

# Office DEPOT OfficeMax®

## complimentary fax cover sheet

number of pages including cover sheet: 6attention to: Danielle ~~POI~~date: 9/9/2021

company: \_\_\_\_\_

from: Pamela ALLENphone #: (414) 446-8085company: MAMA IIfax #: (262) 446-7991

sender's phone #: \_\_\_\_\_

sender's email: \_\_\_\_\_

comments: \_\_\_\_\_

By sending this fax at Office Depot, inc., the sender agrees not to use this fax to: (I) transmit material whose transmission is unlawful, harassing, libelous, abusive, threatening, harmful, vulgar, obscene, pornographic or otherwise objectionable; (II) create a false identity, or otherwise attempt to mislead others as to the identity of the sender or the origin of this fax; (III) post or transmit any material that may infringe the copyright, trade secret, or other rights of any third party; (IV) violate any federal, state or local law in the location, or (V) conduct activities related to gambling, sweepstakes, raffles, lotteries, contests, ponzi schemes or the like.

Please note that Office Depot, inc., does not review the contents of any fax sent using its services. The sender of this fax hereby agrees to indemnify Office Depot inc., to the fullest extent of the law and for any and all claims, suits, or damages arising out of or in connection with the request to send, or sending this fax.

self service  
domestic per page



\$1.50 2065527

self service  
international per page



\$3.99 2064240

Office Depot 3364  
9094 N Green Bay Rd  
Milwaukee, WI 53209  
p: 414.214.1956 f: 414.365.2885  
ods03364cpc@officedepot.com

# Office DEPOT OfficeMax®

DEPARTMENT OF CHILDREN AND FAMILIES  
 Division of Early Care and Education

## NONCOMPLIANCE STATEMENT AND CORRECTION PLAN

TO FILE A COMPLAINT CALL  
262-446-7800Date Correction Plan Due  
9/10/2021

**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.

Provider Number / Facility ID Number  
6000569846 / 001 - 2003819

Name - Certified Operator / Licensed Center

Mama li

Address - Facility (Street, City, State, Zip Code)  
6010 N 98Th Ct Milwaukee WI 532251606Telephone Number  
414-446-8085Date - Regulation Visit  
8/12/2021

Correction Plan

Expected Completion Date  
Verification DateRule/Statute Number  
Noncompliance Statement

250.04(6)(a)1.

Child Record - Enrollment &amp; Health History Forms

Description: The file for Child 3 lacked a complete health history and emergency care plan upon licensing review. Child 3's file noted multiple medical conditions, however, the form lacked information in the emergency care plan regarding any medical conditions and what to do in the event of an emergency. This was corrected during the visit. Child 4's health history and emergency care plan was not signed and dated. Child 4's enrollment form was missing emergency contact information and physician/medical facility information.

Forms  
was signed  
and correct

Done

8/17/21

250.04(6)(a)4.d.

Child Record - Health Exam Report

Description: Child 2 did not have documentation of a child health report in the child record.

Form in  
file  
Done

8/17/21

Name - Certified Operator / Licensed Center  
Mama II

Provider Number / Facility ID Number  
6000569846 / 001 - 2003819

Address - Facility (Street, City, State, Zip Code)  
6010 N 98TH Ct Milwaukee WI 532251606

Telephone Number  
414-446-8085

Date - Regulation Visit  
8/12/2021

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3	250.04(6)(b) Current, Accurate Daily Attendance Record  Description: 3 children were not marked out on the attendance record on 08/09/21. 3 children were not marked out on the attendance record on 08/10/21.	corrected dtd 8/13/2021	8/13/2021	
4	250.04(8)(b) Biennial Training - Child Abuse & Neglect  Description: Staff A did not have documentation of a current Child Abuse/Neglect (CAN) training in the staff record.	Read put in File  Done	9/4/21	
5	250.05(2)(c) Staff File - Days, Hours Worked  Description: Staff hours were not documented for the weeks of 07/04/21-07/10/21, 07/11/21-07/17/21, 07/18/21-07/24/21, 07/25/21-07/31/21, 08/01/21-08/07/21.	hours documented  Done	8/16/2021	
6	250.06(2)(a) Electrical Or Hot Surface Protection  Description: One plug outlet in the living room was missing a wall plate. One plug outlet in the living room was cracked and missing half of the wall plate. Electrical outlet guards were missing from 2 plug outlets in the living room.	one plug outlet to wall replaced, put guards in plug  Done	8/16/2021	

Name - Certified Operator / Licensed Center Mama II		Provider Number / Facility ID Number 6000569846 / 001 - 2003819	
Address - Facility (Street, City, State, Zip Code) 6010 N 98Th Ct Milwaukee WI 532251606		Telephone Number 414-446-8085	
Date - Regulation Visit 8/12/2021			
Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
7 250.06(2)(c) Access To Materials Potentially Harmful To Children  Description: There was a plastic bag containing beer cans that was accessible to children in the outdoor play space.	Remove bag  Done	8/12/2021	
8 250.06(2)(k) Deteriorating Or Toxic Paint  Description: There were two vent registers in the living room that had deteriorating flaking paint.	old paint Remove New paint  Done	8/17/2021	
9 250.06(2)(m) Premises - Condition & Repair  Description: The outside and inside of the kitchen refrigerator is unsanitary. The countertops in the kitchen were dirty and unsanitary. There were fruit fly's in the kitchen.	Kitchen clean up outside and inside counter-top clean up. Fruit fly's are gone. Done	8/12/2021	
10 250.08(3)(a) Required Information - Children Being Transported  Description: The center did not have a current list of the children being transported.	have a book with list for the children  Done	8/13/2021	

Name - Certified Operator / Licensed Center Mama II		Provider Number / Facility ID Number 6000569846 / 001 - 2003819	
Address - Facility (Street, City, State, Zip Code) 6010 N 98TH Ct Milwaukee WI 532251606		Telephone Number 414-416-8085	
		Date - Regulation Visit 8/12/2021	
Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
11 250.08(3)(b) Required Information - Permission And Emergency Information Description: The center did not have copies of completed transportation permission and emergency information forms for 5 children in the vehicle.	transportation permission put in folder in the car. Done	8/14/2021	
12 250.08(3)(c) Required Information - Route And Stops Description: The center did not have documentation at the center, or in the vehicle, of the transportation routes and scheduled stops	have a book put in car for documentation for stops/routes Done	8/13/2021	
13 250.08(4)(b) Driver Training - Documentation Description: Staff A did not have documentation of an annual driver training in the staff record.	documentation put in folder Done	8/12/2021	
14 250.08(4)(c)1. Driver Record - Obtain & Review Description: Staff A did not have documentation of an annual driving record in the staff record.	documentation put in folder Done	8/12/2021	

Name - Certified Operator / Licensed Center Mama II		Provider Number / Facility ID Number 6000569846 / 001 - 2003819	
Address - Facility (Street, City, State, Zip Code) 6010 N 98Th Ct Milwaukee WI 532251606		Telephone Number 414-416-8085	
Rule/Statute Number Noncompliance Statement		Correction Plan	
		Expected Completion Date	
		Verification Date	

NAME - Certification Worker / Licensing Specialist  
Daniel Noel

Date Issued  
8/25/2021

Operator or Designee / Licensee or Designee  
Danae Turner

Date Signed 8/7/2021