Date Correction Plan Due	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL
9/11/2026		920-785-7811

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		Provider Number / Facility ID Number	
St. Peter Stepping Stones Elc		7000592237 / 001 - 2007431	
Address - Facility (Street, City, State, Zip Code) 312 W Main St Weyauwega WI 549838942	**Telephone Number** 920-867-2200	**Date - Regulation Visit** 8/25/2026	

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.04(6)(a)8.b. **Child Record - Physical Exam - Over 2, Under 5**	Child's parent notified and Will bring form in by Wed. 9/2/26.	9/2/26	
2	251.05(2)(a)3.a. **Staff Record - Physical Examination** Description: On 8/25/26, staff member B did not have a health report completed within 30 days of hire (3/25/26).	Staff member has an appointment on Sept. 9, 2026 and will bring form in on Sept. 10, 2026	9/10/26	

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Rule/Statute Number **Noncompliance Statement**	**Correction Plan**	**Expected Completion Date**	**Verification Date**
3 251.09(1)(c) **Infant & Toddler - Documenting Changes In Development** Description: On 8/25/26, there was a missing intake form for a child in the infant room. Staff filled a new one right away for parents to update at pick up.	Intake form was sent home on 8/31/26 when Child arrived and mom ~~brou~~ brought it back at pick up.	8/31/26	

NAME - Agency Worker
Jessica Farah

Date Issued
8/28/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee
Lindsay Voelker

Date Signed
9/1/26