Date Correction Plan Due 7/22/2022

## NONCOMPLIANCE STATEMENT AND CORRECTION PLAN

TO FILE A COMPLAINT CALL 608-422-6765

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.

nter Provider Number / Facility ID Number		
0000555710 / 016 - 120162		
<b>Telephone Number</b> 608-831-1223	Date - Regulation Visit 6/22/2022	
Correction Plan	Expected Completion Date	Verification Date
All staff will complete the required entry-level training, and documentall of the training will be kept in their staff file	on 6-23-22	CA 5/3/82
to ensure the teacher knows the name, number and wheredowns of the children in their care. The	e ?	CA Johlo
	Correction Plan  All Staff will complete the required entry-level training, and documentati of the training will be kept in their staff file  All staff were retrained on proper supervision and child tracking on 6-22-22, Child Supervision Records (CSR) will be used during transition times to document face-to-na to ensure the teacher knows in name, number and wheredocts of the children in their care. The	Telephone Number 608-831-1223  Correction Plan  Expected Completion Date  All Staff will complete the required entry-level training, and downentation of the training will be kept in their staff  File  All staff were retrained on proper supervision and child tracking on 6-22-22, Child Supervision Records (CSR)

ad hering to procedures. Weekly reminders for supervision, tracking

and CSRS are given to teachors in their classicem binders.

Name - Certified Operator / Licensed Center	Provid	Provider Number / Facility ID Number 0000555710 / 016 - 120162		
Kindercare Learning Ctr-Old Sauk	00005			
Address - Facility (Street, City, State, Zip Code)	Telephone Number	Date - Regulation Visit		
7126 Old Sauk Rd Madison WI 53717	608-831-1223	6/22/2022		
Rule/Statute Number	Correction Plan	Expected	Verification	
Noncompliance Statement		Completion Date	Date	
251.055(1)(f) Child Tracking Procedure  Description: A staff member did not adhere to a procedure to ensure the number, names, and whereabout of children in care were known to assigned child care workers at all times when a teacher failed to perform a face-to-name check during a transition from the outdoor playground to inside on 6/21/22 and as a result a two-year-old child's whereabouts were unknown to that teacher for 20 minutes. Another staff member became aware of the child on the playground and informed the director, who immediately returned the child to his group.	face-to-name checks to ensured teacher knows the number, name and whereabouts of the children in their care. The director will check CSRS throughout the de	ig 6-22-22 ne 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	CA S(20/03)	

**NAME** - Certification Worker / Licensing Specialist Chelsey Thill

Date Issued 7/8/2022

SIGNATURE - Certified Operator or Designee

Date Signed 1-20-27