Date Correction Plan Due	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL
11/18/2026		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
New Berlin Preschool Llc	2000589602 / 001 - 2004105

Address - Facility (Street, City, State, Zip Code)	Telephone Number	Date - Regulation Visit
5000 S Sunnyslope Rd New Berlin WI 53151	414-630-2063	11/3/2026

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.04(4)(a)2.c. **Parent Notification - Injury, Consumption Of Allergen, Incorrect Medication** Description: Based on a review of the medical log book, parents are not consistently notified immediately after a child sustains a head injury.	All teaching staff have been informed to notify parents/guardians immediately if a child sustains an injury from the neck up.	11/04/2026	
2	251.05(2)(a)6. **Staff Record - Days & Hours Worked** Description: Staff are not documenting actual hours worked and in what classroom when used to meet staff-to-child ratio.	All teaching staff will sign in and out on the daily attendance sheet to document hours worked for each day.	11/04/2026	

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3	251.055(1)(f) **Child Tracking Procedure** Description: During the monitoring visit, the center did not accurately implement a tracking procedure during a fire drill. The center relied on a full enrollment list rather than a list of children that were physically present.	The daily attendance book will be carried by a teacher when students are not in the classroom for fire drills, tornado drills or on the playground.	11/04/2026	
4	251.07(6)(dm)4. **Medical Log - Reviewing Injury Records** Description: The medical log book was not reviewed within the last 6 months; the most recent review date occurred on 1/6/26.	The medical log was reviewed on 11/03/2026. It will be reviewed in May, September and January of the school year.	11/03/2026	
5	251.07(6)(f)1.a. **Medication Administration - Parent Authorization** Description: A medication authorization form observed on the premise does not include a begin and end date.	The medical form was updated to include a beginning and ending date.	11/03/2026	

NAME - Agency Worker
Kristin Lange, Sara Cooney

Date Issued
11/4/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Kristín Jónsson Prusak / Francie Holmberg

Date Signed
11/04/2026