worker Paul Spink	Date Issued 6/15/2023
SIGNATURE - Certified Operator of Designee / Licensee or Designee DCE-E-CES0294-E (R 06/2011)	Date Signed 6 23 23