

Date Correction Plan Due 7/8/2025	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		Provider Number / Facility ID Number		
Smiling Faces Daycare		3000591933 / 001 - 2007575		
Address - Facility (Street, City, State, Zip Code)		Telephone Number	Date - Regulation Visit	
7905 Franklin St Iron River WI 548473407		715-372-4188	6/19/2025	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.05(3)(b) Abusive Head Trauma Prevention Training Description: Staff H did not have abusive head trauma training on file.	Staff H took the Abusive Head Trauma when she completed Intro to The Child Care Profession. It is now on file	6-26-25	
2	251.05(3)(cm) Child Abuse & Neglect - Biennial Training Description: Staff A and Staff G did not have updated child abuse and neglect training on file.	Staff A + G updated this class + it is now on file	6-26-25	

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3 251.055(1)(b) Supervision - Teacher Per Group Of Children Description: Per observation, the classroom with 3-4 year olds did not have a qualified child care teacher supervising them.	All staff are enrolled in classes to become assistant & lead teachers. Classrooms will have a qualified lead teacher in them.	6-26-25	
4 251.055(2)(c) Mixed-Age Group - Staff-To-Child Ratio Description: Per observation, the classroom with 2-3 year olds were over ratio.	We will make sure to have the correct ratios in each room. I have updated the age sheets in each room and attached the staff-to-child ratio worksheet.	6-26-25	

Staff + Children will be signed in and out of their rooms as well and the daily attendance sheets will be up to date

NAME - Agency Worker
Bonnie Davis, Brooke Lampe

Date Issued
6/24/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Bruce

Date Signed

6-26-2025