

Date Correction Plan Due 9/10/2025	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	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.

Name - Certified Operator / Licensed Center Sunflower Child Care		Provider Number / Facility ID Number 1000585891 / 001 - 2007427		
Address - Facility (Street, City, State, Zip Code) 1740 Chase St Wisc Rapids WI 544953948		Telephone Number 715-323-4488	Date - Regulation Visit 8/6/2025	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	250.055(1)(a) Supervision Of Children Description: A self-reported incident occurred on 08/06/25 when Child 1 was outside the residence for at least three minutes without supervision.	1. When the front main door is left open to allow natural lighting, the lock on the storm door will be secured at all times to serve as a preventative safety measure. 2. I purchased and installed self-closing hinges and self-latching gate hardware for the front porch gate to provide an additional layer of safety, ensuring children cannot exit the porch area unattended. 3. I will maintain hyper-vigilance during all transition times (arrivals, departures, and activity changes), as these are periods where children may attempt to move unexpectedly. I will remain attentive to the number, names, and whereabouts of all children in care at every moment.	8/11/2025	
2	250.055(1)(L) Procedure - Number, Names, Whereabouts Known At All Times Description: A self-reported incident occurred on 08/06/25 where a two-year-old child exited the residence and was found on the street by an individual not associated with the child care. When the individual questioned the provider about whether she was missing a child, the provider stated she was not missing any children. Shortly thereafter, a name-to-face count was conducted and the center identified that the child did, in fact, belong in the center.	1. I will conduct frequent name-to-face head counts throughout the day, especially during transition times, outdoor play, and any time children move between areas. 2. I will reinforce the habit of immediately verifying the presence of each child upon any inquiry or moment of uncertainty, rather than relying on assumption.	8/11/2025	

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NAME - Agency Worker
Heather Struck

Date Issued
8/27/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed
9/10/2025

