

Date Correction Plan Due 2/7/2024	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		Provider Number / Facility ID Number	
Young Hearts Childcare		9000591079 / 001 - 2006243	
Address - Facility (Street, City, State, Zip Code)		Telephone Number	Date - Regulation Visit
1362 Garfield Ave Beloit WI 535114121		608-312-2155	1/22/2024
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date
1	250.04(6)(a)4.a. Child Record - Physical Exam - Under 2 Description: Child 2 did not have an updated physical examination report on file.	I have made a request to mom to make a Dr's appointment for child well-ness checkup to update physical examination	3-31-24
2	250.05(4)(c)1. Continuing Education - Requirement & Training Topics Description: Staff A & B did not complete 15 hours of continuing education for the year of 2023.	Both have ordered online classes to meet 15 hour requirement for the new year 2024	9-30-24

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Rule/Statute Number Noncompliance Statement		Correction Plan	Expected Completion Date	Verification Date
3	250.07(7)(a) Pets & Animals - Health & Immunization Description: Dog living in the home did not have a current rabies vaccination certificate.	I contacted vet to make an appointment to update my dogs vaccines & rabies shot	3-31-24	

NAME - Agency Worker
 Rebecca Brickson

Date Issued
 1/24/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee
A. Summire

Date Signed
 02/06/2024