DEPARTMENT OF CHILDREN AND FAMILIES
Division of Early Care and Education

STATE OF WISCONSIN

Date Correction Plan Due	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL
9/7/2026		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
Stepping Stones Learning Center	3000593843 / 001 - 2008807

Address - Facility (Street, City, State, Zip Code)	Telephone Number	Date - Regulation Visit
1368 Cold Spring Rd Neenah WI 549561108	920-729-6153	8/14/2026

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.04(6)(b) **Current, Accurate Daily Attendance Record** Description: Based on record review on 8/14/26, two children present in the school age room failed to be signed in.	management will check to make sure staff are signing in children daily as well as reminding staff to keep up to date attendance sheets * staff also have access to procare to have accurate numbers	8-14-2026	
2	251.05(2)(a)6. **Staff Record - Days & Hours Worked** Description: Based on record review for 8/7/26, 8/11/26, 8/12/26 and 8/13/26, child care staff failed to sign out of the school age room.	management will check to make sure staff are signing out and in on teacher sheets * Also reminded staff to keep current at all times	8-14-2026	

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Stepping Stones Learning Center		3000593843 / 001 - 2008807	
Address - Facility (Street, City, State, Zip Code) 1368 Cold Spring Rd Neenah WI 549561108	**Telephone Number** 920-729-6153	**Date - Regulation Visit** 8/14/2026	

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3	251.055(1)(a) **Supervision Of Children** Description: The center self-reported that on 8/13/26, a ten-year-old child was unsupervised by a child care worker when they were left in the center alone for about 1 to 2 minutes while the classroom and child care workers were outside. The child was found by another child care staff.	The staff will do name to face head count to ensure all children are accounted for upon transitioning on to next activity	8-14-2026	
4	251.055(1)(f) **Child Tracking Procedure** Description: During interviews on 8/14/26, child care staff reported on 8/13/26 they were aware they had 25 children in care but went outside with 24 children. The center failed to follow their child tracking procedure which states, "Each staff member is to know the number of children in their care at all times."	staff will do name to face recognition and not split classes to do transitions	8-14-2026	

NAME - Agency Worker
Dao Xiong

Date Issued
8/24/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee
Kayla Wood

Date Signed
9-11-2026