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

Name - Certified Operator / Licensed Center		**Provider Number / Facility ID Number**	
Sprouts Christian Childcare		5000568785 / 006 - 2008022	
Address - Facility (Street, City, State, Zip Code) 625 W Veterans St Tomah WI 546602901		**Telephone Number** 608-372-9377	**Date - Regulation Visit** 11/19/2025

	Rule/Statute Number Noncompliance Statement	**Correction Plan**	**Expected Completion Date**	**Verification Date**
1	251.07(6)(f)1.a. **Medication Administration - Parent Authorization** Description: The parent authorization form for prescription medication must include start and end dates for the length of the authorization that do not exceed the time specified on the label of the medication. One child's written authorization for an Epi-Pen was missing start and end dates for the length of the authorization.	Parent was informed of the missing expiration dates on the medication forms and forms were updated with correct expiration dates. Parent initialed medication forms verifying they were informed of the updates made.	11/19/2025	

Name - Certified Operator / Licensed Center		Provider Number / Facility ID Number	
Sprouts Christian Childcare		5000568785 / 006 - 2008022	
Address - Facility (Street, City, State, Zip Code) 625 W Veterans St Tomah WI 546602901		**Telephone Number** 608-372-9377	**Date - Regulation Visit** 11/19/2025

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
2	251.09(1)(b) **Infant & Toddler - Location & Sharing Intake Information** Description: Rule states that admission information for an infant or toddler shall be on file in the room or area to which the child is assigned. Almost all children under two were missing an intake form in the room or area in which the child was being cared for on the day of the monitoring visit. The center did pull the forms from the office for all the children under two and move the form to the room in which the child was being cared for in.	Intake under 2 forms were moved from the office filing cabinets to the assigned classrooms immediately upon being informed by the licensor that they were in the incorrect location. Teaching and office staff were made aware of the updated location of the forms and the corresponding rule.	11/19/2025	

NAME - Agency Worker
Jennifer Stubbe

Date Issued
11/28/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee
Quishna M Battista

Date Signed
12-4-2025