



Dear Child Care Director,

Thank you for your attention to the Corrective Action Plans. Please review this document completely and work closely with your DHS Child Care Licensing Consultant as you work to resolve licensing violations.

As a result of a recent child care visit, a decision has been made to issue a provisional license. As indicated in the Iowa Administrative Code, DHS must review written plans and verification of activities to demonstrate the resolution of program rules before we can “upgrade to a full license.” **Please note that the provisional license must be posted clearly and readily observable (“conspicuous place”) until a new license is issued to replace the provisional license.**

Corrective Action Plan Instructions:

1. Please complete this plan **within 10 days** and return this electronically to your DHS Child Care Consultant. (*The due date will be identified by DHS.*)
2. Please reference every violation on the corrective action plan (*next page*) associated with your most recent DHS visit and provide a detailed response with how violations were resolved or how you intend for these violations to be resolved. Failure to submit the plan in the provided format or the inability to have the plan approved will be considered a failure to operate the childcare facility in compliance with licensing standards and may result in revocation.
3. DHS must review and approve the corrective action plan, as well as, verify resolution before releasing the provisional license and returning a full license. The license will remain on a provisional status until upgraded. By Iowa Code, a provisional license shall not be renewable in regard to the same standards for more than two consecutive years. If there has been no resolution after the second provisional license, DHS must revoke the childcare license.
4. DHS will be looking closely at your planned interventions and evaluating the likelihood of success to ensure the violation does not recur.
5. Please keep evidence of the stated resolution or plan of resolution. It may be as simple as taking a photograph of corrections, submitting receipts, submitting training certificates, modifying policies, assigning specific job duties such as file management and environmental checking.
6. You are encouraged to consider other community supports such as Child Care Resource & Referral (CCR&R) to assist your effort in making improvements.
7. Please don’t hesitate to reach out to DHS for assistance. DHS monitoring and follow up visits will be determined on an individual basis.

Example:

Rule Violation	Plan of Resolution	Dates Associated with the Plan	Persons Responsible
Identify a brief summary of each rule violation.	Identify activity, training, procedures to resolve the rule violation. Note: Please keep and submit evidence of specific resolution (photographs, certificates, policy amendments, compliance and monitoring checklist, etc.)	Begin date and how often procedure will be done.	
Sharp objects were accessible to children	<ol style="list-style-type: none"> 1. Scissors were immediately removed 2. Expectations were clarified in our monthly meeting (agenda attached) 3. Each lead teacher is assigned additional duties of completing a daily safety checklist to ensure we are actively evaluating this safety concern (checklist with initials attached) 	<ol style="list-style-type: none"> 1. 1/1/2013 2. 1/2/2013 3. 1/31/2013 	<ol style="list-style-type: none"> 1. Alice (director) 2. Alice (director) 3. Lead Teacher (director will review monthly)



Corrective Action Plan to Address Child Care Licensing Rules

Child Care Program Name		Due Date (DHS will identify this date.)	
Address		Director Name	
Rule Violation	Plan of Resolution	Dates Associated with the Plan	Persons Responsible
Identify a brief summary of each rule violation.	Identify activity, training, procedures to resolve the rule violation. Note: Please keep and submit evidence of specific resolution (photographs, certificates, policy amendments, compliance and monitoring checklist, etc.)	Begin date and how often procedure will be done.	
	1.	1.	1.

Child Care Director or Representative Signature: _____ Date: _____

State agency evaluation of corrective action plan: Accepted Not accepted (Explain below. Attach additional pages if needed.)
 Date: _____
 DHS response: _____

Note: Quarterly progress reviews will occur after the plan is approved until the provisional license is lifted or when revocation begins.

Rule Violation	Plan of Resolution	Dates Associated with the Plan	Persons Responsible
Identify a brief summary of each rule violation.	Identify activity, training, procedures to resolve the rule violation. Note: Please keep and submit evidence of specific resolution (photographs, certificates, policy amendments, compliance and monitoring checklist, etc.)	Begin date and how often procedure will be done.	
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