

<b>Date Correction Plan Due</b> 3/2/2026	<b>NONCOMPLIANCE STATEMENT AND CORRECTION PLAN</b>	<b>TO FILE A COMPLAINT CALL</b> 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)(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.

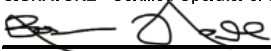
<b>Name - Certified Operator / Licensed Center</b> Tendercare Christian Childcare Center		<b>Provider Number / Facility ID Number</b> 0000591380 / 001 - 2006550		
<b>Address - Facility (Street, City, State, Zip Code)</b> 5229 W Capitol Dr Milwaukee WI 532162353		<b>Telephone Number</b> 414-447-8396	<b>Date - Regulation Visit</b> 1/16/2026	
	<b>Rule/Statute Number Noncompliance Statement</b>	<b>Correction Plan</b>	<b>Expected Completion Date</b>	<b>Verification Date</b>
1	251.04(8)(a) <b>Mandated Reporting - Child Abuse &amp; Neglect</b>  Description: Center staff were informed of parent allegations regarding potential abuse of a three year old child by staff employed by the center. There was no follow-up by the center, including reporting for investigation to county social services or law enforcement.	The incident has now been formally reported to the appropriate county child protective services authority.  A full internal review of the matter has been initiated.  Staff involved were immediately re-trained on mandatory reporting obligations.  Staff involved will receive ongoing training and evaluations	1/16/2026  1/16/2026  1/16/2026 - 6/16/2026  1/16/2026 - 6/16/2026	
2	251.055(1)(a) <b>Supervision Of Children</b>  Description: Staff failed to take any adequate measures to guide child's behavior and prevent harm. The child was clearly observed climbing equipment and jumping in an unsafe manner without proper intervention and redirection, resulting in injury to the child.  Repeat violation: Previously cited on 11/1/2024, 9/6/2024	Staff involved received immediate corrective coaching and retraining on active supervision and behavior redirection.  Classroom supervision expectations were reviewed with all staff.  Daily director observation walkthroughs implemented focusing on: • Staff positioning • Engagement and redirection • Safety awareness  Staff accountability measures strengthened through documented supervision performance checks.  The center has reinforced that prevention of unsafe behavior is a proactive responsibility requiring active engagement and immediate redirection.	1/16/2026 - 6/16/2026  2/17/2026 - 2/24/2026  Ongoing  Ongoing  Ongoing	

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3	251.07(6)(dm)2. <b>Medical Log - Pages &amp; Entries</b>  Description: Medical log entry dated 12/16/25 not signed or initialed as required by rule	The medical log was audited for completeness and signatures. The medical log was reviewed and corrected. Executive Director or designee now conducts weekly medical log audits. Retrain staff on medical log documentation policy and procedures.	1/16/26  3/2/2026 3/17/26	

**NAME - Agency Worker**  
Paul Spink

Date Issued  
2/13/2026

**SIGNATURE - Certified Operator or Designee / Licensee or Designee**



Date Signed  
3/2/2026