

<b>Date Correction Plan Due</b> 5/7/2024	<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.

Name - Certified Operator / Licensed Center		Provider Number / Facility ID Number	
Wauwatosa Dc And Lrng Ctr - Glenview		0000591210 / 002 - 2006375	
Address - Facility (Street, City, State, Zip Code)		Telephone Number	Date - Regulation Visit
822 Glenview Ave Wauwatosa WI 532133308		414-479-3050	4/23/2024
Rule/Statute Number	Correction Plan	Expected Completion Date	Verification Date
1 251.04(6)(a)8.a. <b>Child Record - Physical Exam - Under 2</b>  Description: Child #1, under the age of two, did not have an updated health report on file. The report on file was dated 10/2/23.  Repeat violation: Previously cited on 9/5/2023	Moving forward, parents will be notified of forms that need to be updated 1 month prior to the necessary date on the form. This child's parents were emailed a new form on 4-25-24 with a return request of as soon as possible. Moving forward, a list of expiration dates for all epi-pens in the center will be kept in the directors office to ensure expired epi-pens are not in the center. This child's epi-pen was sent home on 4-23-24 and a new one was requested as soon as possible.	4/30/24	
2 251.07(6)(f)5. <b>Medication Administration - As Labeled &amp; Authorized</b>  Description: A child's EpiPen was observed to be expired; the expiration date as 4/18/24.		4/30/24	

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<b>Telephone Number</b> 414-479-3050		<b>Expected Completion Date</b> 4/25/24	
<b>Rule/Statute Number</b> <b>Noncompliance Statement</b>		<b>Correction Plan</b>	
3 251.09(1)(c) <b>Infant &amp; Toddler - Documenting Changes In Development</b> Description: There were four intake forms observed that had not been updated within the past 3 months.	Staff were reminded of the updating requirements for intake forms. Moving forward we will use an "Intake update" form to keep track of when updates are required.		<b>Verification Date</b> 4/25/24

**NAME - Agency Worker**  
 Katrina Tarantino

**Date Issued**  
 4/23/2024

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

**Date Signed**  
 4.25.2024

*Katrina Tarantino*