

NONCOMPLIANCE STATEMENT AND CORRECTION PLAN

TO FILE A COMPLAINT CALL
608-422-6765

Date Correction Plan Due
3/17/2025

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)(k) 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

Little Family Day Care

70005886237 / 002 - 1016072

Address - Facility (Street, City, State, Zip Code)
102 Lothe Rd Marshall WI 53559

Telephone Number
608-655-3653

Date - Regulation Visit
2/27/2025

Rule/Statute Number	Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.05(4)(a) Staff Orientation - Develop, Implement, Document Description: Orientation for staff B was not file. Repeat violation: Previously cited on 3/5/2024	<i>To get all orientations up to date.</i>	<i>3-5-25</i>	
2	251.07(6)(dm)4. Medical Log - Reviewing Injury Records Description: Medication log was not reviewed within the last 6 months in the infant classroom. Repeat violation: Previously cited on 3/1/2023	<i>Will review immediately</i>	<i>3-5-25</i>	

Name - Certified Operator / Licensed Center

Provider Number / Facility ID Number

Little Family Day Care

7000586237 / 002 - 1018072

Address - Facility (Street, City, State, Zip Code)

Telephone Number

Date - Regulation Visit

102 Lothe Rd Marshall WI 53559

608-655-3653

2/27/2025

Rule/Statute Number	Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3	251.09(3)(a)2 Infant & Toddler - Food & Formula Brought From Home Description: Bottled milk stored in the fridge was not dated or named.	To label bottled milk & to inform parent of this also	3-4-2025	

NAME - Agency Worker
Michelle Garcia

Date Issued
3/3/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed

Michelle Garcia

3-4-2025