

<b>Date Correction Plan Due</b> 10/28/2025	<b>NONCOMPLIANCE STATEMENT AND CORRECTION PLAN</b>	<b>TO FILE A COMPLAINT CALL</b> 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.

<b>Name - Certified Operator / Licensed Center</b>		<b>Provider Number / Facility ID Number</b>	
Little Sprouts Learning Garden		1000589041 / 001 - 2003214	
<b>Address - Facility (Street, City, State, Zip Code)</b>		<b>Telephone Number</b>	<b>Date - Regulation Visit</b>
10564 School Ave Auburndale Elementary School Auburndale WI 544129041		715-451-1512	9/16/2025
	<b>Rule/Statute Number Noncompliance Statement</b>	<b>Correction Plan</b>	<b>Expected Completion Date</b>
1	251.04(4)(a)2.b. <b>Parent Notification - Medical Evaluation Needed</b>  Description: A self-reported incident occurred on 9/12/25 when a child fell off a climber on the playground and sustained a broken clavicle. The child needed medical attention, but parents were not notified of the incident until pick-up	All staff have been reminded and are fully aware that if a child experiences any type of fall or injury, parents are to be notified immediately, via Lilio, regardless of whether the child appears to be using the affected body part normally, or seems to be ok at the time. Staff understand that notification is required even when there are no visible signs of injury or discomfort. A review of this policy has been completed with all team members, and future communication to parents following any incident will occur as soon as possible after the event.	Monday, October 27, 2025

**NAME - Agency Worker**  
Heather Struck

**Date Issued**  
10/13/2025

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

**Date Signed**

10/22/2025