

Date Correction Plan Due 10/3/2024 **NONCOMPLIANCE STATEMENT AND CORRECTION PLAN** **TO FILE A COMPLAINT CALL** 262-446-7800

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)(i) 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 School 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 notice of the sanction and / or penalty and your appeal rights.

Name - Certified Operator / Licensed Center Perfect Children **Provider Number / Facility ID Number** 5000590655 / 001 - 2005778

Address - Facility (Street, City, State, Zip Code) 5279 N 57Th St Milwaukee WI 532183223 **Telephone Number** 414-242-4782 **Date - Regulation Visit** 9/16/2024

Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1 250.04(6)(a)4.a. Child Record - Physical Exam - Under 2 Description: Child #3 did not have documentation of a follow-up examination within the last 6 months.	Notify mom child needs form signed by doc.	09/20/24	
2 250.06(2)(m) Premises - Condition & Repair Description: The side of the garage located in the outdoor play area had missing pieces of siding.	Fix garage by placing duck tape missing siding.	09/20/24	

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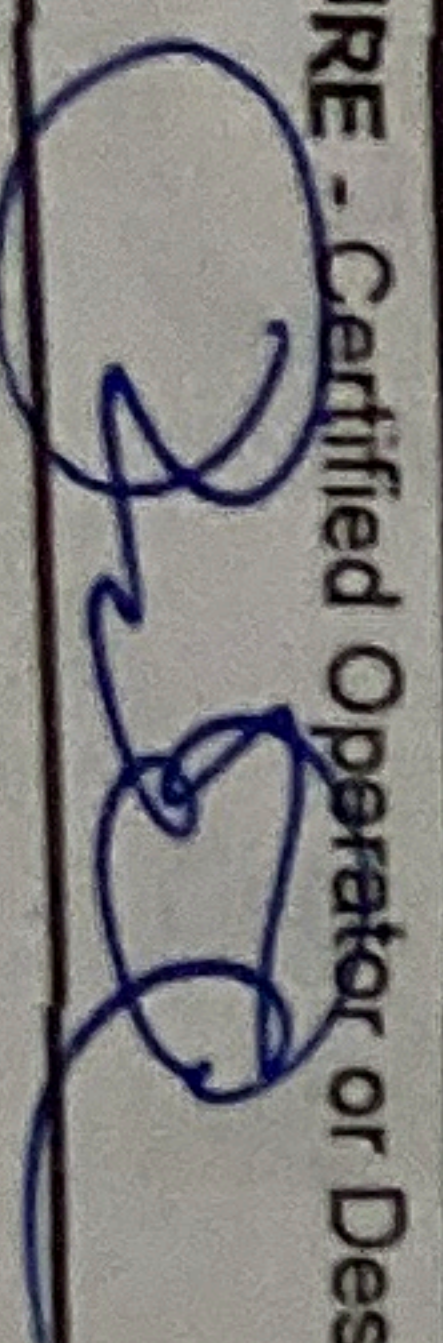
Date - Regulation Visit
9/16/2024

Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3 250.08(4)(c)1. Driver Record - Obtain & Review Description: A copy of an annual driving record for each driver was not completed and on file.	Obtain driver record	9/28/24	

NAME - Agency Worker
Sarah Stormont, Rhonda Brueggemann

Date Issued
9/19/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee



Date Signed
9/20/24