

Date Correction Plan Due 12/21/2018	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 262-446-7800
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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.

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, 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	
Kindercare Learning Ctrs-Whitnall		0000580590 / 021 - 1010082	
Address - Facility (Street, City, State, Zip Code) 4692 S Whitnall Ave St Francis WI 53235		Telephone Number 414-482-3366	Date - Regulation Visit 12/5/2018
Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1 251.04(5)(a)1. Staff File - Staff Record Information Description: Staff K did not have documentation of a completed Staff Record form in her file.	Staff record is complete and filed in licensing file folder.	12/6/18	
2 251.05(1)(c) Cardiopulmonary Resuscitation Training Description: Staff A, C, D, and G did not have documentation of completed CPR/AED certificates in their files. Repeat violation: Previously cited on 10/23/2017	CPR training was completed on 11/27/18 for the mentioned staff we have not received the new certificates yet - The cards given were not adequate	12/30/18	

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3	251.09(1)(am) Infant & Toddler - Intake Information Description: One child in the Infant room did not have an Intake form prior to admission the Center to obtain written information which will aid child care workers in individualizing the program of care for the child. Repeat violation: Previously cited on 10/23/2017	The child did have the intake prior to admission the form was filed in the binder on the other side of the room. Teachers retrained on the rule	12/6/18
			Verification Date

NAME - Certification Worker / Licensing Specialist
 Tony Paige

Date Issued
 12/7/2018

SIGNATURE - Certified Operator or Designee / Licensee or Designee


Date Signed
 12/7/18