

Date Correction Plan Due 1/28/2026	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 1/13/2026	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	202.08(11)(b) Each Child Shall Have A Personal Clean Sheet Or Blanket Or Both And Pillowcase If A Pillow Is Used. Description: At the time of the visit a child was sleeping in the operator's bed rather than on their own cot with their own clean sheet and blanket.	At the time of the visit provider was sick and was my own relative so the child was in the bed sleep with supervision but that will not happen again.	01-19-2026	

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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: The Enrollment and Health History forms were incomplete for children #2, #5, and #7.</p>	provider paperwork's is update with the right information on paperwork	01-19-2026	
3	<p>202.08(2)(c) The Indoor And Outdoor Areas Of The Home Shall Be Free Of Hazards. Potentially Dangerous Items And Materials Harmful To Children, Including Power Tools, Flammable Or Combustible Materials, Insecticides, Matches, Drugs And Any Articles Labeled Hazardous To Children Shall Be In Properly Marked Containers And Stored In Areas Inaccessible To Children.</p> <p>Description: Uncovered outlets were accessible in the kitchen.</p>	kitchen outlet are now covered	01-19-26	

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4	202.08(4)(a)1. For Each Child Under 2 Years Of Age, A Report Of A Physical Examination Conducted Not More Than 6 Months Prior To Nor Later Than 3 Months After The Child Is Admitted, And A Follow-Up Health Examination At Least Once Every 6 Months Thereafter. Description: There was no updated health report on file for children #1 and #2.	child one and 2 will have update reports	01-19-26	
5	202.08(4)(e) The Certified Child Care Operator Shall Have On File For Each Child In Care A Record Of The Child's Immunization History To Document Compliance With S. 252.04, Stats., And Ch. Dhs 144. Description: An immunization form or waiver form signed by a physician was not on file for children #5-#7.	provider was not aware about the shot had to be sign by a doctor as long as a parent sign it but they will have shots records provider let mom, know and mom has the wavier form so it will be fix	01-19=26	

NAME - Agency Worker
Deborah Kersting

Date Issued
1/14/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee
Ariel Carter

Date Signed
01-19-2026