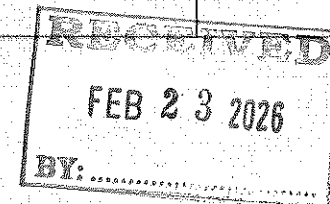


Date Correction Plan Due 2/24/2026	<b>NONCOMPLIANCE STATEMENT AND CORRECTION PLAN</b>	TO FILE A COMPLAINT CALL
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**Use of Form:** This form is used by certification / licensing staff to identify statute and / or administrative rule violation(s) and to 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. 48.557. 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 Bright Futures		Provider Number / Facility ID Number 6000500706 / 001	
Address - Facility (Street, City, State, Zip Code) 1732 Connolly Ave Racine WI 534053868		Telephone Number 262-902-6906	Date - Regulation Visit 2/10/2026
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date Verification Date
1	<p>202.06(11)(d) A Safe Crib Or Playpen With A Tight-Fitting Mattress With A Tight-Fitting Covering Shall Be Available For Each Child Under One Year Of Age To Use For Napping Or Sleeping. The Crib Or Playpen May Not Contain Soft Or Loose Materials, Such As Sheepskins, Pillows, Blankets, Flat Sheets, Bumper Pads, Bibs, Pacifiers With Attached Soft Objects Or Stuffed Animals. A Certified Family Child Care Operator Shall Ensure That Each Crib Used By A Child In Care Satisfies The Applicable Federal Safety Standards In 16 Cfr Part 1219 Or 1220.</p> <p>Description: Provider has stuffed animals in the playpen.</p>	I removed all items from crib and playpen	2/30/26



Name - Certified Operator / Licensed Center Bright Futures		Provider Number / Facility ID Number 6000590706 / 001		
Address - Facility (Street, City, State, Zip Code) 1732 Connolly Ave Racine WI 534053868		Telephone Number 262-902-0908	Date - Regulation Visit 2/10/2026	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
2	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.  Description: Provider had plastic bags in reach of children in the playroom.	Removed all items from plastic bags in all play areas	2/20/26	
3	202.08(4)(a) Health Form: A Certified Child Care Operator Shall Have A Current Report Of A Physical Examination On File For Each Child, Including The Operator's Own Children, Who Are Not Enrolled In A Public Or Private School.  Description: Children 7 & 9 missing updated health reports.	Child 7 no longer attending daycare Child 9 I will submit requested information	2/20/26	
4	202.08(1)(a) 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. 282.04, Stats., And Ch. Dhs 144.  Description: Child 9 missing immunization records.	will make sure I have updated information for child and all daycare kids	2/20/26	

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BY: .....

Name - Certified Operator / Licensed Center Bright Futures		Provider Number / Facility ID Number 6000590796 / 001	
Address - Facility (Street, City, State, Zip Code) 1732 Connolly Ave Racine WI 534053868		Telephone Number 262-902-0908	Date - Regulation Visit 2/10/2026
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date Verification Date

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BY: .....

NAME - Agency Worker  
Semaja McClain, Yovanka Vazquez

Date Issued  
2/10/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee  
*[Signature]*

Date Signed  
2/20/26