Date Correction Plan Due	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL
5/8/2025		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
Happy Hollow Learning Center		3000587563 / 001 - 2000884
Address - Facility (Street, City, State, Zip Code)	**Telephone Number**	**Date - Regulation Visit**
1396 Patton Dr Hartford WI 530279271	262-673-3005	4/16/2025

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.05(2)(a)6. **Staff Record - Days & Hours Worked** Description: Based upon observation on April 16, 2025, a child care worker did not sign themselves out of the infant room when they were no longer included in the staff-to-child ratio.	Retrained Staff A, Posted reminders for Staff A when they are leaving babies in the morning!	4/25/25	
2	251.07(6)(c)1. **Ill Child - Isolation** Description: Based upon observation on April 16, 2025, an ill child was not isolated from the rest of the class while they waited for their parent to arrive. CORRECTED DURING VISIT	retrained staff on 4/16/25 on how to maintain the classroom environment while keeping child isolated until help or parents arrive. Addressed with all staff at Staff meeting 4/16/25. will continue to monitor	4/16/25	

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NAME - Agency Worker
Jamie Brandt

Date Issued
4/24/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee
Alexis Johns

Date Signed
4/28/25