

**INSTRUCTIONS FOR COMPLETING THE CORRECTION PLAN SECTION OF THE
NONCOMPLIANCE STATEMENT AND CORRECTION PLAN (DCF-F-CFS294)**

I have attached the Noncompliance Statement and Correction Plan (DCF-F-CFS294) dated March 07, 2025. Please complete this form as follows:

1. In the column titled "Correction Plan," indicate how you intend to correct each noncompliance listed on the form and outline the steps you will take to prevent future violation of the same rule. If you need more space than is provided on the form, attach additional pages and identify the item number to which the correction plan is related. Because completed and approved correction plans will be scanned and linked to the Regulated Child Care and YoungStar Public Search internet site, which shows each provider's violations, please note the following when writing your correction plan:
 - Do not include confidential information, including the names of children and staff.
 - Write in concise, plain English.
 - Be specific when describing what you have done or intend to do to correct each violation. Non-specific statements such as "It will be fixed", "Done", "Will do", "Don't agree" or "This won't happen again" do not provide the reader with any understanding of how the violation has been corrected or how you plan to prevent the violation from occurring again.
 - Be objective, factual and descriptive. The plan should not include derogatory comments, profanity or subjective observations, such as "The licensing specialist doesn't like me."
2. For each noncompliance, enter the date (month, day, year) by which you expect the correction plan to be completed.
3. Sign and date the form. Retain a copy for your records.
4. **Return the completed and signed form to the department by the due date that appears at the top left of the form via:**
 - **Email:** APRIL.CALLIHAN@WISCONSIN.GOV or
 - **Fax:** (715) 930-1139 or
 - **Mail:** DEPARTMENT OF CHILDREN AND FAMILIES
BUREAU OF EARLY CARE REGULATION
WESTERN REGION
610 GIBSON STREET
SUITE 2
EAU CLAIRE, WI 547012626

If the correction plan and the completion dates are acceptable, the form will be linked to the Regulated Child Care and YoungStar Public Search internet site. If the correction plan or the expected completion dates are not acceptable, you will be contacted in writing or by telephone.

You are required to post a copy of the Noncompliance Statement and Correction Plan (DCF-F-CFS294) in a conspicuous area near the license so that it is visible to parents. This copy must remain posted until all noncompliances have been verified as corrected and the next DCF-F-CFS294 or DCF-F-CFS785 (Compliance Statement) has been issued. Note: If applicable, do not post the Staff and Child Identification Key. The information on the key is confidential and is meant for your reference only.

Please take a few minutes to complete the Department of Children and Families (DCF) customer satisfaction survey so that you can tell us about your experience. The responses we receive to the survey will be compiled and reviewed by DCF staff to help us improve our services to child care providers. The survey takes approximately 5 minutes to complete. It is voluntary and anonymous, and there is no penalty for not responding. DCF staff will not be able to tell whether or not you responded to the survey or know what responses you submitted. Please follow this link to provide your feedback: <https://www.surveymonkey.com/r/LicenseFeedback>. Or, if you don't have internet access, contact your licensing office and request a paper version of the survey and a prepaid reply envelope .

Contact me if you have any questions.

Date Correction Plan Due 3/21/2025		NONCOMPLIANCE STATEMENT AND CORRECTION PLAN		TO FILE A COMPLAINT CALL 715-930-1148	
<p>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.</p> <p>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.</p> <p>Name - Certified Operator / Licensed Center Spring Hill Childcare</p> <p>Address - Facility (Street, City, State, Zip Code) N9062 280Th St Boyceville WI 547255008</p> <p>Telephone Number 715-308-4569</p> <p>Provider Number / Facility ID Number 8000591888 / 001 - 2007118</p> <p>Date - Regulation Visit 2/4/2025</p>					
1	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date	
1	<p>250.04(6)(a) Child Record - Maintenance, Availability</p> <p>Description: The licensee did not maintain a current written record at the center on the provider's own child, who is under age 7. Upon notification, the provider promptly made notes to create a file for her child.</p>	<p>I corrected this right away by making a file for my child.</p>	<p>2/4/2025</p>		
2	<p>250.04(6)(b) Current, Accurate Daily Attendance Record</p> <p>Description: The provider had not signed her own child into care on the attendance form. The provider promptly signed her child in upon notification.</p>	<p>I corrected this right away by adding my son to the daily attendance record</p>	<p>2/4/2025</p>		

Name - Certified Operator / Licensed Center

Spring Hill Childcare

Provider Number / Facility ID Number

8000591888 / 001 - 2007118

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

N9062 280Th St Boyceville WI 547255008

Telephone Number

715-308-4569

Date - Regulation Visit

2/4/2025

Rule/Statute Number
Noncompliance Statement

Correction Plan

Expected
Completion Date

Verification
Date

NAME - Agency Worker
April Callihan

Date Issued
3/7/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed

April Callihan
03/08/2025

EXCEPTION REQUEST

Use of form: This form is voluntary. However, when completed and posted next to the license certificate, this form meets the requirements of DCF 250.02(2), 251.02(2) and 252.02(4) of the Wisconsin Administrative Codes. If you fail to comply with the conditions of the exception, the exception will be rescinded and you will be issued a Noncompliance Statement and possibly an enforcement action. Personal information you provide may be used for secondary purposes [Privacy Law, s.15.04(1)(m), Wis. Stats].

Instructions licensee: The licensee shall complete the top section, including signature and date, and submit the form to the licensing specialist for approval. If additional space is required, attach separate sheet(s). All approved exceptions must be posted next to the license. If the licensee wants any changes to the conditions of an existing approved exception, a new request must be submitted to the department for approval. Exceptions are not transferrable. **Exceptions must be resubmitted for approval at license continuation.**

Instructions licensing specialist: The licensing specialist shall complete the "For Department Use Only" section, sign and date the form, and send a completed copy to the licensee. If additional space is required, attach separate sheet(s). If the request contains personally identifiable information for a specific child or staff member, the licensing specialist will also complete a CFS-297A, Exception Granted – Confidential form to be posted next to the license certificate in place of the document containing the confidential information.

Name – Facility Spring Hill Childcare	Facility ID Number 2007118
Address – Facility (Street, City, State, Zip Code) N9062 280 th Street, Boyceville, WI 54725	County in Which Facility is Located Dunn

Applicable Rule Number(s) for which you are requesting an exception
 DCF 250.04(2)(g) - INSURANCE INFORMATION TO PARENTS

Existing Situation – Specify
 Provider must have insurance coverage equal to the licensed capacity if pets are accessible to children. Provider requests to be licensed to care for seven children. Current liability insurance covers up to six children who are not household members. Provider's home owner's insurance would cover her own child under age 7.

Describe your alternative plan to meet the intent of the rule(s) for which you are requesting an exception
 Current liability insurance covers up to six children who are not household members. Provider's homeowner's insurance would cover her own child who is under age 7.

Provide dates of proposed exception From: 12/06/2024 To: 06/30/2025 (end date may be no later than your next license continuation date)
 (mm/dd/yyyy) (mm/dd/yyyy)

Tracy Link Name – Licensee (Type / Print) Licensee
[Signature] SIGNATURE – Licensee Licensee Title / Position (Type / Print)
03/08/2025 Date Signed (mm/dd/yyyy)

FOR DEPARTMENT USE ONLY

Licensing Specialist Action: Approve Deny Begin Date: 12/06/2024 End Date: 06/30/2025

Reason for Action – Specify.
 To accommodate a provider with liability coverage of 6 unrelated children & homeowner's insurance for HH child
 Conditions – Specify.

The childcare must continue to carry liability insurance for 6 children unrelated to the provider during licensed hours of operation. This exception will expire when the provider's child Xander (D.O.B.: 12/16/19) turns 7 on 12/16/26. Prior to the expiration, the provide will need to either:

- *Obtain liability insurance for seven children
- *Decrease the licensed capacity to six children [Policies would need to be amended.]
- *No longer have pet(s) accessible to children, in which case insurance is not longer required. [Amend policies]

 SIGNATURE – Licensing Representative Licensing Specialist

 Licensing Representative Title / Position Date Signed