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
8/11/2026		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 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		Provider Number / Facility ID Number
Johnnie's Just For Kids 1		9000563009 / 002 - 2002669
Address - Facility (Street, City, State, Zip Code)	**Telephone Number**	**Date - Regulation Visit**
3528 W Highland Blvd Milwaukee WI 532082810	414-510-6217	7/22/2026

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	250.05(4)(c)1. **Continuing Education - Requirement & Training Topics** Description: Staff A and B do not have documentation of 15 hours of continuing education for the prior year.	Staff A and B will have 15 hours of continuing education class for 2025 By 8-30-26	8-30-26	
2	250.06(9)(d) **Food Storage, Temperatures** Description: The thermometer in the kitchen freezer registered 6 degrees (must be maintained at 0 degrees or lower).	Thermometer was moved to Front of freezer and degrees registered at 0 degrees	7/23/26	

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	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3	250.06(9)(e) **Leftover Food** Description: Several containers of leftover food items were observed in the kitchen refrigerator that were not labeled/dated as to when prepared.	Left over food was discharged and will be label dated	7-23-26	
4	250.09(3)(b) **Infant & Toddler - Food & Formula Brought From Home** Description: Open containers of infant formula and cereal were not labeled/dated as to when opened.	Daycare do not have any infant enrolled, Formula and food belonged to a family member and was given back to family.	7-23-26	
5	250.09(3)(f) **Infant & Toddler - Leftover Milk Or Formula** Description: An infant bottle containing formula was not rinsed after use.	Infant bottle also belong to family member and was returned, But also have noted in future that all food and Bottle will be labeled or discharged	7-23-26	

NAME - Agency Worker
Laura Taylor, Joel Marquez

Date Issued
7/28/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee
Johnnie M. Ashley

Date Signed
7-30-26