Date Correction Plan Due
4/10/2019

NONCOMPLIANCE STATEMENT AND CORRECTION
PLAN

TO FILE A COMPLAINT CALL
608-422-6765

**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.

| Nam  | ne - Certified Operator / Licensed Center  | Provide   | Provider Number / Facility ID Number 3000581263 / 001 - 1010699 |                      |  |
|--|--|---|---|----------------------|--|
| Onc  | ce Upon A Time Child Care Center   | 300058  |   |                      |  |
| Address - Facility (Street, City, State, Zip Code) 910 Whalen Rd Verona WI 53593 |  | Telephone Number<br>608-845-2367  | Date - Regulation Visit<br>2/19/2019                            |                      |  |
|  | Rule/Statute Number Noncompliance Statement  | Correction Plan   | Expected Completion Date  | Verification<br>Date |  |
|  | 251.04(7)(b) Access To Records & Reports - Parents  Description: A parent did not have access to all records and reports maintained on her child when she requested all records and received only a portion of the file. | A copy of the entire file was made. The parent came in to review the file and took pictures of what she wanted. The parent elected not to take the copies that were made. The copies were shredded.                 | 2-27-19   | 4/3/2019             |  |
| 2  | 251.07(2)(e)3.  Prohibited Actions - Physical Restraint, Restriction, Enclosure  Description: Staff used a prohibited action when they physically restrained a five-year-old child on January 22, 2019.                  | The staff were reminded that children can never be restrained. In this case, the child was running out of the buildling. Staff held the child to keep him and others safe until adminstration could come to assist. | 2-19-19   | 4/3/2019             |  |

**NAME** - Certification Worker / Licensing Specialist Chelsey Thill

Date Issued 3/27/2019

Date Signed

SIGNATURE - Certified Operator or Designee / Licensee or Designee

3-28-19

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