

Date Correction Plan Due 11/18/2024	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 920-785-7811
---	--	---

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 Joyful Beginnings Academy		Provider Number / Facility ID Number 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 8/12/2024	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.04(2)(h) Policies Submitted & Implemented Description: The program failed to implement it's authorized pick up policy on 8/7/24. The policy states Children will only be released to persons listed on the enrollment form. If anyone other than the child's parent or someone who is listed on the enrollment form is to pick up a child, the director needs to be notified in writing via the app or by a telephone call in advance. The person picking up the child will need to show a driver's license or other picture ID. Staff members failed to check the person's driver's license or picture ID when a child was picked up at the park by a new authorized person.	Even if director approves ID of new pick up, staff will check ID of any new pick up in addition to the first check. Director will remind teachers of this protocol whenever off-site, as needed.	Immediate	

Name - Certified Operator / Licensed Center Joyful Beginnings Academy		Provider Number / Facility ID Number 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 8/12/2024
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date Verification Date
2	<p>251.055(1)(a) Supervision Of Children</p> <p>Description: On 8/6/24 A three year old child failed to be supervised by a child care worker who was within sight and sound of the child to guide the children's behavior and activities, prevent harm, and ensure safety.</p> <p>A three year old child was given permission to walk alone down the hallway 42 feet to their cubby to put a picture in their cubby. Another staff member who was working within their classroom observed the child go out the side door at the end of the hallway into the parking lot. The staff member quickly caught up to the child, picked the child up and carried them back to their classroom.</p> <p>Repeat violation: Previously cited on 7/31/2024, 7/18/2024</p>	<p>New walky-talkie monitoring system in place to enhance communication for needs of help and supervision.</p>	<p>September 30, 2024</p>

NAME - Agency Worker
Cassandra Debauche

Date Issued
11/4/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee
Stacey Schmidt

Date Signed
11/15/2024