

Date Correction Plan Due 3/15/2022	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 920-785-7811
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Use of Form: This form is used by certification / licensing staff to identify statutory 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 20.065, 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 will 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) 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 correct each of the listed noncompliance(s). Identify expected completion date(s) for each item. Return the original to your certification / licensing specialist 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 Tree Of Wonder Family Child Care		Provider Number / Facility ID Number 4000589354 / 001 - 2003749		
Address - Facility (Street, City, State, Zip Code) 406 Haylett St Neenah WI 549563836		Telephone Number 920-238-5113	Date - Regulation Visit 3/1/2022	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	250.04(6)(a)4.b. Child Record - Physical Exam - Over 2, Under 5 Description: One child did not have a current (once every 2 years) physical on file - see checklist.	Send home Health Report and have Family bring back ASAP.	3/10/2022	
2	250.05(2)(d)1.a. Staff File - Physical Examination - Illness Description: The second provider did not have a physical on file - see checklist.	Send to the health provider myself	3/5/2022	3/10/2022

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3	250.06(3)(b) Emergency Plans - Practice Description: A fire drill was not practiced since October 2021	Delegate to second provider.	3/1/2022	3/1/2022
4	250.09(1)(c)1. Infant & Toddler - Information For Providing Individualized Care Description: 2 children did not have all pages of their intake forms filled out completely. Repeat violation: Previously cited on 10/12/2021	Return to parent & request back next day	3/4/2022	

NAME - Certification Worker / Licensing Specialist
Jill Kellner

Date Issued
3/1/2022

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed
3/2/2022