608-422-6765	PLAN	3/11/2024
TO FILE A COMPLAINT CALL	NONCOMPLIANCE STATEMENT AND CORRECTION	Date Correction Plan Due

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. 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

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 Complete the section labeled "Correction Plan" by indicating the steps that will be taken to address and correct each of the listed noncompliance(s). notice of the sanction and / or penalty and your appeal rights. noncompliance statement and correction plan near the license in accordance with Wis. Stat. 48.657. 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 Identify expected completion

Exits & Passageways - Unobstructed, Minimum Width Description: The exit and exit passageway in the school age room in the lower level did not have a minimum clearance of 3 feet when it was obstructed by a stack of two chairs with boxes on top of them, and a tote in front of the exit door.	Staff Record - Physical Examination Description: A physical examination indicating that a person is free from illness detrimental to children and physically able to work with children was not complete 30 days after being hired when Staff B was hired on January 8, 2024 and does not have a physical examination report.	Rule/Statute Number Noncompliance Statement	Address - Facility (Street, City, State, Zip Code) 119 Monroe St Beaver Dam WI 539162436	Name - Certified Operator / Licensed Center Cubby Bear Llc
Exit has been cleared and cleaned and cleaned and ALL staff have been advised that it needs to stay clear.	staff member has been contacting office to have faxed to us.	Correction Plan	Telephone Number 920-631-7003	9000 3000
2/19/24	311124	Expected Completion Date	Date - Regulation Visit 2/19/2024	Provider Number / Facility ID Number 3000589473 / 001 - 2003975
		Verification Date	n Visit	umber

Nan	Name - Certified Operator / Licensed Center	Provide	Provider Number / Facility ID Number	nber
Cut	Cubby Bear Lic	300058	3000589473 / 001 - 2003975	
Add 119	Address - Facility (Street, City, State, Zip Code) 119 Monroe St Beaver Dam WI 539162436	Telephone Number 920-631-7003	Date - Regulation Visit 2/19/2024	Visit
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
ω	251.07(2)(e)3. Prohibited Actions - Physical Restraint, Restriction, Enclosure	Teacher was let go Immediately and out	2 2 24	
	Description: A teacher physically restrained a child when she grabbed the child around his torso with both of her hands and wrapped one of the child's arms around his torso and the other arm up around his shoulder. The teacher restricted the child's movement by holding his arms that were wrapped around his body, with her arms.	0 + 0		

NAME - Agency Worker Kimberly Liebhart

Date Issued 2/26/2024

Date Signed | 303 4

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

SIGNATURE - Certified Operator or Designee / Licensee or Designee