orrection Plan Due

## NONCOMPLIANCE STATEMENT AND CORRECTION PLAN

TO FILE A COMPLAINT CALL 715-930-1148

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, m 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) 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 mit plans of correction however are not required to do so.

ons: The Noncompliance Statement below identifies the violation(s) of child care statute and / or administrative rule identified by the certification / licensing specialist. 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 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 liance 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 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 the sanction and / or penalty and your appeal rights.

Facility (Street, City, State, Zip Code)	Telephone Number	88918 / 001 - 2002937	
	Department of Characteristics and the Company of th	Data Damilations	
St Sparta WI 546561639	608-269-8168	Date - Regulation \ 12/6/2023	/isit
Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
0.04(2)(i)1.a. Initoring Results Posted	These well to past d	D.C77	
scription: The monitoring results and correction plan from the most sent licensing inspection was not posted.			
0.04(6)(a)4.b. ild Record - Physical Exam - Over 2, Under 5	2 documents around the fall. Sud will be the the of few days	Jan 3, 24	
scription: Each child 2 years of age and under age 5 shall have an ial health examination not more than one year prior to nor later than nonths after being admitted to the center, and a follow-up health amination at least once every 2 years thereafter. Child record #1, and #4 did not have documentation of a follow-up health amination at least every 2 years.	think we a few days		
peat violation: Previously cited on 10/20/2022			

- Certified Operator / Licensed Center	Provide	er Number / Facility ID Nur	nber
Giraffe And Friends Childcare	8000588918 / 001 - 2002937		
nss - Facility (Street, City, State, Zip Code) N L St Sparta WI 546561639	Telephone Number 608-269-8168	Date - Regulation Visit 12/6/2023	
Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
250.04(6)(b)  Current, Accurate Daily Attendance Record  Description: The attendance was not current and accurate on the day of the licensing visit when none of the children were signed in on the attendance record.  Repeat violation: Previously cited on 10/20/2022	This is current douby- On the doug interpretation for the doug interpretation into operations on the computation	12/7/23	
250.05(3)(fm)  Biennial Training - Child Abuse & Neglect  Description: Provider was missing documentation of having received training within the past two years on child abuse and neglect laws, identification, and reporting.	Mandated reporting	12/7/23	
250.06(11)(b)4.  Outdoor Play Space - Enclosure  Description: The outdoor play space was still not fully enclosed as is required by rule.	Play prace is fully endored	12/7/23	
Repeat violation: Previously cited on 10/20/2022			

Nam	e - Certified Operator / Licensed Center	Provid	er Number / Facility ID Nur	mber
Blue	Giraffe And Friends Childcare	80005	88918 / 001 - 2002937	
	ess - Facility (Street, City, State, Zip Code) N L St Sparta WI 546561639	Telephone Number 608-269-8168	Date - Regulation 12/6/2023	Visit
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verifica Date
6	250.06(2)(c) Access To Materials Potentially Harmful To Children  Description: Items which are labeled "keep out of reach of children" were observed during the monitoring visit in the bathroom accessible to children.  Repeat violation: Previously cited on 10/20/2022	materials are out	12/7/23	
7	250.06(3)(b) Emergency Plans - Practice  Description: There was no documentation of a tornado drill for April or October 2023. The provider is required to keep written records of dates and times of all the monthly tornado drills practiced April thru October,  Repeat violation: Previously cited on 10/20/2022	going forward I were document more deligently	12/1/23	
8	250.07(4)(c)  Naps - Sleep Surface & Placement - Child 1 Year And Older  Description: The provider did not provide a proper sleep surface for 1 child during a rest period as observed during the monitoring visit. 1 child was napping on a love seat with only a blanket to cover themselves. Rule requires, in pertinent parts, the sleep surface to be washable and one of the following surfaces: a bed, a cot, a padded mat, a sleeping bag, a crib or playpen.	Thu was a blancet o ver the love beat. Child is now on Joon on a mat	12/1/23	

Provider Number / Facility ID Number		
Telephone Number 608-269-8168	Date - Regulation Visit 12/6/2023	
Correction Plan	Expected Completion Date	Verification Date
floor mals nawhave	12/8/23	
	Telephone Number 608-269-8168 Correction Plan	### 8000588918 / 001 - 2002937    Telephone Number

Agency Worker Stubbe	Date Issued 12/27/2023	
JRE - Certified Operator or Designee / Licensee or Designee	Date Signed	
· the	12/27/23	