

Date Correction Plan Due 2/10/2025	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 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 Sycamore Tree A Christian Child Care Center Inc		Provider Number / Facility ID Number 6000559256 / 007 - 1016077		
Address - Facility (Street, City, State, Zip Code) 310 N Wilson Ave Hartford WI 53027		Telephone Number 262-673-0161	Date - Regulation Visit 1/6/2025	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.04(6)(a)6m. Child Record - Immunization History Description: Based upon review on January 6, 2025, Child #1 of the Child Record Checklist did not have documentation of immunization history on file. Repeat violation: Previously cited on 11/7/2023	Child's immunization records were requested & will be turned in Child files were reviewed by office staff. Notifications for upcoming file due dates were sent out to families.	02/21/25 02/10/25	
2	251.05(2)(a)4.a. Staff Record - Registry Certificate Description: Based upon review on January 6, 2025, Staff Member B's Registry certificate did not document that they met the qualifications for the lead teacher position they held.	Staff Member's documentation was submitted to show accurate WI Registry qualifications. Staff files were checked for completion and staff were directed to update WI Registry profiles	02/10/25 02/21/25	

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3	251.05(3)(cm) Child Abuse & Neglect - Biennial Training Description: Based upon review on January 6, 2025, Staff Member D of the Staff Record Checklist did not have current training on child abuse and neglect reporting requirements, as their training expired in October 2024.	Staff Member updated training to be current. All staff were reminded to update this training during inservice on February 17, 2025.	02/10/25 02/17/25	
4	251.05(3)(f)2.b. Child Care Teacher - High School Or Equivalent Description: Based upon review on January 6, 2025, Staff Member A and B of the Staff Record Checklist did not have proof of completion of high school or it's equivalent on file when they were used as lead teachers. Repeat violation: Previously cited on 2/12/2024	Staff Member turned in HS Diploma. Staff files were reviewed for accuracy.	02/10/25	
5	251.06(2)(a) Potential Source Of Harm On Premises Description: Based upon observation on January 6, 2025, there were cords hanging in an area where a child was napping in the Toucan Room.	CD Player was moved to alternate area so cords were no longer exposed. All staff were notified to examine rooms for hanging cords and objects that could fall and cause harm.	01/27/25 02/17/25	

NAME - Agency Worker
Jamie Brandt

Date Issued
1/27/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee



Date Signed
02/01/25