

**INSTRUCTIONS FOR COMPLETING THE CORRECTION PLAN SECTION OF THE  
NONCOMPLIANCE STATEMENT AND CORRECTION PLAN (DCF-F-CFS294)**

I have attached the Noncompliance Statement and Correction Plan (DCF-F-CFS294) dated February 10, 2026 . Please complete this form as follows:

1. In the column titled "Correction Plan," indicate how you intend to correct each noncompliance listed on the form and outline the steps you will take to prevent future violation of the same rule. If you need more space than is provided on the form, attach additional pages and identify the item number to which the correction plan is related. Because completed and approved correction plans will be scanned and linked to the Regulated Child Care and YoungStar Public Search internet site, which shows each provider's violations, please note the following when writing your correction plan:
  - Do not include confidential information, including the names of children and staff.
  - Write in concise, plain English.
  - Be specific when describing what you have done or intend to do to correct each violation. Non-specific statements such as "It will be fixed", "Done", "Will do", "Don't agree" or "This won't happen again" do not provide the reader with any understanding of how the violation has been corrected or how you plan to prevent the violation from occurring again.
  - Be objective, factual and descriptive. The plan should not include derogatory comments, profanity or subjective observations, such as "The licensing specialist doesn't like me."
2. For each noncompliance, enter the date (month, day, year) by which you expect the correction plan to be completed.
3. Sign and date the form. Retain a copy for your records.
4. **Return the completed and signed form to the department by the due date that appears at the top left of the form via:**
  - **Email:** APRIL.CALLIHAN@WISCONSIN.GOV or
  - **Fax:** (715) 930-1139 or
  - **Mail:** DEPARTMENT OF CHILDREN AND FAMILIES  
BUREAU OF EARLY CARE REGULATION  
WESTERN REGION  
610 GIBSON STREET  
SUITE 2  
EAU CLAIRE, WI 547012626

If the correction plan and the completion dates are acceptable, the form will be linked to the Regulated Child Care and YoungStar Public Search internet site. If the correction plan or the expected completion dates are not acceptable, you will be contacted in writing or by telephone.

**You are required to post a copy of the Noncompliance Statement and Correction Plan (DCF-F-CFS294) in a conspicuous area near the license so that it is visible to parents. This copy must remain posted until all noncompliances have been verified as corrected and the next DCF-F-CFS294 or DCF-F-CFS785 (Compliance Statement) has been issued. Note: If applicable, do not post the Staff and Child Identification Key. The information on the key is confidential and is meant for your reference only.**

Please take a few minutes to complete the Department of Children and Families (DCF) customer satisfaction survey so that you can tell us about your experience. The responses we receive to the survey will be compiled and reviewed by DCF staff to help us improve our services to child care providers. The survey takes approximately 5 minutes to complete. It is voluntary and anonymous, and there is no penalty for not responding. DCF staff will not be able to tell whether or not you responded to the survey or know what responses you submitted. Please follow this link to provide your feedback: <https://www.surveymonkey.com/r/LicenseFeedback>. Or, if you don't have internet access, contact your licensing office and request a paper version of the survey and a prepaid reply envelope .

Contact me if you have any questions.

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|--|--|---|
| <b>Date Correction Plan Due</b><br>2/24/2026 | <b>NONCOMPLIANCE STATEMENT AND CORRECTION PLAN</b> | <b>TO FILE A COMPLAINT CALL</b><br>715-930-1148 |
|--|--|---|

**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>Little Star 2                               |  | <b>Provider Number / Facility ID Number</b><br>3000555933 / 002 - 2001076   |   |                              |
| <b>Address - Facility (Street, City, State, Zip Code)</b><br>2241 Hayden Ave Altoona WI 547201548 |  | <b>Telephone Number</b><br>715-514-2858   | <b>Date - Regulation Visit</b><br>1/26/2026 |                              |
|   | <b>Rule/Statute Number<br/>Noncompliance Statement</b>   | <b>Correction Plan</b>  | <b>Expected<br/>Completion Date</b>         | <b>Verification<br/>Date</b> |
| 1   | 251.05(4)(c)1.<br><b>Continuing Education Requirement - Full Time Staff</b><br><br>Description: Documentation that Staff B and D having obtained 15 hours of continuing education in 2025 could not be located for review.   | Staff D was reminded of the remaining continued hours that are owed and was given a deadline to complete those hours. Going forward, staff will continue to be reminded monthly of how many hours are due and will be removed from the schedule if those hours are not met by the deadline. | March 20, 2026                              |                              |
| 2   | 251.06(4)(d)<br><b>Exits &amp; Passageways - Unobstructed, Minimum Width</b><br><br>Description: The exit was obstructed by a bouncer seat. Exits and exit passageways shall have a minimum clear width of three feet and be unobstructed by furniture or other objects. | Staff were reminded that exits and pathways must have a 3 foot clearance. To help remind staff, we have placed signs on the doors which indicate to not block them.   | January 28, 2026                            |                              |

| Name - Certified Operator / Licensed Center        |   | Provider Number / Facility ID Number  |                             |                      |
|--|---|---|-----------------------------|----------------------|
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| 2241 Hayden Ave Altoona WI 547201548               |   | 715-514-2858  | 1/26/2026                   |                      |
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| 3  | <p>251.09(1)(e)<br/><b>Infant &amp; Toddler - Provider Training</b></p> <p>Description: Documentation of Staff B having obtained a minimum of 10 hours of training in infant and toddler care approved by the Department within six months after assuming beginning to care for children under 2 years of age was not available for review.</p>   | <p>After combing through transcripts and degrees and confirming with the Registry that staff B did not have the infant/toddler approved training or equivalent, staff B enrolled in the infant/toddler training and has begun training. Going forward, I will ensure that each Registry certificate has DCF-Infant/Toddler approved training listed.</p>        | <p>April 8, 2026</p>        |                      |
| 4  | <p>251.09(1)(L)<br/><b>Infant &amp; Toddler - Soft Materials In Cribs</b></p> <p>Description: A sleep sack was observed draped over the side railing of a crib in which a child under one year of age was sleeping. A child under one year of age may not sleep in a crib or playpen that contains soft or loose materials, such as sheepskins, pillows, blankets, flat sheets, bumper pads, bibs, pacifiers with attached soft objects, or stuffed animals. No blankets and other items may be hung on the sides of the crib or playpen.</p> | <p>During our staff meeting, all teachers were reminded of the rule indicating that blankets may not be hanging on the sides of the cribs, even when children are not in said cribs. To ensure this does not happen again, an organizer was purchased which has space for each child's personal belongings to reside within.</p>                                | <p>January 28, 2026</p>     |                      |
| 5  | <p>251.09(4)(b)<br/><b>Infant &amp; Toddler - Sinks In Self-Contained Area</b></p> <p>Description: Each self-contained classroom or area serving infants or toddlers who are diapered did not have a sink with hot and cold running water which is not used for food preparation or dishwashing within the room or area when the portable sink in the Infant Room was not working and staff had to leave the room for handwashing.</p>  | <p>I have contacted an individual who has since gotten the sink back in working order. The sink is used specifically for hand washing purposes only. Going forward, to prevent this from happening again, I will have the plumber come out immediately to fix the sink which will prevent the staff from having to leave the classroom to wash their hands.</p> | <p>March 9, 2026</p>        |                      |

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|---|--|---|---|
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|   | <b>Rule/Statute Number<br/>Noncompliance Statement</b> | <b>Correction Plan</b>  | <b>Expected<br/>Completion Date</b>         |
|   |  |   | <b>Verification<br/>Date</b>                |

**NAME - Agency Worker**  
April Callihan

Date Issued  
2/10/2026

**SIGNATURE - Certified Operator or Designee / Licensee or Designee**

*Krystina Schumacher*

Date Signed

March 9, 2026