

|   |  |   |
|---|--|---|
| <b>Date Correction Plan Due</b><br>4/1/2026 | <b>NONCOMPLIANCE STATEMENT AND CORRECTION PLAN</b> | <b>TO FILE A COMPLAINT CALL</b><br>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.

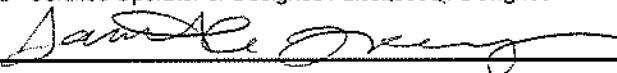
**Instructions:** The Noncompliance Statement below identifies the violation(s) of child care statute and / or administrative rule identified by the certification / licensing specialist. Complete the section labeled "Correction Plan" by indicating the steps that will be taken to address and correct each 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.

|  |  |  |  |                              |
|--|--|--|--|------------------------------|
| <b>Name - Certified Operator / Licensed Center</b><br>Child's First Inc                                |  | <b>Provider Number / Facility ID Number</b><br>3000589053 / 001 - 2003226  |  |                              |
| <b>Address - Facility (Street, City, State, Zip Code)</b><br>612 N Randall Ave Janesville WI 535451958 |  | <b>Telephone Number</b><br>608-752-0743  | <b>Date - Regulation Visit</b><br>3/3/2026 |                              |
|  | <b>Rule/Statute Number<br/>Noncompliance Statement</b>   | <b>Correction Plan</b>   | <b>Expected<br/>Completion Date</b>        | <b>Verification<br/>Date</b> |
| 1  | 251.055(1)(a)<br><b>Supervision Of Children</b><br><br>Description: A child was not supervised within sight and sound when he was left alone in the bathroom without supervision during a transition time. | Staff were immediately retrained on active supervision and transition procedures, including direct verbal confirmation and visual hand-off when transferring children between staff. Staff will ensure all children are accounted for at all times, including during bathroom use. Director will monitor and provide ongoing supervision checks. | 3/3/2026                                   |                              |
| 2  | 251.07(5)(b)5.<br><b>Eating Surfaces - Cleaned, Sanitized</b><br><br>Description: Lunch tables in a classroom were visibly soiled and had not been washed and sanitized after lunch as required.           | Staff were retrained at staff meeting on proper cleaning and sanitizing procedures after meals. Tables will be washed, rinsed, and sanitized immediately following use. Director will complete routine checks to ensure compliance.  | 3/18/2026                                  |                              |

**NAME - Agency Worker**  
Jenny Sweeney

**Date Issued**  
3/18/2026

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



**Date Signed**  
3/18/2026