

Date Correction Plan Due 10/14/2024	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 608-422-6765
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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 Wee Care Child Center		Provider Number / Facility ID Number 9000559959 / 001 - 120741		
Address - Facility (Street, City, State, Zip Code) 1 W Brown St Waupun WI 539631923		Telephone Number 920-324-9558	Date - Regulation Visit 9/23/2024	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.04(6)(b) Current, Accurate Daily Attendance Record Description: An accurate written record of the daily attendance of each child did not have the actual time of arrival and departure of each child when an infant was signed into a classroom but was receiving care in a different classroom. Repeat violation: Previously cited on 8/23/2023	<i>Staff was reminded about our procedures for signing children in and out</i>	<i>9/23/24</i>	
2	251.05(2)(a)2. Staff Record - Completed Background Check Description: Documentation from the department indicating that a child care background check was completed prior to the start day was not complete when Staff A and Staff B have not completed the required background check prior to their start date on August 26, 2024, and were working with children.	<i>All staff background checks were completed</i>	<i>9/27/24</i>	

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3	251.07(6)(f)5. Medication Administration - As Labeled & Authorized Description: Infant in infant room had meds without form.	The medication was removed from the classroom	9/23/24

NAME - Agency Worker
Kimberly Liebhart

Date Issued
9/30/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed

Monica Bykowski

10/7/2024