

Date Correction Plan Due 10/7/2024	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 262-646-7900
---------------------------------------	--	--

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)(f) and (3)(f), DCF 251.04(2)(L) and (3)(f), DCF 252.41(1)(L) and (2)(f). 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 Greater Minds Childcare		Provider Number / Facility ID Number 5000590075 / 001 - 2004973		
Address - Facility (Street, City, State, Zip Code) 3500 N 32ND ST Milwaukee WI 53216		Telephone Number 414-517-2626	Date - Regulation Visit 9/12/2024	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	250.04(6)(a)1.g Child Record - Enrollment Information - Authorized Pickup Description: Child #4 did not have information for persons authorized to call for/receive child if the parent/guardian cannot be reached. Repeat violation: Previously cited on 9/28/2023	Added missing info.	9/12/24	
2	250.04(6)(a)1m. Child Record - Health History Description: The health history and emergency care plan form was not dated by the parent/guardian for Child #1.	Added missing info.	9/12/24	

DCF Form 8000-1 (8/2023)

Page 2 of 2

Name - Certified Operator / Licensed Center Greater Minds Childcare		Provider Number / Facility ID Number 5000590075 / 001 - 2004973		
Address - Facility (Street, City, State, Zip Code) 3500 N 32ND ST Milwaukee WI 53216		Telephone Number 414-517-2626	Date - Regulation Visit 9/12/2024	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3	200.05(3)(fm) Biennial Training - Child Abuse & Neglect Description: Staff B does not have documentation of an updated biennial child abuse and neglect training on file.	Complete w/in 30 days	11/1/24	
4	200.05(4)(c)1. Continuing Education - Requirement & Training Topics Description: Staff A and B do not have documentation of 10 hours of continuing education for the prior year.	Complete by Nov 1st	11/1/24	
5	200.06(2)(m) Premises - Condition & Repair Description: The outdoor play space had wooden boards that were lying down on the ground that were accessible to children.	Removed	9/15/24	

NAME - Agency Worker
Laura Taylor, Charlene Langsdorf

Date Issued
9/23/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed

Laura Taylor

10/6/24

Page 2 of 2