

Date Correction Plan Due 12/13/2024	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 262-446-7800
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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.

Name - Certified Operator / Licensed Center Matc West Campus Children's Center		Provider Number / Facility ID Number 9000557359 / 004 - 225818		
Address - Facility (Street, City, State, Zip Code) 865 S 72Nd St West Allis WI 532143114		Telephone Number 414-456-5419	Date - Regulation Visit 11/22/2024	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.055(1)(f) Child Tracking Procedure Description: During the visit, tracking was not accurate in the infant and toddler rooms when a staff person in the infant room handed the toddler teacher an infant. The infant was with the toddler room teacher for approximately 2-3 minutes.	<i>Teachers were reminded that when a child is moved (even for a brief moment) that sign-in/ attendance sheets must be accurate & show what room the child is in. Staff were reminded that "kitchens" in the suite are not part of the classroom for child tracking.</i>	11/22/24	
2	251.09(2)(bm) Infant & Toddler - Sleep Position Description: During the visit, a sleeping infant was observed to be left in an infant rocking seat for approximately 8 minutes, a second sleeping infant was left in an infant rocking seat for approximately 5 minutes.	<i>Teachers were reminded of the immediate need to move any infant who falls asleep elsewhere to their crib for safety reasons. A PT teacher in the infant room (covering FT infant caregiver's lunch break) was delayed in transferring 2 infants who just fell asleep in rocker seats. When she began feeding the 3rd baby a bottle, all were awake. The feeding caused the momentary delay in moving the now sleeping babies to crib (5 & 8 minutes).</i>	11/22/24	

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NAME - Agency Worker
Cindy Matuszak

Date Issued
11/27/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed

11/29/24