

Date Correction Plan Due 4/16/2026	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 Innovative Playhouse		Provider Number / Facility ID Number 9000589919 / 001 - 2004776		
Address - Facility (Street, City, State, Zip Code) 220 Alvina St Green Bay WI 543032417		Telephone Number 920-965-1505	Date - Regulation Visit 3/24/2026	
	Rule/Statute Number Noncompliance Statement 1 251.05(2)(a)3.a. Staff Record - Physical Examination Description: Staff D and Staff H did not have documentation on file of a physical examination that was completed not more than 12 months prior to nor more than 30 days after the person was hired. Repeat violation: Previously cited on 10/21/2025, 10/18/2024, 6/4/2024	Correction Plan Staff H was corrected immediately Staff D was corrected by 6/30/26	Expected Completion Date 6/30/26	Verification Date
	2 251.05(4)(c)1. Continuing Education Requirement - Full Time Staff Description: Staff B, C, F, and G did not have documentation of at least 15 hours of continuing education for 2025. Repeat violation: Previously cited on 6/4/2024	Created a binder with a tracking sheet with each staffs name.	immediately	

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	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date
3	251.07(6)(dm)4. Medical Log - Reviewing Injury Records Description: Medical log books were not reviewed with staff every 6 months. The last review was July 2025. Repeat violation: Previously cited on 10/18/2024	Created a Chart that lists each rooms medical log book, that states when the last check was and when it will be due next	Immediately

NAME - Agency Worker
Erin Taylor

Date Issued
4/2/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Erin Taylor

Date Signed

4/30/26

SIGNATURE - Licensing Representative _____
Licensing Representative Title / Position _____
Date Signed _____

Conditions - Specify _____

Reason for Action - Specify _____

Licensing Specialist Action: Approve _____ Deny _____
Begin Date: _____ End Date: _____

FOR DEPARTMENT USE ONLY

SIGNATURE - Licensee _____

Name - Licensee (Type / Print) _____

BAFH CO III

Provide dates of proposed exception From: 4-2-24 To: _____
(mm/dd/yyyy) (mm/dd/yyyy)

(end date may be no later than your next license continuation date)

Licensee Title / Position (Type / Print) _____

Courier / Administrator

Date Signed (mm/dd/yyyy) _____

4-2-24

Existing Situation - Specify Outdoor infant swings are currently used in our area that are previously used for our climbing structure that we no longer have. All current climbers are under 4ft in height & we plan to remove the swings and use the gross motor area for the manufacturer's instructions. We are of gravel. We staff members next to them at all times.

Applicable Rule Number(s) for which you are requesting an exception _____

DCF 851.06(1)(b)5

Address - Facility (Street, City, State, Zip Code) _____
County in Which Facility is Located _____

Name - Facility _____
Facility ID Number _____

Use of form: This form is voluntary. However, when completed and posted next to the license certificate, this form meets the requirements of DCF 250.02(2), 251.02(2) and 252.02(4) of the Wisconsin Administrative Codes. If you fail to comply with the conditions of the exception, the exception will be rescinded and you will be issued a Noncompliance Statement and possibly an enforcement action. Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04(1)(m), Wis. Stats].
Instructions licensees: The licensee shall complete the top section, including signature and date, and submit the form to the licensing specialist for approval. If additional space is required, attach separate sheet(s). All approved exceptions must be posted next to the license. If the licensee wants any changes to the conditions of an existing approved exception, a new request must be submitted to the department for approval. Exceptions are not transferable. Exceptions must be resubmitted for approval at license continuation.
Instructions licensing specialist: The licensing specialist shall complete the "For Department Use Only" section, sign and date the form, and send a completed copy to the licensee. If additional space is required, attach separate sheet(s). If the request contains personally identifiable information for a specific child or staff member, the licensing specialist will also complete a CFS-297A, Exception Granted - Confidential form to be posted next to the license certificate in place of the document containing the confidential information.