

Date Correction Plan Due 2/19/2024	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 715-361-7700
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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 Terris Treehouse Llc		Provider Number / Facility ID Number 6000581956 / 001 - 1011376	
Address - Facility (Street, City, State, Zip Code) 136 Swenson Rd Woodruff WI 545689275		Telephone Number 715-356-4686	Date - Regulation Visit 2/2/2024
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date
1	251.05(2)(a)3.a. Staff Record - Physical Examination Description: Staff A and E do not have documentation of a health report that was completed 12 months prior to or within 30 days after hire date.	Both staff members claim their up to date staff E has worked here on + off for 15 years so we both interpreted the rule the we were in compliance. From here on out will create a reminder to be sure Health Report is up to date.	Feb. 23 2024
2	251.05(2)(a)8. Staff Record - Orientation Description: Staff B and J do not have documentation of completion of orientation.	On the treehouse created forms the checkboxes + dates are mark stating staff completed the DCF staff licensing requirements we thought this form was voluntary + adapted it to include our policy procedures we will with new staff just universally use this recommended form to be sure we are in compliance.	Immediately

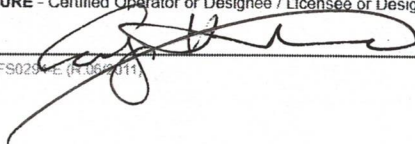
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3	251.055(2)(b) Staff-To-Child Ratios - Minimum Description: Per observation, there were 4 children under the age of 2 and 1 child over the age of 2 present in the infant/toddler classroom with one staff when two staff were required to meet ratio.	Staff were interviewed & documentation along with plan of actions to manage the internal awareness. Staff were reflective + with staff on premise relaying info they meant for only a minute to leave staff with small group. In the future staff will relay information using phone vs. person to person to avoid unnecessary gap in ratio requirements.	Immediately

NAME - Agency Worker
Kirsten Kronberger

Date Issued
2/5/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed



2/12/2024