Date Correction Plan Due 12/22/2025	**NONCOMPLIANCE STATEMENT AND CORRECTION PLAN**	**TO FILE A COMPLAINT CALL**

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**
Natures Nook Preschool	9000593609 / 001 - 2008600

Address - Facility (Street, City, State, Zip Code)	**Telephone Number**	**Date - Regulation Visit**
360 Ams Ct Green Bay WI 543139701	920-455-0292	11/18/2025

	Rule/Statute Number Noncompliance Statement	**Correction Plan**	**Expected Completion Date**	**Verification Date**
1	251.05(2)(a)2. **Staff Record - Completed Background Check** Description: Based on observation and record review on 11/18/25 according to the Staff Record Checklist Staff Member B failed to have a complete background check on file provided by the department. The staff member failed to have pre-liminary eligibility on file prior to being on the premise and working with children.	Staff scheduled to update background check via finger print 12/9 5:30pm	12/9/25 5:30pm	
2	251.05(3)(b) **Abusive Head Trauma Prevention Training** Description: Based on record review on 11/18/25 and 11/21/25 according to the Staff Record Checklist Staff Member D failed to have abusive head trauma on file.	DD completed 12/5 Signed up on DCF registry	12/5/25	

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	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3	251.05(3)(cm) **Child Abuse & Neglect - Biennial Training** Description: Based on record review on 11/18/25 and 11/21/25 according to the Staff Record Checklist Staff Member A and C failed to have biennial child abuse and neglect training on file.	A → schedule through registry C → schedule through registry	12/8/25 by 5:00pm	
4	251.06(2)(b) **Electrical Or Hot Surface Protection** Description: Based on observation of the preschool classroom there were a number of outlets without outlet covers. The outlets are not tamper resistant, outlet covers are required.	purchased outlet covers and placed on all outlets, including those behind shelving	12/3/25	
5	251.06(4)(f) **Electrical Outlet Limit** Description: Based on observation of the preschool classroom on 11/18/25 an outlet is exceeding the electrical outlet limit. The outlet within the classroom is utilizing a 6 prong extender.	removed and switched to a shorter extension strip	12/4/25	
6	251.07(6)(i)1. **Washing Child's Hands & Face** Description: Based on observation of the preschool classroom children failed to wash hands before morning snack.	→reminded staff →posted signs	11/21/25 (after conversation with CD)	

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	Rule/Statute Number **Noncompliance Statement**	**Correction Plan**	**Expected Completion Date**	**Verification Date**
7	251.07(6)(i)2. **Adult Handwashing** Description: Based on observation of the preschool classroom staff members failed to wash hands before morning snack.	-Dreminded staff -Dposted signs	11/21/25 (after conversation with CD)	

NAME - Agency Worker
Cassandra Debauche

Date Issued
12/1/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed
12/1/25