

**Date Correction Plan Due**  
3/20/2025

**NONCOMPLIANCE STATEMENT AND CORRECTION PLAN**

**TO FILE A COMPLAINT CALL**  
715-930-1148

**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 of a future finding, you will be given a notice of the sanction and / or penalty and your appeal rights.

**Name - Certified Operator / Licensed Center**

The Bumblebee Forest Childcare Center

**Provider Number / Facility ID Number**  
8000588968 / 003 - 2004354

**Address - Facility (Street, City, State, Zip Code)**  
11568 Fremont St Trempealeau WI 546619246

**Telephone Number**  
608-534-2120

**Date - Regulation Visit**  
1/29/2025

Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
<p>1 251.04(2)(L)1.b. <b>Department Notices Posted</b></p> <p>Description: A Notice of Order to Comply with Administrative Codes issued on 10/23/24 was not posted. Any notice from the Department regarding rule violations shall be posted in a place visible to parents.</p>	<p>• Director moved all noncompliances to a different spot within the entry corridor 03/03/25</p>	<p>03/03/25</p>	
<p>2 251.04(6)(a)8.b. <b>Child Record - Physical Exam - Over 2, Under 5</b></p> <p>Description: Child # 7 was missing documentation of having received a follow up health examination at least once within the past two years. The most recent health exam was dated 02/23/22.</p>	<p>• Staff notified parents again of the need for an Exam documentation. • discontinuing care if not in by 03/31/25</p>	<p>02/10/25</p>	

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<p>3</p> <p>251.05(2)(a)3.a. <b>Staff Record - Physical Examination</b></p> <p>Description: Staff C's record was missing a physical examination report on a form provided by the Department, completed 12 months prior or within 30 days after beginning work at the center, indicating the person is free from illness detrimental to children, including tuberculosis, and physically able to work with young children.</p> <p>Repeat violation: Previously cited on 11/13/2023</p>	<p>• Staff was unable to get appointment until 02/05/2025</p> <p>• Paperwork from appointment on 02/05/2025 in file</p>	<p>03/03/25</p>	
<p>4</p> <p>251.05(3)(b) <b>Abusive Head Trauma Prevention Training</b></p> <p>Description: Staff C and H were missing documentation of having received training on preventing Abusive Head Trauma and both staff have been providing care and supervision to children under 5 years of age. Each child care worker, center administrator, center director, volunteer counted in staff-to-child ratio, or substitute who provides care and supervision to children under 5 years of age shall document completion of department-approved training in abusive head trauma, and appropriate ways to manage crying, fussing, or distraught children prior to beginning to work with children under 5 years of age.</p>	<p>• Staff completed wrong AHT training</p> <p>• correct training completed on 02/10/2025</p> <p>• Paperwork placed in file.</p>	<p>02/10/25</p>	

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Date - Regulation Violation  
1/29/2025

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<p>5 251.05(3)(c) <b>Cardiopulmonary Resuscitation Training</b></p> <p>Description: Documentation of Staff A obtaining and maintaining a current certificate of completion for infant and child cardiopulmonary resuscitation (CPR) including Department-approved training in the use of an automatic external defibrillator within 3 months of beginning to work with children was not available for review. Repeat violation: Previously cited on 2/27/2024</p>	<p>• Staff A's CPR certificate is expired. • Staff signed up for class w/ Trempealeau fire department to obtain new card.</p>	03/31/25
<p>6 251.05(3)(cm) <b>Child Abuse &amp; Neglect - Biennial Training</b></p> <p>Description: There was not documentation of Staff A, B, C, or H having received training within one week after beginning work at the center and at least every 2 years thereafter, on child abuse and neglect laws, how to identify children who have been abused or neglected, and the procedure for ensuring that all known or suspected cases of child abuse or neglect are immediately reported to the proper authorities. Repeat violation: Previously cited on 2/27/2024, 11/13/2023</p>	<p>• Staff completed incorrect training • correct training completed by staff A, B, C &amp; H, on 03/03/2025 • paperwork in file</p>	03/03/25
<p>7 251.05(4)(a) <b>Staff Orientation - Develop, Implement, Document</b></p> <p>Description: Staff A and H were missing documentation of having received an orientation within their first week at the center.</p>	<p>• Staff completed orientation on 9/30/24 without Documentation • paperwork placed in file on 01/30/25</p>	01/30/25

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<p>8                      251.06(4)(d)  <b>Exits &amp; Passageways - Unobstructed, Minimum Width</b>                      Description: Three of the marked fire exits had deadbolts in place that were locked, which is considered an obstruction. In addition, furniture was blocking part of the marked exit in the Infant Room. Staff immediately removed the furniture. Exits and exit passageways shall have a minimum clear width of three feet and be unobstructed by furniture or other objects.</p>	<p>• Rocking chair was moved for cleaning, but not moved back.                      • Rocking chair will stay in current position, away from Door</p>	<p>01/30/25</p>	
<p>9                      251.06(9)(a)2.  <b>Kitchen Equipment &amp; Utensils - Safe &amp; Sanitary</b>                      Description: The refrigerator in the kitchen was in need of cleaning.</p>	<p>• Shelf wiped down &amp; sanitized                      • Will be wiped down weekly going forward</p>	<p>01/30/25</p>	
<p>10                      251.06(9)(d)2.a.  <b>Food Storage - Dry Food</b>                      Description: An open package of Crispy Oats cereal was not stored in bags with zip type closures or metal, glass or food grade plastic containers with tight-fitting covers and labeled, as required.</p>	<p>• Cereal was for staff consumption                      • Spot for staffs food was moved to the Lounge.</p>	<p>01/30/25</p>	

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11 251.07(6)(dm)4. <b>Medical Log - Reviewing Injury Records</b>  Description: There was not documentation of the director or the director's designee having reviewed records of injuries with staff every 6 months to ensure that all possible preventive measures are being taken. The last documented review was dated 04/24/2024.	<ul style="list-style-type: none"> <li>Director didn't document when doing med checks.</li> <li>Will document in log book going forward.</li> </ul>	01/30/25	
12 251.07(6)(f)1.a. <b>Medication Administration - Parent Authorization</b>  Description: An authorization to administer medication form was missing the date range of the authorization. In addition, the authorization stated to administer "as needed," which is prohibited.	<ul style="list-style-type: none"> <li>incorrect Authorization Form was present.</li> <li>Medication was sent home until correct form is obtained</li> </ul>	01/30/25	

NAME - Agency Worker  
April Callihan

Date Issued  
3/6/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee



Date Signed  
03/07/25