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| Date Correction Plan Due 4/22/2025 | 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)(l) 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 Mary's Tiny Treasures | | Provider Number / Facility ID Number 3000587233 / 001 - 2000567 | |
|--|---|---|---|
| Address - Facility (Street, City, State, Zip Code) 1501 9Th St Menasha WI 549522652 | | Telephone Number 920-540-8831 | Date - Regulation Visit 4/7/2025 |
| | Rule/Statute Number Noncompliance Statement | Correction Plan | Expected Completion Date Verification Date |
| 1 | 250.05(3)(e)2. Provider Training - Current Cpr Certificate Description: Based on record review on 4/7/25 according to the Staff Record Checklist Staff Member A had CPR on file however it failed to be an approved CPR course by the department. | Schedule class with CRR on April 14th 2025 | April 14th 2025 |
| 2 | 250.09(1)(c)4g. Infant & Toddler - Audio Monitoring Description: Based on observation the provider had an audio monitoring device however the provider failed to utilize the audio monitoring device when a child under the age of one was sleeping in another room with the door closed. | leave monitor on set up table until start of Day, As a reminder to turn on. | April 7th 2025 |

RECEIVED
NERO - GREEN BAY

APR 15 2025

DEPT. OF CHILDREN
& FAMILIES

| | | | |
|--|--|--|-------------------------------------|
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| 3 | 250.09(4)(b) Infant & Toddler - Diaper Changing Surface - Disinfection Description: Based on observation a child under the age of two was not changed on an easily cleanable surface that can be cleaned and disinfected after use. The child was changed directly on the carpeted floor and the floor was unable to be cleaned with soap and water and disinfected after use. | Keep pad under wet wipes to remind me. | 4-7-2025 |
| | | | Verification Date |

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|---|--------------------------|
| NAME - Agency Worker Cassandra Debauche | Date Issued 4/8/2025 |
| SIGNATURE - Certified Operator or Designee / Licensee or Designee <i>Mary Kord</i> | Date Signed 4-11-2025 |