Date Correction Plan Due	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL
9/9/2026		920-785-7811

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	
Bridges Child Enrichment Center		9000559709 / 001 - 420071	
Address - Facility (Street, City, State, Zip Code) 313 S State St Appleton WI 549115929	**Telephone Number** 920-739-3840	**Date - Regulation Visit** 8/24/2026	

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.04(6)(a)8.a. **Child Record - Physical Exam - Under 2** Description: One child did not have a current (once every 6 months) physical in their file - see checklist.	The parent reports child had a physical in June. We have requestrd a copy of the report from the doctor again and will follow-up.	9/25/26	
2	251.04(7)(a) **Disclosure Of Personal Information** Description: The allergy list was posted on the refrigerator in the Maple room for all to see. It needs a cover put over the top of it.	A cover sheet has been added to the allergy list so names are no longer visible. All staff were reminded that food allergies and other health related information must be concealed for confidentiality.	8/24/26	

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3	251.06(11)(b)5. **Outdoor Play Space - Energy-Absorbing Surfaces** Description: Under the west side of the spiral slide there was only 7- 8 inches of wood chips Repeat violation: Previously cited on 9/9/2025	Wood chips were redistributed to the base of the slide where they had been kicked away. An additional 20 yards of wood chips have been ordered and → continued on back	8/25/26	
4	251.06(11)(b)7. **Outdoor Play Space - Enclosure** Description: There are two sections of fence that have a depth greater than 4 inches at the bottom of the fence at the back of the play yard facing Memorial Drive.	Our landlord has been notified and a plan made to add an additional barrier to the outside of the fence to close the gap at the bottom.	10/30/26	
5	251.06(2)(a) **Potential Source Of Harm On Premises** Description: The play yard has patches of thistles that need to be removed - path from gate to fence line.	Thistle patches were removed throughout the playspace.	8/28/26	
6	251.06(9)(d)1.c. **Food Storage - Cold Storage Thermometers** Description: There was a thermometer missing in the freezer of the maple room. Repeat violation: Previously cited on 2/24/2026	A thermometer was placed in the freezer compartment in addition to the one that was in the refrigerator. All staff were reminded to replace thermometers immediately when broken or not working properly.	8/25/26	

will be added to all fall zones, ensuring adequate coverage / depth.

10/17/06

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	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date

NAME - Agency Worker
Jill Kellner, Dao Xiong

Date Issued
8/26/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee
Nicole S. Zellmer

Date Signed
9/4/26