

Attachment A

DEPARTMENT OF CHILDREN AND FAMILIES
Division of Early Care and Education

STATE OF WISCONSIN

Date Correction Plan Due 7/7/2025	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	
Courageous Hearts Preschool And Child Care Center		9000591489 / 001 - 2006677	
Address - Facility (Street, City, State, Zip Code)		Telephone Number	Date - Regulation Visit
44 2Nd St Milton WI 535631241		608-207-7789	6/3/2025
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date Verification Date
1	251.07(3)(a)5. Indoor Equipment - Intended Use Description: Playpens were not used in accordance with manufacturer specifications when an additional cushion was placed in a playpen, which is prohibited due to a suffocation hazard.	Please see the attached document for the Correction Plan.	After the licensing specialist's visit on 6/3/25, the orthopedic mattress was immediately removed the same day.
2	251.09(1)(L) Infant & Toddler - Soft Materials In Cribs Description: Multiple children under the age of one were sleeping with soft or loose materials in cribs, including blankets and a small cushion found inside bassinets and a playpen, which is prohibited due to a suffocation hazard. Loose blankets and sleep sacks were hanging off the sides and over the top of the playpen and bassinets in the classroom, which is also prohibited.	Please see the attached document for the Correction Plan.	All loose blankets and cushions were immediately removed from the bassinets and playpens before the licensing specialist left the center on 6/3/25.

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Address - Facility (Street, City, State, Zip Code) 44 2Nd St Milton WI 535631241		Telephone Number 608-207-7789	Date - Regulation Visit 6/3/2025
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date
3	251.09(2)(bm) Infant & Toddler - Sleep Position Description: A child was not placed on their back in a crib to sleep as required when they were asleep in an infant swing, which is prohibited due to a risk for potential asphyxiation.	Please see the attached document for the Correction Plan.	All infant swings were permanently removed from the center on the same day as the licensing specialist visit, 6/3/25.

NAME - Agency Worker
Jenny Sweeney

Date Issued
6/23/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

M. Brookhuse *Jenny Sweeney*

Date Signed

6/26/2025