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| Date Correction Plan Due 12/4/2025 | 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 252.41(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.

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| 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 | Date - Regulation Visit |
| S616 State Road 35 S Nelson WI 547568420 | | 715-673-4748 | 9/4/2025 |
| | Rule/Statute Number Noncompliance Statement | Correction Plan | Expected Completion Date |
| 1 | 250.04(6)(a)3. Child Record - Alternate Arrival / Release Agreement Description: Child # 3's record was missing a written agreement, such as Alternate Arrival and Release form, signed by the parent, outlining the plan for a child to come to or from the center from school. | Will do as soon as she is at daycare again. | NOV 1st 2026 Done 9/18/25 |
| 2 | 250.04(6)(b) Current, Accurate Daily Attendance Record Description: The attendance was not current and accurate when two of the children in care were not signed in on the attendance record. The provider signed the children in upon noticing the oversight. | Sign children in when they arrive. | Signed in right away |

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| 3 | 250.05(3)(e)2. Provider Training - Current Cpr Certificate Description: Documentation of Staff A maintaining a current certificate of completion for Department-approved training in infant and child cardiopulmonary resuscitation (CPR), including the use of an automatic external defibrillator was not available for review. Repeat violation: Previously cited on 9/19/2024, 11/13/2023 | Will do online <u>Asap.</u> | April 1st <u>2026</u> |

NAME - Agency Worker
April Callihan

Date Issued
11/20/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed

3/4/2026

ALTERNATE ARRIVAL / RELEASE AGREEMENT - CHILD CARE CENTERS

Use of form: This form is voluntary. However, this completed form, when on file in the child's record, meets the requirements of DCF 251.04(6)(a)3. and DCF 251.04(6)(a)5. and 251.095(4)(a)2. Personal information you provide may be used for secondary purposes [Privacy Law, s.15.04(1)(m), Wisconsin Statutes].

Instructions: Complete this form for placement in the child's file when the child will arrive at the center from school, home or other activities, or depart from the center to go to school, home or other activities, and the child will not be accompanied by a parent or other previously authorized person or transported by the center. This form should be updated as information changes. Periodic review with the parent / guardian is recommended to ensure safety. If the center transports the child, the department's form "Transportation Permission - Child Care Centers" may be used to obtain parental authorization.

ARRIVAL INSTRUCTIONS

My child Bettye Hardesty (Child's name)

will arrive at Abby + Friends Family Daycare - Cindy Hanson (Name of center)

from Alma Aren School (School, home or other activity)

by way of School bus (Walking, bicycle, bus, car pool, etc. Be as specific as possible.)

at 3:40 A.M. OR P.M. (Time of arrival)

on Sunday Monday Tuesday Wednesday Thursday Friday Saturday (Days of the week) DAYS VARY

My child will arrive from this destination with OR without center supervision.

RELEASE INSTRUCTIONS

My child Bettye Hardesty (Child's name)

will leave Abby + Friends Family Daycare - Cindy Hanson (Name of center)

by way of School bus (Walking, bicycle, bus, car pool, etc. Be as specific as possible.)

to go to Alma Aren School (School, home or other activity)

at 7:40 A.M. OR P.M. (Time of departure)

on Sunday Monday Tuesday Wednesday Thursday Friday Saturday (Days of the week) DAYS VARY

My child will travel to this destination with OR without center supervision.

ADDITIONAL INSTRUCTIONS

I understand that I am responsible for notifying the center of any changes in this schedule such as vacation, school conference days, etc.

SIGNATURE - Parent

Date Signed (mm/dd/yyyy)

9/18/2025