

Date Correction Plan Due 5/12/2025	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 920-785-7811
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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.

Name - Certified Operator / Licensed Center Rachel's Lambs		Provider Number / Facility ID Number 9000589629 / 001 - 2004204		
Address - Facility (Street, City, State, Zip Code) 7460 County Road O Hartford WI 530278504		Telephone Number 262-305-7593	Date - Regulation Visit 4/16/2025	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	250.04(6)(b) Current, Accurate Daily Attendance Record Description: Based upon observation on April 16, 2025, a current written record of a child's actual times of arrival and departure were not available for April 14, 15 and 16, 2025 .	I have made a reminder note on my daily attendance record to turn over to back page to complete times daily for my daughter.	5/1/2025	
2	250.05(2)(c) Staff File - Days, Hours Worked Description: Based upon observation on April 16, 2025, documentation of the actual hours worked by the provider on April 14, 15 and 16, 2025 were not available.	I have made a reminder note on my daily attendance record to turn over to back page to complete times that I worked daily for myself.	5/1/2025	

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3	250.06(6)(b)3.a. Private Well - Lead Test Description: Based upon review on April 16, 2025, there were no lead test results on file.	A lead test has been ordered and is being shipped. I will complete the test when it arrives and send results when test is completed.	5/30/2025	
4	250.09(3)(j) Infant & Toddler - Care During Feeding Description: Based upon observation on April 16, 2025, a child under the age of 2 years was placed in a high chair and secured in the chair with a rope, instead of the original manufacturer's safety strap.	A new safety strap has been ordered and is installed in the high chair.	5/1/2025	

NAME - Agency Worker
Jamie Brandt

Date Issued
4/28/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee
Rachel Patterson

Date Signed
5/9/2025