

Date Correction Plan Due 8/6/2025	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)(i) 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 notice of the sanction and / or penalty and your appeal rights.

Name - Certified Operator / Licensed Center Royals Developmental Milestones Ctr		Provider Number / Facility ID Number 7000590457 / 001 - 2005879		
Address - Facility (Street, City, State, Zip Code) 10418 W Caldwell Ave Milwaukee WI 532253262		Telephone Number 414-349-5741	Date - Regulation Visit 6/24/2025	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	250.05(3)(e)2. Provider Training - Current Cpr Certificate Description: Staff A did not have a current certificate for CPR on file.	Update Current Cpr Certification	07/12/25	
2	250.05(3)(fm) Biennial Training - Child Abuse & Neglect Description: Staff A did not have a current certificate for child abuse and neglect training.	Update Current Biennial Training CAN	06/24/25	

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3	250.06(2)(e) Potential Source Of Harm On Premises Description: There was a floorboard cover separating the kitchen and hallway missing with exposed nails. The provider replaced the cover during the visit to correct the issue.	Contact landlord to permanently fix the floorboard.	06/24/25
4	250.08(4)(b) Driver Training - Documentation Description: Staff A did not have a current annual training on file.	Update current annual training for transportation safety.	07/24/25

NAME - Agency Worker
Anthony Totoraitis

Date Issued
7/23/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Chander

Date Signed

07/24/2025