

Date Correction Plan Due 7/31/2025	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 715-930-1148
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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 Little Feet And Helpful Hands Childcare	Provider Number / Facility ID Number 8000589298 / 001 -2003703
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Address - Facility (Street, City, State, Zip Code) 3900 Circle Dr Holmen WI 546369187	Telephone Number 608-519-9200	Date - Regulation Visit 6/25/2025
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	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.04(6)(b) Current, Accurate Daily Attendance Record Description: The attendance in the Dragonflies II room was not current and accurate on the day of the licensing visit when one child was not signed out on the attendance record.	Staff will be retrained on attendance procedures.	6/26/25	6/26/25
2	251.09(1)(b) Infant & Toddler - Location & Sharing Intake Information Description: Rule states that admission information for an infant or toddler shall be on file in the room or area to which the child is assigned. One child in the Dragonflies II room was missing an intake form in the room or area in which the child was being cared for on the day of the monitoring visit.	Staff will be trained on this rule. Copies of under 2 intakes will be made for each room a child would possibly be in.	6/26/25	6/26/25

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NAME - Agency Worker
Jennifer Stubbe

Jennifer Stubbe

SIGNATURE - Certified Operator of Designee / Licensee or Designee

Date Issued
7/17/2025

8/8/25

Date Signed