DEPARTMENT OF CHILDREN AND FAMILIES
Division of Early Care and Education

STATE OF WISCONSIN

Date Correction Plan Due	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL
6/5/2026		715-361-7700

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	Provider Number / Facility ID Number
Pine Oaks Kids	5000583985 / 001 - 1013417

Address - Facility (Street, City, State, Zip Code)	Telephone Number	Date - Regulation Visit
1501 Pine Oaks Ct Stevens Point WI 544829103	715-252-9560	5/21/2026

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	250.04(6)(a)4m. **Child Record - Immunization History Compliance** Description: Child 1 did not have record of immunizations on file. Repeat violation: Previously cited on 6/4/2025	The parents of the Child have already Provided me with the immunization record	Completed	
2	250.05(2) **Staff File - Maintenance & Availability** Description: Staff C did not have a file available for review at the center.	Provider has been able to take file from center to center. I will retrieve a file [redacted] to keep here.	June 30	
3	250.05(3)(e)2. **Provider Training - Current Cpr Certificate** Description: Staff A and B did not have record of current CPR on file.	Both staff are signed up to do CPR Class next-week	June 11, 2026	

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Rule/Statute Number **Noncompliance Statement**	**Correction Plan**	**Expected Completion Date**	**Verification Date**
4 250.05(4)(c)4. **Continuing Education - Documentation Of 12 Month Period** Description: Staff A and B did not have record of 15 hours of continuing education on file for 2025.	Continuing Ed will be completed and documented	forseeable future	
5 250.055(2)(a) **Maximum Number Of Children In Care Of The Center** Description: Upon arrival there were nine children in care of the center. One child was sent home a few moments after the visit began.	My nephew who lives next door walked over right beter licenser arrived. He will not be permitted to visit unless I have less kids	June 1 2026	
6 250.055(2)(b) **Maximum Number Of Children In Care Of The Provider** Description: Upon arrival there were nine children in care of one provider. There were two children under the age of 2 years old and seven children over the age of 2 years old in care.	my nephew who lives next door walked over right beforc licenser arrived He will not be permitted to visit unless I have less kids	June 1 2026	
7 250.06(6)(b)1.a. **Private Well - Annual Bacteria Test** Description: The annual water testing for bacteria was not conducted.	Water test will be conducted June 11th	June 15 2026	

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Rule/Statute Number **Noncompliance Statement**	**Correction Plan**	**Expected Completion Date**	**Verification Date**
8 250.06(6)(b)2.a. **Private Well - Annual Nitrate Test** Description: The annual water testing for nitrates was not conducted.	water test will be conducted June 11	June 15th	
9 250.07(6)(g)2. **Hand Washing Outdoors & On Field Trips** Description: The provider wiped a child's nose while playing outside and did not use a wipe containing soap or a sink with running water and soap to wash their hands.	I always wash my hands when wiping a childs nose / bottom. The childs face was washed from a messy snack, not a nose - no handwashing necessary	Protocol is Always followed	

NAME - Agency Worker
Heather Struck, Amanda Foley

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Issued
5/22/2026

Date Signed
6/2/26