

Date Correction Plan Due
12/3/2024

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 Ellen's In Home Child Care Center		Provider Number / Facility ID Number 2000578802 / 001 - 1001272	
Address - Facility (Street, City, State, Zip Code) W138n6615 Manor Hills Blvd Menomonee FIs WI 530516066		Telephone Number 262-252-3260	Date - Regulation Visit 10/30/2024
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date Verification Date
1	250.04(6)(b) Current, Accurate Daily Attendance Record Description: Attendance was not current and accurate on the day of the monitoring visit. There were 8 children in care but only 6 children signed in. Repeat violation: Previously cited on 11/7/2023	99% of the time Attendance sheets are filled in immediately state visit came right as the family arrived at 2 different doors so it wasn't filled in but just within 10 min. of arrival. Same as last time. Either way - a sign has been posted on dropping door to sign in before opening door to be sure it gets signed in to assure sign ins are 100%.	Immediately 10/30/24
2	250.05(2)(a) Staff File - Staff Record Form Description: Staff B did not have all of the required personal information on file, such as, staff's education, position, emergency contact, and prior work experience, including reason for leaving previous position. **This was verified as corrected via email on 10/31/24** Repeat violation: Previously cited on 11/7/2023	Sent verification 10/31/24	10/31/24

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262-252-3260

Date - Regulation Visit

10/30/2024

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3	250.05(2)(b) Staff File - Background Check Results Description: Staff A, observed working with children during the time of the licensing visit, does not have documentation of a completed child care background check in the staff record or online. Eligibility expired in 1/2020. **This was verified as corrected on 10/31/24** Repeat violation: Previously cited on 11/7/2023	Background was done per year 2023 & on file at Daycare files New Background was done on 10/31/24 with finger print.	10/31/24	
4	250.05(2)(d)1. Staff File - Physical Examination - Form Description: Staff A, identified as a volunteer used to meet staff-to-child ratio, does not have documentation of a completed physical examination within 12 months before or 30 days after Staff A started working with children in care. Staff A started in January 2024. **This was verified as corrected via email on 11/6/24** Repeat violation: Previously cited on 11/7/2023	Physical Exam, paper work provided 11/6/2024	11/6/24	
5	250.05(3)(e)1. Provider Training - Obtain Cpr Certificate Description: Staff A does not have documentation of a completed CPR certificate within 3 months after beginning to work with children. Staff A started working in January 2024. **This was verified as corrected via email on 11/6/24** Repeat violation: Previously cited on 11/7/2023	CPR course was scheduled & in progress at time of visit. Completed & sent verification 11/6/24	11/6/24	

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6	250.05(3)(f) Provider Training - Infant & Toddler Care Description: Staff B does not have documentation of completing 10 hours of infant and toddlers within 6 months of working with children in care.	Ex suggest Enrolled & will be completed by Dec 15 24 will send enrollment verification Will send verification certificate once received.	completed 11/25/24	
7	250.05(4)(a) Staff Orientation - Documentation Description: Staff A did not have documentation that a written orientation was conducted within one week of hire; Staff A has been working at the center since January 2024. **This was verified as corrected via email on 11/6/24**	Renewed orientation on updated form & sent verification 11/6/24	11/4/2024	
8	250.055(1)(e) Supervision Provided By Trained Individuals Description: Staff B, a volunteer used to meet staff-to-child ratio, has worked in the center for 240 hours and does not have documentation of training requirements in order to provide sole supervision.	① Provider B will never provide sole supervision. ② Enrolled & in the process of continuing training requirements Will send proof of enrollment & certificates once completed.	① 11/24/2024 ② 12/15/2024 ③ course work	
9	250.06(11)(b)4. Outdoor Play Space - Enclosure Description: In the outdoor play space, the fence had a gap larger than 4 inches. **This was verified as corrected via email on 11/7/24**	Sent photo of fence correction of space put into place so gap is less than 4" now. 11/7/24	11/4/2024	