

Date Correction Plan Due 2/27/2024	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.

Name - Certified Operator / Licensed Center Destin For Success Family Cc		Provider Number / Facility ID Number 3000590713 / 001 - 2005853	
Address - Facility (Street, City, State, Zip Code) 6408 N 49Th St Milwaukee WI 532236005		Telephone Number 414-748-9776	Date - Regulation Visit 2/8/2024
Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1 250.04(6)(a)1. Child Record - Enrollment Information Description: There was no child enrollment form available for Child 3. Repeat violation: Previously cited on 8/1/2023, 4/6/2022	I have made the necessary corrections	4/2/24	
2 250.04(6)(a)4.a. Child Record - Physical Exam - Under 2 Description: There was no documentation of a current health report for Child 3.	I have made the necessary corrections	4/2/24	

Name - Certified Operator / Licensed Center		Provider Number / Facility ID Number		
Destin For Success Family Cc		3000590713 / 001 - 2005853		
Address - Facility (Street, City, State, Zip Code)		Telephone Number	Date - Regulation Visit	
6408 N 49Th St Milwaukee WI 532236005		414-748-9776	2/8/2024	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3	250.04(6)(a)4m. Child Record - Immunization History Compliance Description: There was no documentation of a history of immunizations for Child 3.	I have made the necessary corrections	4/2/24	
4	250.05(3)(fm) Biennial Training - Child Abuse & Neglect Description: There was no documentation of a current Child abuse and Neglect/Mandated Reporter training for Staff B. Repeat violation: Previously cited on 8/1/2023	I have completed all my necessary trainings	4/2/24	
5	250.055(2)(b) Maximum Number Of Children In Care Of The Provider Description: The maximum children in care for a family provider that has 3 children under the age of 2 years of age is 2 over the age of two. At the time of the visit the provider was alone with 3 children under 2 years of age and 5 children over the age of two. Repeat violation: Previously cited on 11/9/2023	I have made the necessary changes	4/2/24	

Name - Certified Operator / Licensed Center		Provider Number / Facility ID Number		
Destin For Success Family Cc		3000590713 / 001 - 2005853		
Address - Facility (Street, City, State, Zip Code)		Telephone Number	Date - Regulation Visit	
6408 N 49Th St Milwaukee WI 532236005		414-748-9776	2/8/2024	
Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date	
6 250.055(2)(c) Requirements For Additional Provider Description: The age distribution of the children exceeded the number that may be served by one provider. Therefore, an additional qualified provider was required for ratio. Repeat violation: Previously cited on 11/9/2023	No longer in I understand Changes have been made	4/2/24		
7 250.06(2)(c) Access To Materials Potentially Harmful To Children Description: There was a several plastic bags and a scissors accessible to the children.	Bags have been removed from cubby 3 in general	4/2/24		
8 250.06(7)(a)1. Exits - Unobstructed Description: The egress window that is used for the second exit was obstructed with items including a table.	Obstruction has been removed	4/2/24		
9 250.09(4)(e) Infant & Toddler - Soiled Disposable Diapers Description: There was a <input type="checkbox"/> pull-up <input type="checkbox"/> in a garbage can that didn't contain a plastic liner.	Changes have been made / corrected	4/2/24		

Name - Certified Operator / Licensed Center

Provider Number / Facility ID Number

Destin For Success Family Cc

3000590713 / 001 - 2005853

Address - Facility (Street, City, State, Zip Code)
6408 N 49Th St Milwaukee WI 532236005

Telephone Number
414-748-9776

Date - Regulation Visit
2/8/2024

Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date

NAME - Agency Worker
Rhonda Brueggemann, Sarah Stormont

Date Issued
2/13/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed