

Date Correction Plan Due 3/13/2026	<b>NONCOMPLIANCE STATEMENT AND CORRECTION PLAN</b>	TO FILE A COMPLAINT CALL 715-361-7700
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**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>		<b>Provider Number / Facility ID Number</b>		
Milk And Honey Day Care Llc		8000584498 / 001 - 1014046		
<b>Address - Facility (Street, City, State, Zip Code)</b>		<b>Telephone Number</b>	<b>Date - Regulation Visit</b>	
1401 Fur Farm Rd Washburn WI 548914554		715-373-0625	2/25/2026	
	<b>Rule/Statute Number Noncompliance Statement</b>	<b>Correction Plan</b>	<b>Expected Completion Date</b>	<b>Verification Date</b>
1	250.05(2)(c) <b>Staff File - Days, Hours Worked</b>  Description: There is no documentation of Staff A's actual hours worked when needed to meet the staff-to-child ratio.	write in on the signin sheet my hours	3/4/2026	
2	250.06(3)(b) <b>Emergency Plans - Practice</b>  Description: Per interview, fire and tornado drills have not been practiced since June 2025. There is no documentation of fire drills being practiced July 2025 - January 2026. There is no documentation of tornado drills being practiced July 2025-October 2025.  Repeat violation: Previously cited on 6/27/2024	print new form for easier documentation	3/11/2026	

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3	<p>250.06(4)(a)3 <b>Smoke Detectors - Testing</b></p> <p>Description: There is no documentation of the smoke detector being tested July 2025 - January 2026.</p>	<p>print new form for easier documentation</p>	<p>3/11/2026</p>	
4	<p>250.06(6)(b)1 a <b>Private Well - Annual Bacteria Test</b></p> <p>Description: There is no current bacteria test on file. The most recent test expired July 2025.</p> <p>Repeat violation: Previously cited on 6/27/2024</p>	<p>i need to find someone that can bring my water bottles to the county M-W 8-4</p>	<p>get bottles sent in by 3/31/2026 plus return time from the county</p>	
5	<p>250.06(6)(b)2 a <b>Private Well - Annual Nitrate Test</b></p> <p>Description: There is no current nitrate test on file. The most recent test expired July 2025.</p> <p>Repeat violation: Previously cited on 6/27/2024</p>	<p>i need to find someone that can bring my water bottles to the county M-W 8-4</p>	<p>get bottles sent in by 3/31/2026 plus return time from the county</p>	
6	<p>250.06(6)(b)3 a <b>Private Well - Lead Test</b></p> <p>Description: There is no lead test on file that was completed by a certified lab through the DNR.</p> <p>Repeat violation: Previously cited on 5/28/2025, 6/27/2024</p>	<p>i need to find someone that can bring my water bottles to the county M-W 8-4</p>	<p>get bottles sent in by 3/31/2026 plus return time from the county</p>	

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Correction Plan

Expected  
Completion Date

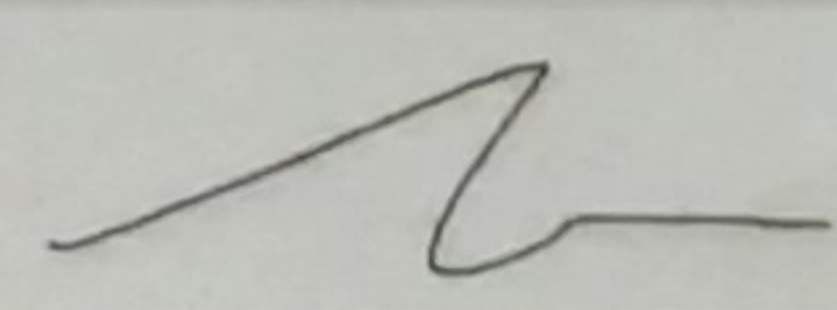
Verification  
Date

Rule/Statute Number  
Noncompliance Statement

NAME - Agency Worker  
Brooke Lampe

Date Issued  
2/27/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee



Date Signed  
3/4/2026