

Date Correction Plan Due 4/21/2025	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL
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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 Helping Hands Child Care		Provider Number / Facility ID Number 8000590148 / 001		
Address - Facility (Street, City, State, Zip Code) 4739 N 45Th St Milwaukee WI 532185208		Telephone Number 414-439-4928	Date - Regulation Visit 3/27/2025	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	202.08(10)(a) A Child Care Provider Shall Ensure That Each Child Shall Be Served One Meal Or Snack At Least Once Every 3 Hours. Each Meal And Snack Shall Meet The U.S. Department Of Agriculture Child And Adult Care Food Program Minimum Meal Requirements. Description: The operator was not serving meals that met the USDA meals guideline requirement.	all meals are update and meet USDA guidelines	04/22.2025	

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2	<p>202.08(12)(f)1-4 Prior To A Child's First Day Of Attendance For Any Child In Care, Obtaining Information On A Form Prescribed By The Department With Enrollment And Health History Information, Including All Of The Following:</p> <ol style="list-style-type: none"> 1. The Parents' Home And Work Phone Numbers. 2. Health History, Including Information Relating To A Child's Special Health Care Needs And Emergency Care Plan. 3. The Parents' Signed Consent For Emergency Medical Care. 4. A Name And Number To Call If The Child Requires Emergency Medical Care. <p>Description: Child #1 was missing emergency contact information on the enrollment and health history information form.</p>	child one now has a update emergency contact person	04/22/25	
3	<p>202.08(4m)(a)1. An Operator Shall Have A Written Plan For Taking Appropriate Action In The Event Of An Emergency Including A Fire; A Tornado; A Flood; Extreme Outdoor Heat Or Cold; A Loss Of Building Service, Including No Heat, Water, Electricity Or Telephone; Human-Caused Events, Such As Threats To The Building Or Its Occupants; Allergic Reactions; Lost Or Missing Children; Vehicle Accidents; A Provider's Family Situation, Such As Medical Emergency Or Illness; Or Other Circumstances Requiring Immediate Attention.</p> <p>Description: The operator stated and showed the certifier the tornado shelter/drill was practice in the basement however, the written emergency plan stated the tornado shelter/practice was done in the bathroom.</p>	the emergency plan is update and the drill always been in the basement but it update now on paperwork	04/22/25	

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NAME - Agency Worker
Lou Thao

Date Issued
4/7/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Ariel Carter

Date Signed
04-22-25