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DEPARTMENT OF CHILDREN AND FAMILIES

Date Correction Plan Due 10/14/2019

## NONCOMPLIANCE STATEMENT AND CORRECTION PLAN

may submit plans of correction however are not required to do so. and (2)(k). 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) 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. 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

notice of the sanction and / or penalty and your appeal rights. 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 noncompliance statement and correction plan near the license in accordance with Wis. Stat. 48.657. date(s) for each item. 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 Instructions: The Noncompliance Statement below identifies the violation(s) of child care statute and / or administrative rule identified by the certification / licensing specialist. Return the original to your certification / licensing specialist for approval and retain a copy. This request for a correction plan is not an order imposing a sanction or If this is a licensed child care, post your copy of the

Nam Lato	Name - Certified Operator / Licensed Center Latonya Franklin	Provid 00005	Provider Number / Facility ID Number 0000589610 / 001
Add 105	Address - Facility (Street, City, State, Zip Code) 105 Kennedy Hts Madison WI 537041618	Telephone Number 608-807-8145	Date - Regulation Visit 9/27/2019
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date
<u>د ـ</u>	202.08(1)(e)1. Administration. A Certified Child Care Operator Shall Comply With All Local And State Laws Governing The Certified Child Care Program And Its Operation And Ensure That All Employees And Volunteers Comply With These Lewsers Description: CPR certification expired in April 2019	I plan on taking the online CPR	10-31-10
N	202.08(4)(a) Health Form: A Certified Child Care Operator Shall Have A Current Report Of A Physical Examination On File For Each Child, Including The Operator's Own Children, Who Are Not Enrolled In A Public Or Private School. Description: Child #2 needs an updated health report.	I plan to get the parent to up date. He health report.	Dong patient

DCF-F-CFS0294-E (R 06/2011)

SIGNATURE - Cardelan Charmonian Charmen and an anna an Anna Anna Anna Anna Ann	NAME - Certification Worker / Licensing Specialist Amy Fewel	Hannedy Heights community	Description: Back-up provider is required.	3 202.08(5)(em) The Certified Child Care Operator Has A Designated Adult Who Can Provide Assistance In The Event An Unexpected Emergency. The Emergency Back-Up Child Care Provider Is At Least 18 Years Of Age And Can Provide An Acceptable Level Of Child Care.	Rule/Statute Number Noncompliance Statement	Address - Facility (Street, City, State, Zip Code) 105 Kennedy Hts Madison WI 537041618	Name - Certified Operator / Licensed Center Latonya Franklin
		unity	Canter	Hannady Harghts	Correction Plan	Telephone Number 608-807-8145	00000 Provid
	Date Issuec 9/27/2019			11-4-P	Expected Verification Completion Date Date	Date - Regulation Visit 9/27/2019	Provider Number / Facility ID Number 0000589610 / 001