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| <b>Date Correction Plan Due</b><br>11/14/2025 | <b>NONCOMPLIANCE STATEMENT AND CORRECTION PLAN</b> | <b>TO FILE A COMPLAINT CALL</b><br>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.

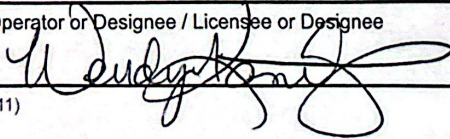
| <b>Name - Certified Operator / Licensed Center</b><br>Northwoods Child Development Center                  |  | <b>Provider Number / Facility ID Number</b><br>0000588770 / 001 - 2002733 |   |                              |
|--|--|---|---|------------------------------|
| <b>Address - Facility (Street, City, State, Zip Code)</b><br>1165 Us Highway 45 S Eagle River WI 545219378 |  | <b>Telephone Number</b><br>715-479-7529                                   | <b>Date - Regulation Visit</b><br>9/19/2025 |                              |
|  | <b>Rule/Statute Number<br/>Noncompliance Statement</b>   | <b>Correction Plan</b>  | <b>Expected<br/>Completion Date</b>         | <b>Verification<br/>Date</b> |
| 1  | 251.07(2)(e)2.<br><b>Prohibited Actions - Verbal</b><br><br>Description: Staff admitted to raising their voice at children when frustrated with behaviors.   | Staff will be getting additional training on guidance and transitions     | 11/19/25                                    |                              |
| 2  | 251.07(6)(i)1.<br><b>Washing Child's Hands &amp; Face</b><br><br>Description: Children in the Bears room did not wash their hands after diaper changes.<br><br>Repeat violation: Previously cited on 10/1/2024 | Staff has been reminded to wash the childrens hands at appropriate times. | 10/31/2025                                  |                              |

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| 3   | 251.09(1)(j)<br><b>Infant &amp; Toddler - Crib Mattresses &amp; Coverings</b><br><br>Description: Per observation, multiple cribs in the infant room did not have tight fitting sheets on the mattresses.   | Clips have been ordered to tighten sheets,                           | 10/31/2025                           |
| 4   | 251.09(4)(a)3.<br><b>Infant &amp; Toddler - Diaper Changing Surface Disinfection</b><br><br>Description: The diaper changing surface was not cleaned with soap and water or disinfected after use.<br><br>Repeat violation: Previously cited on 10/1/2024, 1/3/2024 | Staff will have a special meeting/training on the diapering process. | 11/19/2025                           |

NAME - Agency Worker  
Brooke Lampe, Dezarae Wierzba

Date Issued  
10/31/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee



Date Signed

10/31/2025