

Date Correction Plan Due
8/11/2025

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)(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	
Truly Blessed Childcare		1000591241 / 001 - 2006415	
Address - Facility (Street, City, State, Zip Code)		Telephone Number	Date - Regulation Visit
5334 N 66Th St Milwaukee WI 532183014		414-312-8470	7/28/2025
Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1 250.04(2)(i)1.a. Monitoring Results Posted Description: The noncompliance statement from the visit on 5/16/25 was not posted. *This was corrected during the visit on 7/28/25.	Provider will have it done and turned in in a timely manner.	8-11-25	
2 250.04(6)(a)4.d. Child Record - Heath Exam Report Description: The health report on file for Child #2, under the age of two has not been updated within the last six months. The health report on file was dated 12/3/24.	Provider will keep update on all files at the daycare	8-11-25	

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3

250.05(2)(c)

Staff File - Days, Hours Worked

Description: Staff B was not signed in at the time of the licensing visit.
*This was corrected during the visit.

Provider will make
sure all staff
are signed in and
out on a daily

8-11-25

NAME - Agency Worker
Katrina Tarantino

SIGNATURE - Certified Operator or Designee / Licensee of Designee

DCF-F-0FS0294-E (R 06/2011)

Date Issued

7/28/2025

Date Signed

8-11-25