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
9/4/2026		608-422-6765

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
Sue Rowe's 1St Care For Children	9000575289 / 001 - 130497

Address - Facility (Street, City, State, Zip Code)	Telephone Number	Date - Regulation Visit
609 Wood Lawn Way Verona WI 53593	608-575-0026	8/4/2026

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	250.04(6)(a)4. **Child Record - Physical Exam** Description: Child 1 did not have documentation of a physical exam on file as required.	I've spoken with the parent, a copy of the Child Health Record will be completed and returned to me at their next well baby visit.	Oct 31, 2026	
2	250.04(6)(a)4m. **Child Record - Immunization History Compliance** Description: Child 1 and Child 2 did not have documentation of immunizations on file as required.	I have reminded the arents of the children who need Immunization records for our file. Both parents have printed off a copy of their child's Immunization Record from their mychart site.	Sept 1, 2026	

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	Rule/Statute Number **Noncompliance Statement**	**Correction Plan**	**Expected Completion Date**	**Verification Date**
3	250.06(11)(b)4. **Outdoor Play Space - Enclosure** Description: The enclosure to the outdoor play space had several gaps that were larger than 4 inches, including a gap of 9 inches between a gate and the ground. Repeat violation: Previously cited on 10/9/2024	I will be replacing some of the broken fence lattice this fall & will add the extra pieces to cover the gaps.	Nov 30, 2026	
4	250.06(2)(c) **Access To Materials Potentially Harmful To Children** Description: Cleaning wipes labelled "Keep out of Reach of Children" were on a shelf within the children's reach.	I will store disinfectant wipes on a high shelf in the laundry room out of the reach of children.	Aug 4, 2026	

NAME - Agency Worker
Casey Allison, Emily Ewoldt

Date Issued
8/4/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed
9/2/26