

<b>Date Correction Plan Due</b>	<b>NONCOMPLIANCE STATEMENT AND CORRECTION PLAN</b>	<b>TO FILE A COMPLAINT CALL</b>
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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>		
Mps - Carver CLC		2000563892 / 128 - 2100144		
<b>Address - Facility (Street, City, State, Zip Code)</b>		<b>Telephone Number</b>	<b>Date - Regulation Visit</b>	
1900 N 1St St Milwaukee, WI 53212-3705		414-267-5781	11/18/2025	
	<b>Rule/Statute Number Noncompliance Statement</b>	<b>Correction Plan</b>	<b>Expected Completion Date</b>	<b>Verification Date</b>
1	251.04(6)(a)6. <b>Child Record - Health History</b> Description: Health history and emergency care plan information on file for Child #1 is incomplete. Child #1 is identified as having asthma however questions #2-#8 on the health history form have been left blank.	All student emergency care plans and health history forms were reviewed. The files are now complete. The CLC site coordinator will regularly review the files to ensure the records are up to date.	3/2/2026	
2	251.05(3)(c) <b>Cardiopulmonary Resuscitation Training</b> Description: Per a review of a sampling of staff files all staff do not have on file documentation of a current certificate of completion of Child CPR with AED training. It is reported that staff completed the training on November 8, 2025 however certificates are not on file for	Staff files were reviewed for AED/CPR certificates. The files are now complete. The CLC Site Coordinator will regularly review the files to ensure the records are up to date.	3/2/2026	

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3	Rule/Statute Number Noncompliance Statement 251.06(3)(b)2. <b>Emergencies - Practice Written Plans</b> Description: The required monthly fire and tornado drills were not practiced for the months of September and October 2025.	Correction Plan Tornado drills and fire drills were posted and documented. They have now been moved to the display case instead of the parent center board.	Expected Completion Date 3/2/2026	Verification Date


NAME - Certification Worker / Licensing Specialist

Maureen Slatten

Date Issued

11/25/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee



Date Signed

4/8/2026