

Date Correction Plan Due 9/29/2025	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 920-785-7811
--	--	---

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.

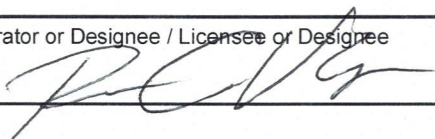
Name - Certified Operator / Licensed Center Cuddle Care Of Howard		Provider Number / Facility ID Number 3000591803 / 001 - 2007030		
Address - Facility (Street, City, State, Zip Code) 1765 Velp Ave Green Bay WI 543036445		Telephone Number 920-494-1156	Date - Regulation Visit 8/7/2025	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.06(11)(b)7. Outdoor Play Space - Enclosure Description: Outdoor enclosure/fence failed to be maintained at a height of 4 feet in all areas. Center mud kitchen pieces were placed against the fence providing a climbable surface and making the fence no longer 4 feet in height.	The mud kitchen tables were moved away from the fence. The tables are placed 4 ft. away from the fence so it will not be a climbable surface.	08/08/25	
2	251.06(11)(bm)3. Outdoor Play Equipment - Construction, Condition Description: Wooden playhouse failed to be in good condition- house contained screws sticking out accessible to children.	The screws and nails that were coming out were removed and replaced with new ones and nailed in so it is not accessible to children.	08/08/25	

Name - Certified Operator / Licensed Center Cuddle Care Of Howard		Provider Number / Facility ID Number 3000591803 / 001 - 2007030	
Address - Facility (Street, City, State, Zip Code) 1765 Velp Ave Green Bay WI 543036445		Telephone Number 920-494-1156	Date - Regulation Visit 8/7/2025
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date
3	251.07(6)(f)1.a. Medication Administration - Parent Authorization Description: A parent authorization was not complete- missing dates to administer. As needed authorizations are only allowed for chronic health conditions.	Parents were asked to fill in a date in the "from and to" section of the medication form.	08/08/25

NAME - Agency Worker
Ruth Sprangers, Amie Bodart

Date Issued
9/15/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee



Date Signed

09/16/2025