

Date Correction Plan Due 10/20/2021	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 262-446-7800
---	--	---

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 Casa De Corazon - Shorewood		Provider Number / Facility ID Number 7000589897 / 001 - 2004669		
Address - Facility (Street, City, State, Zip Code) 4114 N Oakland Ave Shorewood WI 532112024		Telephone Number 414-436-9227	Date - Regulation Visit 9/29/2021	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.05(2)(a)3.a. Staff Record - Physical Examination Repeat violation: Previously cited on 3/12/2020	Physical examination for this staff member has been completed and is ready for pick up at the clinic. Staff member has been instructed to resolve this in order to meet rule 251.05(2)(a)3.a.	10/29/2021	
2	251.05(2)(a)4.a. Staff Record - Registry Certificate Repeat violation: Previously cited on 3/12/2020	Staff files have been reviewed to ensure every teacher has a Registry Certificate. Staff members that renewed Registry memberships are waiting for applications to be processed and certificates to be available, this way meeting requirements of rule 251.05(2)(a)4.a.	11/26/2021	

Name - Certified Operator / Licensed Center		Provider Number / Facility ID Number		
Casa De Corazon - Shorewood		7000589897 / 001 - 2004669		
Address - Facility (Street, City, State, Zip Code)		Telephone Number	Date - Regulation Visit	
4114 N Oakland Ave Shorewood WI 532112024		414-436-9227	9/29/2021	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3	251.05(2)(a)5. Staff Record - High School Diploma	Staff member has a Bachelor's Degree in Education and has provided a copy of this diploma. Staff member has also provided a copy of Teacher-Provisional License expedited by Wisconsin Department of Public Instruction. Teacher has been asked to provide a copy of High School diploma, but that might mean flying to a different country to e it. Will be submitting an exception request form.	11/26/2021	
4	251.09(1)(c) Infant & Toddler - Documenting Changes In Development	Staff has been reminded of the expectations and instructed to review and update all Intake Forms. All infant and toddler classroom will be audited to ensure completion and compliance with rule 251.09(1)(c)	10/29/2021	
5	251.09(3)(a)2. Infant & Toddler - Food & Formula Brought From Home Repeat violation: Previously cited on 1/3/2020	Teachers in this classroom were reminded of the correct procedures and all bottles were labeled and dated. All infant teachers will be re-trained in order to comply with rule 251.09(3)(a)2.	10/29/2021	

NAME - Certification Worker / Licensing Specialist
Sharon Lebeck

Date Issued
10/6/2021

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Keyshla Márquez

Date Signed
10-21-2021