

Date Correction Plan Due 6/26/25	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 violations and to outline imposed plans of correction, if applicable. This form is used by certified operators / licensed centers to meet the requirements of DCF 302.065, DCF 302.042(3) and (3)(b), DCF 302.042(5) and (3)(c), DCF 302.417(1) and (2)(b). 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 biennial child care, send your copy of the noncompliance statement and correction plan to the licensee in accordance with Wis. Stat. 48.057. 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 Pine Oaks Kids		Provider Number / Facility ID Number 500583385 / 001 - 1013417	
Address - Facility (Street, City, State, Zip Code) 1501 Pine Oaks Ct - Stevens Point WI 544829103		Telephone Number 715-252-9500	Date - Regulation Visit 6/4/25
Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1. 280.042(1) Background Check Request Form - Addition to Household Description: The two household children, ages 13 and 15 years old, do not have DCF background checks on file.	Both children were added to the portal	6/4/25	
2. 280.048(6)(3) Child Record - Alternate Arrival / Release Agreement Description: Child 7 and 8 did not have an alternate arrival and release agreement on file.	In future, children will have arrival / release forms on file.	6/14/25	

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3. 280.048(6)(4)(a) Child Record - Immunization History Compliance Description: Child 8 did not have record of immunizations on file.	School ages will also have immunization records. I didn't think they needed them.	6/4/25	
4. 280.05(3)(h) Biennial Training - Child Abuse & Neglect Description: Record of the biennial child abuse and neglect training was not on file.	Training has been completed	7/6/25	