

Date Correction Plan Due 10/9/2024	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 715-930-1148
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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 252.04(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. Publicly submitted 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 staff. 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 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 notified of the sanction and / or penalty and your appeal rights.

Name - Certified Operator / Licensed Center Daddy And Friends Family Day Care	Provider Number / Facility ID Number 0000559840 / 001 - 1001740
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Address - Facility (Street, City, State, Zip Code) 1616 State Hwy 35 Nelson WI 54756	Telephone Number 715-673-4748	Date - Regulation Visit 9/19/2024
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Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
<p>250.05(3)(e)2. Provider Training - Current Cpr Certificate</p> <p>Description: Documentation of Staff A maintaining a current certificate of completion for infant and child cardiopulmonary resuscitation (CPR) including Department-approved training in the use of an automatic external defibrillator within 3 months of beginning to work with children was not available for review.</p> <p>Repeat violation: Previously cited on 11/13/2023, 10/17/2022</p>	<p style="font-size: 1.2em; font-family: cursive;">Take online Class.</p>	<p style="font-size: 1.2em; font-family: cursive;">by end of Oct. 2024</p>	

Name - Certified Operator / Licensed Center

Provider Number / Facility ID Number

Abby And Friends Family Day Care

0000559840 / 001 - 1001740

Address - Facility (Street, City, State, Zip Code)

Telephone Number
715-673-4748

Date - Regulation Visit
9/19/2024

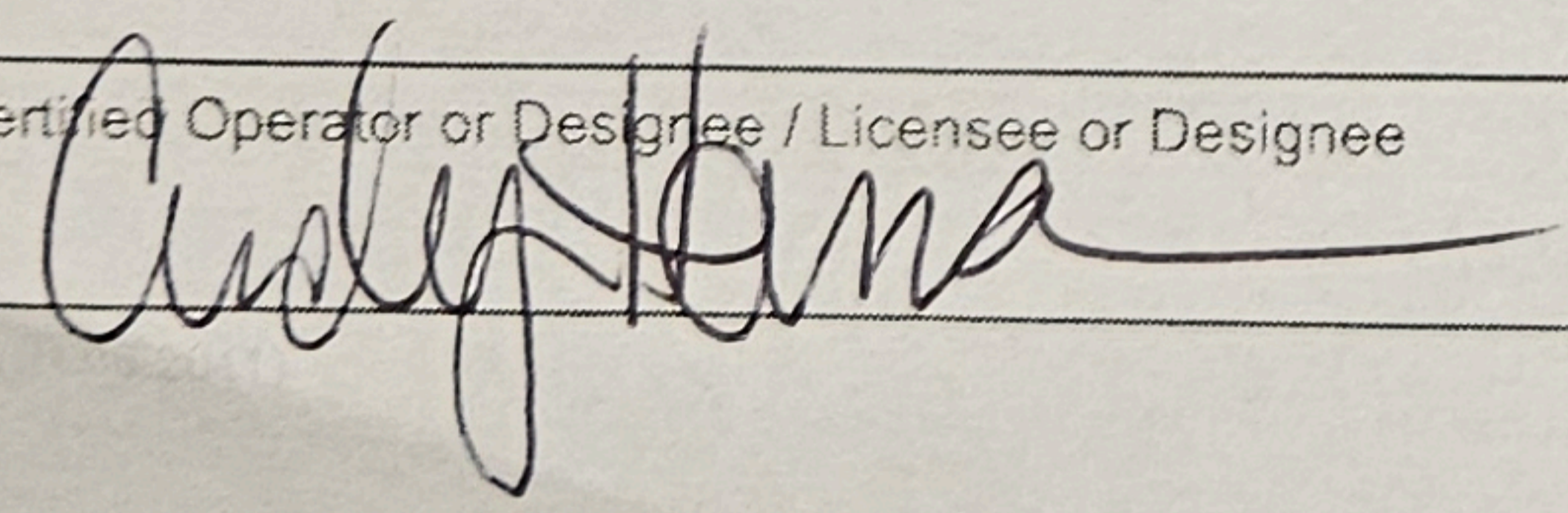
S616 State Hwy 35 Nelson WI 54756

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
2	<p>250.06(11)(b)4. Outdoor Play Space - Enclosure</p> <p>Description: The fencing around the outdoor play structure was curling up from the ground creating openings greater than 4 inches between the fence and the ground. A permanent enclosure not less than 4 feet high shall be provided to protect the safety of children in care. The permanent enclosure may not have any open areas that are greater than 4 inches.</p>	<p>Fix fence and screws.</p>	<p>by end of Oct. 2024</p>	
3	<p>250.07(3)(a)3. Play Equipment - Placement</p> <p>Description: Equipment within the outdoor enclosed play space was not placed so as to avoid danger of accident or collision and to permit freedom of action. Play equipment is placed too close to the teeter-totter and the swings to allow freedom of movement.</p>	<p>Move equipment/toys</p>	<p>by end of Oct. 2024</p>	

NAME - Agency Worker
April Callihan

Date Issued
9/25/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee



Date Signed

9/30/24