

Date Correction Plan Due 6/17/2024	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	
Joyful Beginnings Academy		1000591211 / 001 - 2006378	
Address - Facility (Street, City, State, Zip Code) W9570 Poker Flats Ct Hortonville WI 549442707		Telephone Number 920-710-9005	Date - Regulation Visit 4/25/2024
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date
1	251.05(4)(c)2m. Continuing Education Requirement - Less Than 8 Months Description: Based on record review on 4/25/24 according to the Staff Record Checklist Staff Member B failed to meet the continuing education requirements for 2023. The staff member only had 6 hours of continuing education versus the required 14 hours needed for an employee who is employed less than 8 months.	teacher to complete current and past due hours	8-12-24 ^(SS)
2	251.06(2)(a) Potential Source Of Harm On Premises Description: On 2/8/24, a staff Member received a written warning that tobacco/nicotine product (a vape pen) was on the premise and within reach of children.	updating staff policies - specifying exact req. + conseq.	8-5-24

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	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date Verification Date
3	251.06(2)(h) Smoking Prohibited On Premises And In Vehicles Description: On 2/12/24, a staff member was observed to be smoking in their vehicle on the premise. This was reported to the director and the director completed a written warning for the staff member.	Updating policies staff no longer employed.	8-5-24

NAME - Agency Worker
Cassandra Debauche

Date Issued
6/3/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed