

Page: 1/2

Date Correction Plan Due 3/24/2020	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 715-361-7700
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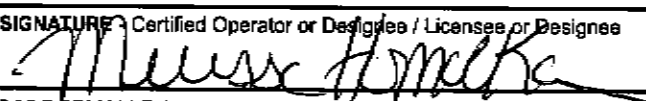
Use of Form: This form is used by certification / licensing staff to identify statute and / or administrative rule violation(s) and to outline imposed plans of correction, if applicable. This form is used by certified operators / licensed centers to meet the requirements of DCF 202.065, DCF 250.04(2)(i) 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 Story Book Kids		Provider Number / Facility ID Number 8000583968 / 001 - 1013512		
Address - Facility (Street, City, State, Zip Code) 658 Maple Ridge Rd Mosinee WI 544559272		Telephone Number 715-693-5580	Date - Regulation Viol 2/27/2020	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.04(2)(a) Compliance With Laws Description: Contrary to s. 48.686(4m)(c) Wis. Stats., the center failed to obtain an approved preliminary report indicating that Staff C, D, and E were eligible to work in the child care program prior to them working as caregivers. Repeat violation: Previously cited on 10/14/2019	All staff who were previous employees with background checks that had expired were sent in for new finger prints upon the return of the Director who was out on medical leave.	3/13/2020	

MAR-13-2020 12:01 From:

Name - Certified Operator / Licensed Center Story Book Kids		Provider Number / Facility ID Number 8000583968 / 001 - 1013512	
Address - Facility (Street, City, State, Zip Code) 658 Maple Ridge Rd Mosinee WI 544559272		Telephone Number 715-693-5580	Date - Regulation Visit 2/27/2020
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date Verification Date
2	251.055(1)(f) Child Tracking Procedure Description: Staff A and Staff B in the 3-year-old/4K wraparound combined classroom indicated they had 12 children in the classroom when they had 13. A review of the sign in sheet indicated that 16 children should have been present. Two children, who had been transitioned to the school-age group, were not signed out. One child was signed in but did not attend the center that day due to illness.	A new child tracking system was created to make combining classrooms and signing children out less confusing.	3/13/2020
3	251.07(2)(e)5. Prohibited Actions - Cruel, Aversive, Frightening, Humiliating Actions Description: In the 3-year-old classroom at lunch time, two children were each sitting at a table by themselves. When asked why they were not sitting at a table with the other children, staff indicated they are required to sit at separate tables due to behavior concerns.	The lead teacher who was out on medical leave was talked to about separating children. It has also been placed as a discussion topic for our staff meeting on 3/11/2020	3/11/2020

NAME - Certification Worker / Licensing Specialist Kirsten Kronberger	Date Issued 3/10/2020
SIGNATURE - Certified Operator or Designee / Licensee or Designee 	Date Signed 3/12/2020

DCF-F-CFS0294-E (R.06/2011)