

<b>Name - Certified Operator / Licensed Center</b> Fairy Godmommy Playland Cc		<b>Provider Number / Facility ID Number</b> 2000590522 / 001 - 2005582		
<b>Address - Facility (Street, City, State, Zip Code)</b> 2912 N 45Th St Milwaukee WI 532101715		<b>Telephone Number</b> 414-699-5339	<b>Date - Regulation Visit</b> 4/21/2025	
	<b>Rule/Statute Number Noncompliance Statement</b>	<b>Correction Plan</b>	<b>Expected Completion Date</b>	<b>Verification Date</b>
2	250.04(6)(a)1m.f. <b>Child Record - Health History - Medical Condition Symptoms</b>  Description: Child 2 has a documented medical condition, however there is no information in the child record about triggers that may cause a problem, steps a provider should follow, when to call a parent regarding symptoms, when the condition requires emergency medical care, and identification of all providers who have received specialized training or instructions to help treat symptoms.	Spoke with mom at pick up on 4/21/25 mom confirmed that doctor did not diagnose child with medical condition that was stated. Mom diagnosed on her own. Child was out a few days the following week. Spoke with mom on 5/5 when child returned, child has a schedule doctor appointment for health check up on 5/8/25. Forms will be updated at appointment.	5/9/25	
3	250.06(3)(b) <b>Emergency Plans - Practice</b>  Description: A fire drill was practiced, but not documented for January-March 2025.  Repeat violation: Previously cited on 3/11/2024	Completed later on that evening on 4/21/25	4/21/25	
4	250.06(4)(a)3. <b>Smoke Detectors - Testing</b>  Description: Smoke detector testing is not documented for January-March 2025.  Repeat violation: Previously cited on 3/11/2024	Completed later on that evening on 4/21/25	4/21/25	

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5	250.07(3)(a)4. <b>Play Equipment - Condition</b>  Description: A child sized table in the living room has a large tear in the vinyl exposing foam on the table, making the surface not easily cleanable.	Table was thrown out new table arrived next day after visit.	4/22/25

**NAME** - Agency Worker  
Daniel Noel, Kristin Lange

Date Issued  
4/21/2025

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

Date Signed 5/5/25