

**NONCOMPLIANCE STATEMENT AND CORRECTION PLAN**

**TO FILE A COMPLAINT CALL**  
262-446-7800

**Date Correction Plan Due**  
2/25/2025

**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 - Trinity Woods

0000591210 / 001 - 2006374

**Address - Facility (Street, City, State, Zip Code)**  
3010 N Menomonee River Pkwy Milwaukee WI 53222

**Telephone Number**  
414-625-9938

**Date - Regulation Visit**  
2/10/2025

Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
<p>1 251.05(2)(a)6. <b>Staff Record - Days &amp; Hours Worked</b></p> <p>Description: There were two staff present in the Toddler 1 room at the time of the licensing visit, however, only one staff member was signed in.</p>	<p>Staff were reminded of sign in and out procedure and consequences if not followed.</p>	<p>2/10/25</p>	<p>2/11/25</p>
<p>2 251.06(2)(a) <b>Potential Source Of Harm On Premises</b></p> <p>Description: There was a pair of scissors in the Toddler 1 room that was in an unlocked drawer and accessible to children</p>	<p>The scissors were removed immediately and new drawer locks placed on 2/15/25</p>	<p>2/10/25</p>	<p>2/15/25</p>

Name - Certified Operator / Licensed Center

Provider Number / Facility ID Number

Wauwatosa Dc And Lrng Ctr - Trinity Woods

0000591210 / 001 - 2006374

Address - Facility (Street, City, State, Zip Code)  
3010 N Menomonee River Pkwy Milwaukee WI 53222

Telephone Number  
414-625-9938

Date - Regulation Visit  
2/10/2025

Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3 251.06(2)(b) <b>Electrical Or Hot Surface Protection</b> Description: An outlet in the Preschool 1 room was not protected by a screen or guard.	Outlet cover was placed in right away and reminded staff they must be in at all times.	2/10/25	2/10/25
4 251.06(9)(c)1. <b>Safe Food</b> Description: A bag of pretzels in the Infant 2 room was expired.	All food was removed from the room. Staff will be reminded at staff meeting.	2/10/25	2/27/25
5 251.09(1)(c) <b>Infant &amp; Toddler - Documenting Changes In Development</b> Description: There were several intake under 2 forms that were observed during the licensing visit that did not have any updates documented within the past 3 months. Repeat violation: Previously cited on 7/24/2024	DN going reminders will be given to staff and families.	2/10/25	2/28/25

NAME - Agency Worker  
Katrina Tarantino

Date Issued  
2/11/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed

*Jenele Bald* - Director

2/18/25