

Date Correction Plan Due 7/10/2025	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 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.

Name - Certified Operator / Licensed Center Camp North Shore		Provider Number / Facility ID Number 6000587786 / 003 - 2005030		
Address - Facility (Street, City, State, Zip Code) 3100 W Country Club Dr Mequon WI 530925102		Telephone Number 262-242-7000	Date - Regulation Visit 6/25/2025	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	252.41(1)(e)1. Insurance Coverage - General Liability Description: The camp's general liability insurance was expired.	updated general liability is attached	7/10/25	
2	252.41(1)(k) License Posted & Visible Description: Based on observation, the program did not have the camp license posted at the base camp in an area visible to parents and the public.	notified Camp Director to post in an area visible to parents at the base camp area	7/10/25	

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3 252.41(1)(L)1.a. Monitoring Results Posted Description: The program failed to post the noncompliance statement and correction plan, including rule violations the department has not verified as corrected and in compliance. Repeat violation: Previously cited on 6/28/2023	Camp Director will post 7/11/24 non-compliance statement & correction plan in a visible area	7/10/25		
4 252.41(4)(a)1.a. Child Record - Enrollment Information Description: The program did not have the physician and medical facility information for two children, # 2 and 3.	# 2 attached & added to camper binder # 3 attached & added to camper binder	7/10/25		
5 252.41(4)(a)6m. Child Record - Immunization History Description: The program did not have the immunization information for three children, # 2, 3, and 4.	# 2, 3, 4 attached & added to camper binder	7/10/25		
6 252.42(1)(a)1. Staff File - Personal Information Description: The program failed to have the staff record form information for staff members C, D, E, and F.	Staff Record form Sent to Director to have staff complete	7/10/25		

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3100 W Country Club Dr Mequon WI 530925102		262-242-7000	6/25/2025	
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7	252.42(1)(a)4. Staff File - Pre-Camp Training Description: The program failed to document the completion of the pre-camp training for staff members D, E, and F.	Staff meet & greet Sign off - attached. Kept in binder at Camp - signed	7/10/25	
8	252.42(1)(a)5. Staff File - Days & Hours Worked Description: The program did not have documentation of the days and hours worked when staff members E and F were included in the counselor-to-child ratio.	Camp Director will complete an employee time log weekly & keep in licensing binder	7/10/25	
9	252.42(1)(a)6. Staff File - High School Diploma Or Equivalent Description: The program failed to have documentation of a high school diploma or its equivalent for staff members C, D, E, and F.	Sydney - attached Timera - has not received yet Aubrey All other staff accounted for.	7/10/25	
10	252.42(3)(e) Cardiopulmonary Resuscitation Training Description: The program did not have certificates of completion for child and adult cardiopulmonary resuscitation (CPR) on file for staff members C, D and E. Repeat violation, Previously cited on 7/26/2023, 6/28/2023	As per your email, attached are the professional rescuers certs.	7/10/25	

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NAME - Agency Worker
Gloribel Tegen

Date Issued
6/26/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Kristen Graps

Date Signed

7/10/25