DEPARTMENT OF CHILDREN AND FAMILIES
Division of Early Care and Education

STATE OF WISCONSIN

| Date Correction Plan Due<br>6/30/2026 | **NONCOMPLIANCE STATEMENT AND CORRECTION PLAN** | **TO FILE A COMPLAINT CALL**<br>608-422-6765 |
|---|---|---|

**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**<br>Jumping Monkeys Daycare Llc | | **Provider Number / Facility ID Number**<br>8000593648 / 002 - 2008636 |
|---|---|---|
| **Address - Facility (Street, City, State, Zip Code)**<br>601 Diagonal St Highland WI 535439500 | **Telephone Number**<br>608-391-0703 | **Date - Regulation Visit**<br>6/16/2026 |

| | Rule/Statute Number<br>Noncompliance Statement | Correction Plan | Expected Completion Date | Verification Date |
|---|---|---|---|---|
| 1 | 250.06(2)(a)<br>**Electrical Or Hot Surface Protection**<br><br>Description: An electrical outlet in the bathroom was not covered as required. | Places outlet plugs in the electrical outlet | Friday June 26, 2026 | |
| 2 | 250.06(2)(c)<br>**Access To Materials Potentially Harmful To Children**<br><br>Description: Potentially harmful materials were not inaccessible to children when bleach and other cleaning materials were stored in an unlocked bathroom cabinet. | Make sure the door is locked after every use. Put the key in a more accessible area. | Friday June 19, 2026 | |

| Name - Certified Operator / Licensed Center | | Provider Number / Facility ID Number | |
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| | Rule/Statute Number<br>Noncompliance Statement | Correction Plan | Expected Completion Date | Verification Date |
|---|---|---|---|---|
| 3 | 250.07(4)(c)<br>**Naps - Sleep Surface & Placement - Child 1 Year And Older**<br><br>Description: Each child was not provided with a clean sleeping surface as required when the sheets in two pack and plays were dirty and stained. | Replace sheets in the pack and plays | Friday June 19, 2026 | |
| 4 | 250.09(1)(c)2.<br>**Infant & Toddler - Crib & Playpen Mattresses**<br><br>Description: Two pack and plays did not have tight fitting mattresses as required when there was a gap of approximately 1 inch between the ends of each mattress and the side of the pack and play. | Buy new mattress for each pack and play | JULY 2026 | |

**NAME** - Agency Worker
Casey Allison

Date Issued
6/16/2026

**SIGNATURE** - Certified Operator or Designee / Licensee or Designee
Katie Eitsert

Date Signed
6/26/2026