Date Correction Plan Due 10/1/2025	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 608-422-6765

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
Bee Balm Learning Center Llc	4000588114 / 001 - 2001680

Address - Facility (Street, City, State, Zip Code)	Telephone Number	Date - Regulation Visit
1650 Norman Way Madison WI 537051239	608-233-8855	7/28/2025

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.05(3)(c) **Cardiopulmonary Resuscitation Training** Description: Staff E and G did not have documentation on file of current infant/child CPR training as required.	These staff are receiving the training on 10/31/25.	10/31/25	
2	251.055(2)(g)1. **Naptime - Staff-To-Child Ratio Supervision** Description: A classroom was very dark with naptime music/sound machine very loud, preventing sight or sound supervision of the sleeping group.	All teachers were reminded of proper nap time environments. Classrooms will be monitored by supervisors	8/4/25	

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	Rule/Statute Number **Noncompliance Statement**	**Correction Plan**	**Expected Completion Date**	**Verification Date**
3	251.07(5)(b)5. **Eating Surfaces - Cleaned, Sanitized** Description: A picnic table was not cleaned and sanitized when lunch and lunch dishes were left on a picnic table, uncovered on a warm day and accessible to bees and other wildlife.	Teachers were reminded of proper meal time procedures. Meal times will be monitored by supervisors.	8/4/25	

NAME - Agency Worker
Jenny Sweeney

Date Issued
9/17/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed
9/17/25