

Date Correction Plan Due 10/2/2018	<b>NONCOMPLIANCE STATEMENT AND CORRECTION PLAN</b>	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.

**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 Teddy Bear Totland		Provider Number / Facility ID Number 6000556336 / 001 - 530806		
Address - Facility (Street, City, State, Zip Code) 914 Therbrook St Chippewa Falls WI 54729		Telephone Number 715-726-0185	Date - Regulation Visit 9/17/2018	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	250.04(5)(k) Staff File - Registry Certificate  Description: One of the center's providers does not have a Registry certificate on file, which is required after working 240 hours.	The staff has applied for a certificate for the registry	9/18/18	



**NAME** - Certification Worker / Licensing Specialist  
Heather Ruf

Date Issued  
9/17/2018

**SIGNATURE** - Certified Operator or Designee / Licensee or Designee  
*Celeste J. Switkowski*

Date Signed  
9/20/18

and make all  
the effort for  
the benefit of  
the patient.

1/2/18

1/2/18

George A. Spink