Name - Certified Operator / Licensed Center		Provider Number / Facility ID Number	
Next Door Head Start - Ext 2612		6000563746 / 007 - 2001852	
Address - Facility (Street, City, State, Zip Code) 5310 W Capitol Dr Milwaukee WI 532162263	**Telephone Number** 414-562-2929	**Date - Regulation Visit** 6/17/2026	

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3	251.07(6)(dm)3.c **Medical Log - Medication Administration** Description: The medical log book in Room G125 had a medication entry that didn□t have a child□s name.	See attachment for corrective action plan for the complete response.	7/13/2026	
4	251.09(1)(c) **Infant & Toddler - Documenting Changes In Development** Description: Several Under Two Intake forms were not updated every three months in Room G127. Repeat violation: Previously cited on 5/6/2025, 7/17/2024	See attachment for corrective action plan for the complete response.	7/13/2026	
5	251.09(4)(a)3. **Infant & Toddler - Diaper Changing Surface Disinfection** Description: There were rips in the changing pad in Room 6125 and therefore can□t be appropriately disinfected.	See attachment for corrective action plan for the complete response.	713/2026	

NAME - Agency Worker
Rhonda Brueggemann, Katrina Tarantino

Date Issued
6/29/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed
7/13/26

Date Correction Plan Due 7/13/2026	**NONCOMPLIANCE STATEMENT AND CORRECTION PLAN**	TO FILE A COMPLAINT CALL 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 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.

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	Rule/Statute Number Noncompliance Statement	**Correction Plan**	**Expected Completion Date**	**Verification Date**
1	251.04(6)(a)6. **Child Record - Health History** Description: The health history for Child 6 was incomplete. The care procedures for the child needs to be completed.	See attachment for corrective action plan for the complete response.	7/13/2026	
2	251.055(1)(f) **Child Tracking Procedure** Description: There was no tracking procedure being used with the children walking in the hallway with the teachers.	See attachment for corrective action plan for the complete response.	7/13/2026	

1. Corrective Action Plan – Child Health History

Upon notification of the licensing finding, the child's Health History form was immediately reviewed with the parent/guardian to obtain the missing care procedure information. The Health History was updated in its entirety and placed in the child's file to ensure it was complete and accurate.

To prevent future occurrences, all Child Health History forms will be reviewed for completeness at the time of enrollment and final checks done by enrollment team and Family Advocate Supervisor. Family advocates staff, have been retrained on DCF licensing requirements regarding Child Health Histories and the importance of verifying that all sections, including care procedures, are completed before filing.

2. Corrective Action Plan – Child Tracking Procedures

Upon notification of the licensing finding, staff immediately retrieved the classroom tracking sheet and were reminded that child tracking procedures must be maintained at all times during transitions, including when moving throughout the center. Staff were instructed that the classroom tracking form must accompany the group during every transition and may not be left behind.

The root cause of the non-compliance was staff error in failing to follow the established child tracking procedure during a routine transition. Although the tracking system was in place, the required documentation did not accompany the group as required.

To prevent future occurrences, all teaching staff received retraining on the program's child tracking procedures, emphasizing that attendance and tracking documentation must remain with the group during all transitions inside and outside the building. Education Managers will reinforce expectations through classroom observations, transition monitoring, and ongoing coaching.

3. Corrective Action Plan – Medication Log Documentation

Upon notification of the licensing finding, the teacher immediately corrected the medication log by documenting the child's name on the medication administration entry. The medication record was reviewed to ensure the documentation was complete and accurate.

The root cause of the non-compliance was a documentation oversight during medication administration, resulting in an incomplete medication log entry.

To prevent future occurrences, an email was sent to all teaching staff reminding them of the DCF requirements for accurate and complete medication documentation. The communication emphasized that all required fields, including the child's name, date, time, medication, dosage, and required signatures, must be completed at the time medication is administered. Medication administration documentation will also be reviewed with all staff during the August pre-service

training to reinforce expectations and ensure consistent compliance with DCF licensing requirements.

Education Managers will continue to monitor medication logs during classroom visits and provide immediate coaching when documentation errors are identified. The Site Director will periodically review medication documentation practices to ensure ongoing compliance with DCF licensing requirements.

4. Corrective Action Plan – Infant & Toddler Intake Documentation

Upon notification of the licensing finding, the Intake under Two forms were immediately reviewed with the teaching staff. Staff documented the dates corresponding to the previously recorded developmental updates to ensure the documentation accurately reflected when each observation was completed.

The root cause of the non-compliance was a documentation oversight. Although developmental changes were being observed and recorded, staff did not consistently document the date of each developmental update as required.

To prevent future occurrences, an email was sent to all Infant and Toddler teaching staff reminding them that each developmental update recorded on the Intake under Two form must include the date the observation was documented. This documentation requirement will also be reviewed during August pre-service training to reinforce DCF licensing expectations and proper recordkeeping practices.

Education Managers will review Intake under Two forms during routine classroom monitoring to verify that developmental updates include the required dates.

5. Corrective Action Plan – Infant & Toddler Diaper Changing Surface

Upon notification of the licensing finding, the damaged diaper changing pad in Room G125 was removed from use. A program-wide inspection of all diaper changing pads in the Early Head Start classrooms was conducted to identify any additional surfaces that were torn or no longer able to be properly cleaned and disinfected. New diaper changing pads were ordered to replace the damaged pads in all Early Head Start classrooms, ensuring that all diaper changing surfaces are intact, nonabsorbent, and capable of being effectively cleaned and disinfected. New pads are expected for delivery on July 30, 2026.

To prevent future occurrences, Education Managers and teaching staff will inspect diaper changing surfaces during routine classroom health and safety checks to ensure they remain in good condition. Any diaper changing pad showing signs of tears, cracks, or damage will be immediately removed from use and reported for replacement. This expectation will also be reviewed with staff during August pre-service training as part of health, safety, and sanitation procedures.