

Date Correction Plan Due 9/3/2024	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 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.

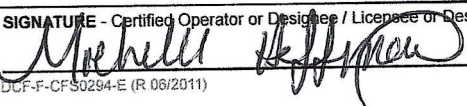
Instructions: The Noncompliance Statement below identifies the violation(s) of child care statute and / or administrative rule identified by the certification / licensing specialist. Complete the section labeled "Correction Plan" by indicating the steps that will be taken to address and correct each 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 June's Sweet Bees Childcare Llc	Provider Number / Facility ID Number 7000591317 / 001 - 2006488
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Address - Facility (Street, City, State, Zip Code) W6965 Stetson Ave Dorchester WI 544259311	Telephone Number 715-360-6007	Date - Regulation Visit 8/9/2024
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	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	<p>250.04(6)(a)4.a. Child Record - Physical Exam - Under 2</p> <p>Description: Child 3 did not have an updated health report on file.</p> <p>Repeat violation: Previously cited on 10/10/2023</p>	<p>Get updated report on file. Will be going in for 24mo. check up in November.</p>	<p>11/24</p>	
2	<p>250.04(6)(a)4m. Child Record - Immunization History Compliance</p> <p>Description: Child 4 did not have an immunization record on file.</p> <p>Repeat violation: Previously cited on 10/10/2023, 7/31/2023</p>	<p>Received immunization Record and child health report 8/20/24</p>	<p>8/20/24</p>	

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3	250.06(3)(b) Emergency Plans - Practice Description: There was no documentation of a fire drill or tornado drill being done in July 2024.	Make sure to do before we are closed for vacation!	8/24	

NAME - Agency Worker Bonnie Davis	Date Issued 8/20/2024
SIGNATURE - Certified Operator or Designer / Licensee or Designee 	Date Signed 8/20/24