

Date Correction Plan Due 4/1/2024	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.

Name - Certified Operator / Licensed Center After School Van Hise		Provider Number / Facility ID Number 2000557872 / 034 - 120283	
Address - Facility (Street, City, State, Zip Code) 246 S Segoe Rd Madison WI 537054953		Telephone Number 608-616-0305	Date - Regulation Visit 2/19/2024
		Correction Plan	
1	<p>251.055(1)(a) Supervision Of Children</p> <p>Description: Each child in care was not supervised by a child care worker when on November 14, 2023 two six-year old children were left outdoors on the playground for approximately five minutes. Also, on February 15, 2024, two seven-year-old children left the playground and walked home with out a child care worker noticing. These incidents were self-reported by the center.</p>	<p>-WYC tracking and supervision procedures were reviewed immediately following both incidents with program staff.</p> <p>-All staff at program location received a retraining on tracking/supervision procedures.</p> <p>-A program manager or program director has been assigned to this program site every day to ensure proper supervision and tracking procedures are followed.</p>	<p style="text-align: center;">Expected Completion Date</p> <p style="text-align: center;">2/16/2024</p> <p style="text-align: center;">Verification Date</p>

Name - Certified Operator / Licensed Center		Provider Number / Facility ID Number		
After School Van Hise		2000557872 / 034 - 120283		
Address - Facility (Street, City, State, Zip Code)		Telephone Number	Date - Regulation Visit	
246 S Segoe Rd Madison WI 537054953		608-616-0305	2/19/2024	
Rule/Statute Number	Noncompliance Statement	Correction Plan	Expected Completion Date	
Verification Date				
2	<p>251.055(1)(f) Child Tracking Procedure</p> <p>Description: The center failed to use its tracking system when on November 14, 2023 two six-year old children were left outdoors on the playground for approximately five minutes. Also, on February 15, 2024, two seven-year-old children left the playground and walked home without a child care worker noticing. These incidents were self-reported by the center.</p>	<p>-WYC tracking and supervision procedures were reviewed immediately following both incidents with program staff. -All staff at program location received a retraining on tracking/supervision procedures. -A program manager or program director has been assigned to this program site every day to ensure proper supervision and tracking procedures are followed.</p>	2/16/2024	

NAME - Agency Worker
 Jenny Capener

Date Issued
 3/18/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed
 3/28/24

