

Date Correction Plan Due 4/9/2024	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL
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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 Iza Day Care		Provider Number / Facility ID Number 5000566685 / 002	
Address - Facility (Street, City, State, Zip Code) E4304 Us Highway 14 And 60 Spring Green WI 535889508		Telephone Number 608-588-7261	Date - Regulation Visit 3/25/2024
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date
1	<p>202.08(4)(a)1. For Each Child Under 2 Years Of Age, A Report Of A Physical Examination Conducted Not More Than 6 Months Prior To Nor Later Than 3 Months After The Child Is Admitted, And A Follow-Up Health Examination At Least Once Every 6 Months Thereafter.</p> <p>Description: Child #5 did not have his Health Report signed by his doctor.</p>	<p><i>The mother has the Dr. paper signed -</i></p>	<p><i>4-9-2024</i></p>

APR 12 2024 ~~APR 16 2024~~

NAME - Agency Worker Hanaka Ehler	Date Issued 3/26/2024
SIGNATURE - Certified Operator or Designee / Licensee or Designee <i>Iza Putzsch</i>	Date Signed <i>4-3-24</i>