DEPARTMENT OF CHILDREN AND FAMILIES
Division of Early Care and Education

STATE OF WISCONSIN

Date Correction Plan Due	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL
11/2/2026		262-446-7800

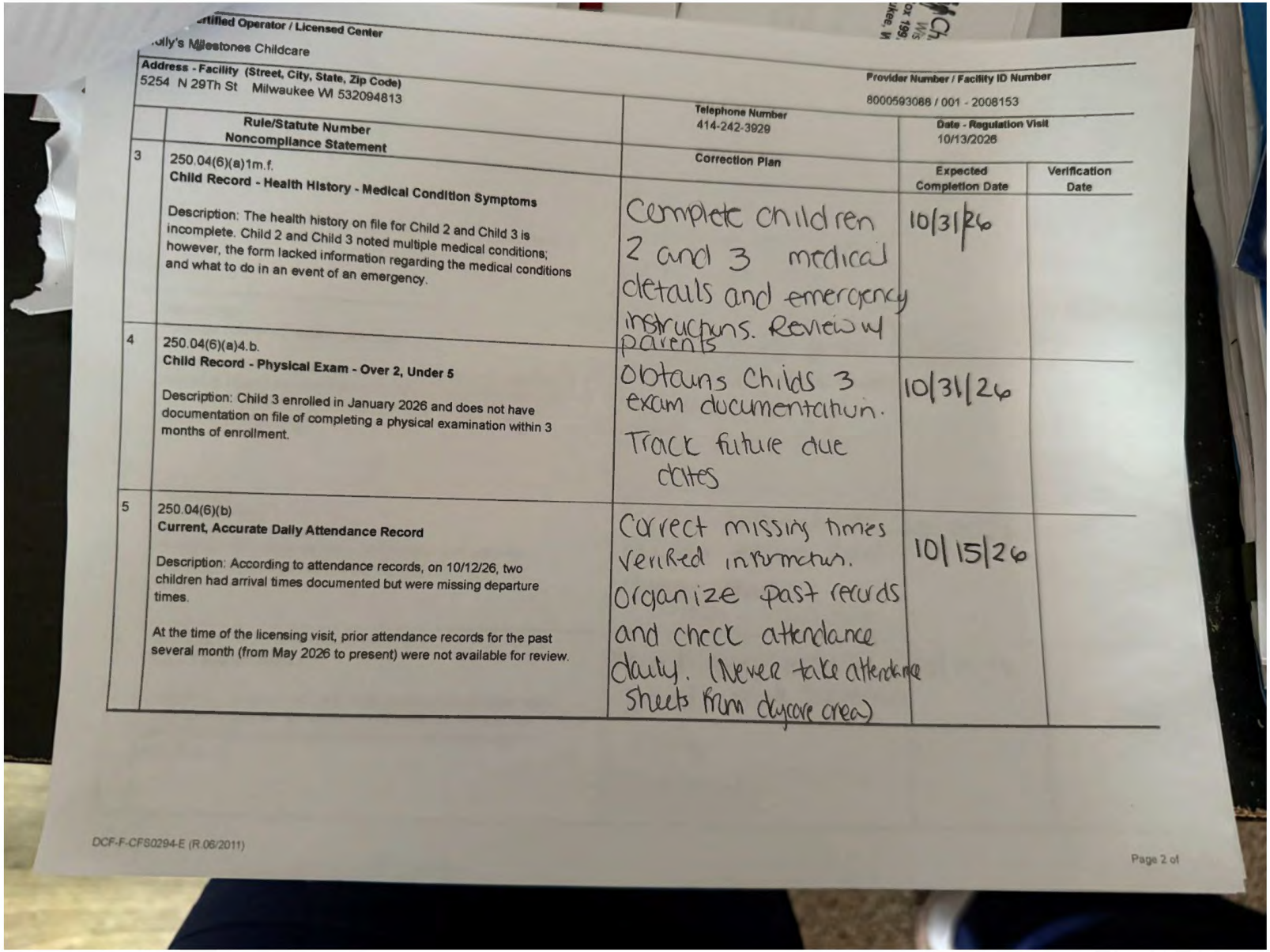
Use of Form: This form is used by certification / licensing staff to identify statute and / or administrative rule violation(s) and to outline imposed plans of correction, if applicabl This form is used by certified operators / licensed centers to meet the requirements of DCF 202.065, DCF 250.04(2)(i) and (3)(d), DCF 251.04(2)(L) and (3)(f), DCF 252.41(1)(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 Schoo 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 specialis 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 completic 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 th 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 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	Provider Number / Facility ID Number
Molly's Milestones Childcare	8000593088 / 001 - 2008153

Address - Facility (Street, City, State, Zip Code)	Telephone Number	Date - Regulation Visit
5254 N 29Th St Milwaukee WI 532094813	414-242-3929	10/13/2026

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	250.04(6)(a)1.e. **Child Record - Enrollment Information - Other Emergency Contact** Description: The enrollment form for Child 3 lacked emergency contact information when a parent cannot be reached.	Get childs 3 missing contact information. Check files monthly	10/31/26	
2	250.04(6)(a)1m. **Child Record - Health History** Description: There is no health history information and emergency care plan on file for Child 1. Repeat violation: Previously cited on 9/2/2025	Get childs 1 health history and emergency plan. Use a paper work checklist	12/1/26	



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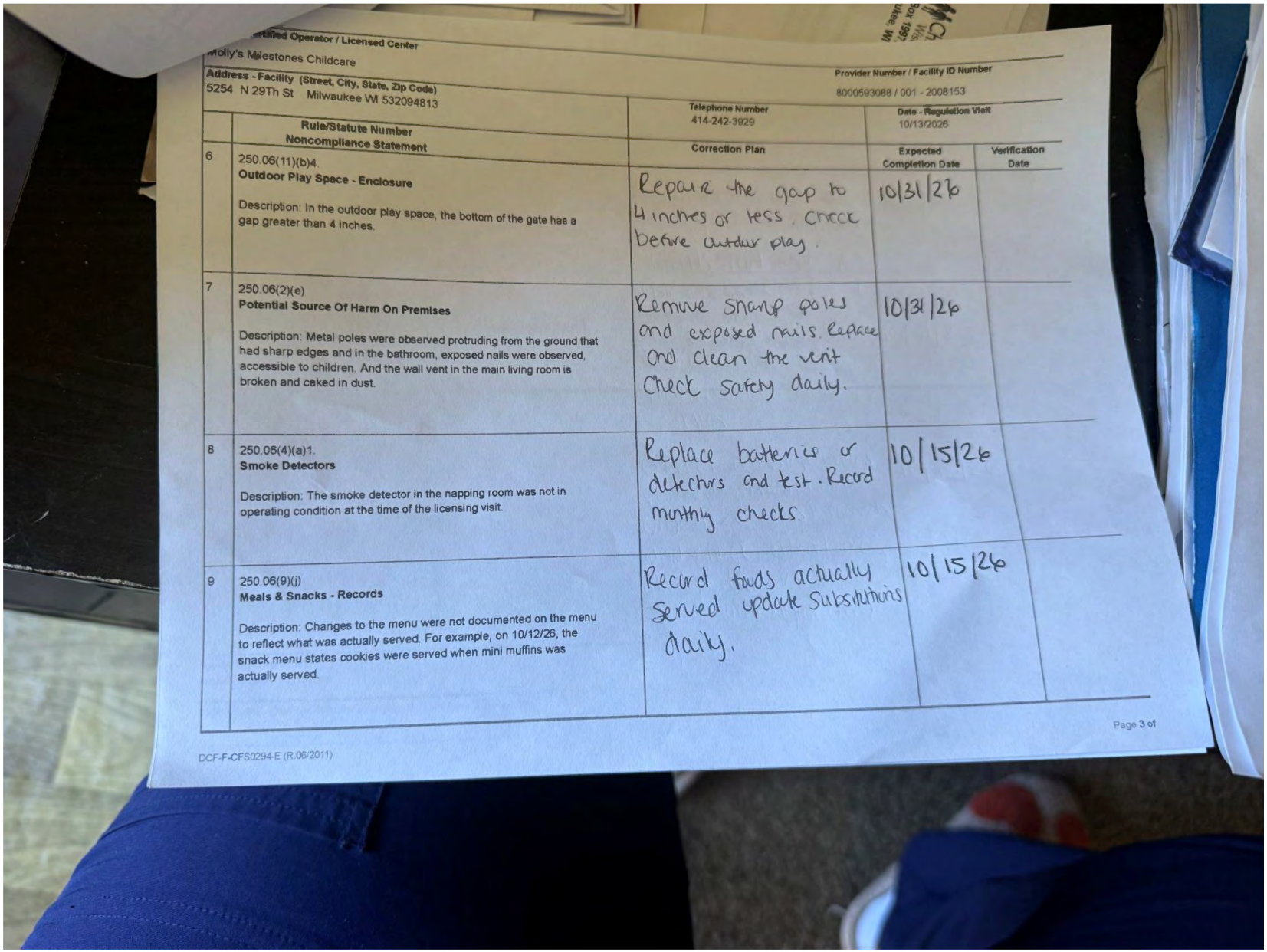
3	250.04(6)(a)1m.f. **Child Record - Health History - Medical Condition Symptoms** Description: The health history on file for Child 2 and Child 3 is incomplete. Child 2 and Child 3 noted multiple medical conditions; however, the form lacked information regarding the medical conditions and what to do in an event of an emergency.	Complete children 2 and 3 medical details and emergency instructions. Review w/ parents	10/31/26	
4	250.04(6)(a)4.b. **Child Record - Physical Exam - Over 2, Under 5** Description: Child 3 enrolled in January 2026 and does not have documentation on file of completing a physical examination within 3 months of enrollment.	Obtains Childs 3 exam documentation. Track future due dates	10/31/26	
5	250.04(6)(b) **Current, Accurate Daily Attendance Record** Description: According to attendance records, on 10/12/26, two children had arrival times documented but were missing departure times. At the time of the licensing visit, prior attendance records for the past several month (from May 2026 to present) were not available for review.	Correct missing times verified information. Organize past records and check attendance daily. (Never take attendance sheets from daycare area)	10/15/26	



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6	250.06(11)(b)4. **Outdoor Play Space - Enclosure** Description: In the outdoor play space, the bottom of the gate has a gap greater than 4 inches.	Repair the gap to 4 inches or less. Check before outdor play.	10/31/26	
7	250.06(2)(e) **Potential Source Of Harm On Premises** Description: Metal poles were observed protruding from the ground that had sharp edges and in the bathroom, exposed nails were observed, accessible to children. And the wall vent in the main living room is broken and caked in dust.	Remove sharp poles and exposed nails. Replace and clean the vent Check safety daily.	10/31/26	
8	250.06(4)(a)1. **Smoke Detectors** Description: The smoke detector in the napping room was not in operating condition at the time of the licensing visit.	Replace batteries or detectors and test. Record monthly checks.	10/15/26	
9	250.06(9)(j) **Meals & Snacks - Records** Description: Changes to the menu were not documented on the menu to reflect what was actually served. For example, on 10/12/26, the snack menu states cookies were served when mini muffins was actually served.	Record foods actually served update substitutions daily.	10/15/26	

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10	250.07(6)(b)2. **Medical Log Book - Pages And Entries** Description: Ripped pages were observed in the medical log book.	Preserve the old book Use a new bound, numbered book. never remove pages	10/15/26	
11	250.09(1)(c)4g. **Infant & Toddler - Audio Monitoring** Description: The audio monitoring device in the napping room did not work properly because the batteries were dead.	Replace batteries / charge and test check before every nap	10/31/26	

NAME - Agency Worker
Kristin Lange, Sara Cooney

Date Issued
10/19/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed
10/20/2026