

Date Correction Plan Due 4/1/2024	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 920-785-7811
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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	
Little Hands Child Care		1000571541 / 002 - 1006181	
Address - Facility (Street, City, State, Zip Code)		Telephone Number	Date - Regulation Visit
1274 Hwy 175 Hubertus WI 53033		262-628-7682	3/15/2024
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date
1	251.04(6)(a)2. Child Record - Emergency Medical Consent Description: Based upon review on March 15, 2024, Child #1 of the Child Record Checklist did not have any emergency contact information on file.	child does not have emergency contact other than mom and dad. Updated on record.	3/18/24

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2	<p>251.05(2)(a)6. Staff Record - Days & Hours Worked</p> <p>Description: Based upon observation on March 15, 2024, a child care worker did not sign into the classroom where they were included in staff-to-child ratio.</p> <p>Based upon observation on March 15, 2024, a child care worker did not sign themselves out of the classroom where they were no longer included in staff-to-child ratio.</p> <p>CORRECTED DURING VISIT</p>	All staff will sign in and out of classroom attendance	3/15/24	
3	<p>251.05(3)(c) Cardiopulmonary Resuscitation Training</p> <p>Description: Based upon review on March 15, 2024, Staff Members A-D on the Staff Record Checklist did not have a current infant and child CPR certificate on file.</p>	Staff will complete CPR	4/15/24	
4	<p>251.055(1)(f) Child Tracking Procedure</p> <p>Description: Based upon observation on March 15, 2024, a child was not immediately signed into the infant room upon arrival.</p> <p>CORRECTED DURING VISIT.</p>	child was signed in on app at 8:45, staff record when she arrived in classroom.	3/15/24	

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Noncompliance Statement			

NAME - Agency Worker
Jamie Brandt

Date Issued
3/18/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Michele J. Tietz

Date Signed
3/20/24