

Date Correction Plan Due
3/30/2026

NONCOMPLIANCE STATEMENT AND CORRECTION PLAN

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 (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

Discovery Days Of Muskego

Provider Number / Facility ID Number

4000589094 / 011 - 2006028

Address - Facility (Street, City, State, Zip Code)

S80w18906 Janesville Rd Muskego WI 53150

Telephone Number
262-679-9100

Date - Regulation Visit
3/9/2026

Rule/Statute Number	Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.04(4)(a)2.c. Parent Notification - Injury, Consumption Of Allergen, Incorrect Medication Description: On 2/27/26, parents were not immediately notified after an infant sustained a head injury.	The staff will be retrained on proper protocols regarding parent notification. We will also review at the next staff meeting.	2/27/26	
2	251.06(2)(d) Access To Materials Potentially Harmful To Children Description: In the 3K room, diaper rash cream, labeled keep out of reach of children, was observed in a basket in the child's cubbies, accessible to children. **This was corrected during the visit** Repeat violation: Previously cited on 9/17/2025	Corrected at visit 3/9/2026	3/9/2026	

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<p>3</p> <p>251.06(9)(d)1.b. Food Storage - Refrigeration Units</p> <p>Description: The freezer in the Toddler room is not being maintained at 0 degrees or below; the freezer is at 20 degrees.</p>	<p>A new thermometer was added to the toddler room the day of the visit. We turned down the temperature dial to read 0.</p>	<p>3/9/26</p>	
<p>4</p> <p>251.06(9)(d)1.c. Food Storage - Cold Storage Thermometers</p> <p>Description: At the time of the licensing visit, there was not a working thermometer in the Toddler room refrigerator.</p>	<p>A new thermometer was added to the toddler room refrigerator. The thermometer that did not work was discarded.</p>	<p>3/9/26</p>	
<p>5</p> <p>251.07(6)(dm)2. Medical Log - Pages & Entries</p> <p>Description: In the Toddler room, skipped lines were observed in the medical log book.</p>	<p>The medical log book was reviewed and corrected by striking out skipped lines. Staff was retrained on medical log procedures.</p>	<p>3/16/26</p>	
<p>6</p> <p>251.09(4)(c) Infant & Toddler - Diapering & Food Preparation</p> <p>Description: In the infant room, there is no solid barrier between the handwashing sink and dishwashing sink.</p>	<p>Will be adding a barrier between the handwashing sink in the infant room</p>	<p>4/15/26</p>	

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Rule/Statute Number
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Date

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NAME - Agency Worker
Kristin Lange, Sara Cooney

Date Issued
3/13/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed

Kristin Lange
DCF - 26F S0294-E (R.06/2011)

3/20/20