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attention to: Mary Schultek date: 7-5-19

company: Dept. of Children/families from: Sonya Woody

phone #: _____ company: Sharing & Caring

fax #: (262) 446-7991 senders phone #: (414) 242-3438

comments: _____

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DEPARTMENT OF CHILDREN AND FAMILIES
Division of Early Care and Education

STATE OF WISCONSIN

NONCOMPLIANCE STATEMENT AND CORRECTION PLAN

TO FILE A COMPLAINT CALL
262-446-7800

Date Correction Plan Due
6/3/2019

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		Provider Number / Facility ID Number
Sharing And Caring Fcc		6000582146 / 002 - 2000953
Address - Facility (Street, City, State, Zip Code)		Telephone Number
4404 W Hampton Ave Milwaukee WI 532185227		414-242-3438
Rule/Statute Number	Correction Plan	Date - Regulation Violation
Noncompliance Statement	Expected Completion Date	Verification Date
1 250.04(2)(a) Compliance With Laws Description: The carbon monoxide detector on the first floor is not working. Repeat violation: Previously cited on 6/2/2017	Replaced Carbon monoxide Detector	6-6-19
2 250.04(5)(b) Staff File - Background Information Disclosure Form Description: The file for staff A does not contain a BID form.	FOR STAFF A Background Check Will Be Completed	7-1-19

Name - Certified Operator / Licensed Center Sharing And Caring Fcc		Provider Number / Facility ID Number 6000582146 / 002 - 2000953	
Address - Facility (Street, City, State, Zip Code) 4404 W Hampton Ave Milwaukee WI 532185227		Telephone Number 414-242-3438	Date - Regulation Visit 5/16/2019
Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3 250.04(6)(a)1. Child Record - Enrollment & Health History Forms Description: Enrollment information is incomplete for child 1, 2, and 3.	Parent will do corrections.	7-1-19	
4 250.04(6)(a)4. Child Record - Immunization History, Physical Exam Description: The file for child 3 does not contain immunization information.	I will notify Parent.	7-1-19	
5 250.05(1)(b)4. Provider Training - Continuing Education Description: Staff A and B did not receive 15 hours of continuing education in 2018. Repeat violation: Previously cited on 6/2/2017	Will work on con. Education classes.	12-31-19	
6 250.05(1)(b)5. Provider Training - Cardiopulmonary Resuscitation Description: Staff A and B do not have current certificates of completion in CPR. Repeat violation: Previously cited on 6/2/2017	Will work on, TAKE CPR Classes.	8-1-19	

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Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
7 250.06(11)(b)4. Outdoor Play Space - Enclosure Description: The outdoor play space is not enclosed as the front gate that faces Hampton Ave will not close.	I will get it FIXED.	10-10-19	
B 250.06(2)(a) Electrical Or Hot Surface Protection Description: There is a lighter in the kitchen counter accessible to children. There is an outlet without a protective guard in the kitchen. Repeat violation: Previously cited on 6/2/2017	I will keep electrical or hot surface away from children.	10-6-19	
9 250.06(2)(c) Access To Materials Potentially Harmful To Children Description: There is insect repellent in an unlocked kitchen drawer. There are disinfecting wipes on the bathroom counter. Repeat violation: Previously cited on 6/2/2017	I will put all item away from children that may be harmful	10-6-19	
10 250.06(2)(e) Potential Source Of Harm On Premises Description: There are cords in an unlocked kitchen drawer accessible to children.	I empty the drawer theres nothing in it.	10-6-19	

Name - Certified Operator / Licensed Center Sharing And Caring Fcc		Provider Number / Facility ID Number 6000582146 / 002 - 20009553	
Address - Facility (Street, City, State, Zip Code) 4404 W Hampton Ave Milwaukee WI 532185227		Telephone Number 414-242-3438	Date - Regulation Visit 5/16/2019
Rules/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
250.06(2)(k) Deteriorating Or Toxic Paint Description: There is flaking paint around the front door.	I will Repair Flaking Paint AROUND	7-1-19	
250.06(3) Practice Of Written Emergency Plans Description: There was no tornado drill conducted in April 2019.	I did the Tornado drill and documented it.	4-3-19	

Date Issued
5/20/2019

Date Signed
4-2-19

NAME - Certification Worker / Licensing Specialist
Mary Schultek

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Sandra Wobay