

Date Correction Plan Due 4/4/2022	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 608-422-6765
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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.

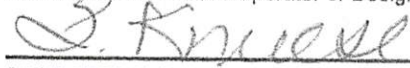
Name - Certified Operator / Licensed Center Dragonfly Childcare Llc		Provider Number / Facility ID Number 0000584730 / 001 - 1014351	
Address - Facility (Street, City, State, Zip Code) 1411 Inverness Ct Reedsburg WI 53959		Telephone Number 608-383-8291	Date - Regulation Visit 3/21/2022
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date
1	250.04(3)(m) Report - Communicable Disease Description: Cases of communicable disease were not reported to the Department when the licensee disclosed that there had been active COVID-19 cases within the center and did not notify the Department.	Notified Health Dept. Did not know this had to be reported there also like measles, ckn pox MRSA	3/21/22
2	250.06(2)(c) Access To Materials Potentially Harmful To Children Description: Materials potentially harmful to children were not stored in an inaccessible area when two bottles of Bug Killer were observed on a grill within the outdoor play space. Repeat violation: Previously cited on 6/9/2021	Did not even realize these were there as the neighbor brought them over. I immediately discarded them when you left because I wouldn't use them anyway. He is always trying to help.	3/21/22

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			Verification Date

NAME - Certification Worker / Licensing Specialist
Amanda St. Martin

Date Issued
3/21/2022

SIGNATURE - Certified Operator or Designee / Licensee or Designee



Date Signed

