DEPARTMENT OF CHILDREN AND FAMILIES
Division of Early Care and Education

STATE OF WISCONSIN

| Date Correction Plan Due<br>8/24/2026 | **NONCOMPLIANCE STATEMENT AND CORRECTION PLAN** | TO FILE A COMPLAINT CALL<br>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** |
|---|---|---|
| Marion Day Care Inc | | 6000561176 / 001 - 420432 |
| **Address - Facility (Street, City, State, Zip Code)**<br>1001 N Main St Marion WI 549508703 | **Telephone Number**<br>715-754-5473 | **Date - Regulation Visit**<br>8/10/2026 |

| | Rule/Statute Number<br>Noncompliance Statement | Correction Plan | Expected Completion Date | Verification Date |
|---|---|---|---|---|
| 1 | 251.06(10)(a)<br>**Toilets & Wash Basins - Numbers**<br><br>Description: Based on observation on 8/10/26, the center had one working toilet for 22 children present. The second toilet was not in working order. | Marion School district Maintenance is actively working on fixing - waiting for a hose to be picked up | 8/13/26 | |
| 2 | 251.06(11)(b)7.<br>**Outdoor Play Space - Enclosure**<br><br>Description: Based on observation on 8/10/26, the permanent enclosure had an area where the fence disconnected from the post creating a gap greater than four inches. There was another area where the top of the fence did not connect to the post. | metal ties ordered to fix disconnected parts | 8/21/26 | |

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| 3 | 251.06(2)(gm)<br>**Premises - Well Drained, Clean, In Good Repair**<br><br>Description: Based on observation on 8/10/26, the toilet seat was deteriorating and not in good repair. | New toilet seat ordered | 8/21/26 | |
| 4 | 251.06(3)(b)4.<br>**Emergencies - Record Of Fire / Tornado Drills**<br><br>Description: Based on record review on 8/10/26, the center failed to complete a fire and tornado drill for July 2026. | Reminder alert set on staff phones | 8/13/26 | |

**NAME** - Agency Worker
Dao Xiong

**Date Issued**
8/10/2026

**SIGNATURE** - Certified Operator or Designee / Licensee or Designee
Sarah Rae

**Date Signed**
8-14-26