DEPARTMENT OF CHILDREN AND FAMILIES
Division of Early Care and Education

STATE OF WISCONSIN

Date Correction Plan Due 2/16/2024	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 920-785-7811

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		Provider Number / Facility ID Number
Play N Learn		5000561975 / 002 - 2005747
Address - Facility (Street, City, State, Zip Code) 4016 Dollar Ln De Pere WI 541158791	**Telephone Number** 574-404-1643	**Date - Regulation Visit** 1/31/2024

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	250.04(6)(a) **Child Record - Maintenance, Availability** Description: One child on site failed to have a file with the required forms present.	Child will have all forms signed & dated. This will be kept in file folder	Feb 7th 2024	Feb 4 2024
2	250.04(6)(a)1m. **Child Record - Health History** Description: Children 1 and 2 on the child record checklist failed to have health history forms on file.	Child will have Health History forms in file folder	Feb 7th 2024	Feb 3 2024

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	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3	250.04(6)(a)3. **Child Record - Alternate Arrival / Release Agreement** Description: Child 1 on the child record checklist failed to have a current alternate/arrival agreement on file.	HAve parent fill the Alternative correction plan form and return it to me by Feb 7	February 7th 2024	Feb 6 2024
4	250.04(6)(a)4.b. **Child Record - Physical Exam - Over 2, Under 5** Description: Child 3 on the child record checklist failed to have a current health report on file.	Have childS paperwork with forms signed and in file folder	Feb 3 2024	Feb 3 2024 ✓
5	250.05(3)(fm) **Biennial Training - Child Abuse & Neglect** Description: The licensee failed to have a current child abuse and neglect/mandated reporter training completed.	Complete child Abuse and Neglect training.	Feb 2, 2024	Feb 02, 2024

Gina Linssen PlayN LEARN

NAME - Agency Worker
Gina Linssen

2/07/2024

Date Issued
2/2/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed