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Division of Early Care and Education DEPARTMENT OF CHILDREN AND FAMILIES

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) Date Correction Plan Due Failure to submit an appropriate correction plan by the due date listed above may result in sanctions identified in the statute and I or administrative rule. Public Schools

instructions: nay submit plans of correction however are not required to do so. žna Domplete the section labeled "Correction Plan" by indicating the steps that will be taken to address and correct each of the listed noncompliance(s). represent 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 (2)(k). 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 The Noncompliance Statement below identifies the violation(s) of child care statute and I or administrative rule identified by the certification I licensing specialist. If this is a licensed child care, post your copy of the

Telephone Number 414.446-8085 1606 Correction Plan Ith History Forms Ith History Forms Sked a complete health history and no review. Child 3's file noted wer, the form lacked information in g any medical conditions and what y. This was corrected during the emergency care plan was not signed orm was missing emergency contact if facility information. TO I M And COIT BCT To I M To I	behalty pursuant to Wis. Stat. 40.713. If the Company of the sanction and / or penalty and your appeal rights. Name - Certified Operator / Licensed Center	Providence of the contract of	Provider Number / Facility ID Number 6000569846 / 001 - 2003819
ilistory Forms a complete health history and wheat the form lacked information in y medical conditions and what his was corrected during the regency care plan was not signed was missing emergency contact willy information. Torm IN Expected Completion Date Completion Date Co	Mama li	umber	Date - Regulation Vis 8/12/2021
Rule/Statute Number Noncompliance Statement 250,04(6)(a)1. Child Record - Enrollment & Health History Forms Child Record - Enrollment & Health History and emergency child 3's file noted emergency care plan upon licensing review. Child 3's file noted emergency care plan upon licensing review. Child 3's file noted emergency care plan upon licensing enview. Child 3's file noted emergency care plan upon licensing enview. Child 3's file noted emergency care plan upon licensing enview. Child sharp enview. Child 8's enrollment form was missing emergency contact information and physician/medical facility information. 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.	010 N 98Th Ct Milwaukee WI 532251606		Expected
Noncompliance Statement 250.04(6)(a)1. Child Record - Enrollment & Health History Forms Child Record - Enrollment & 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. 250.04(6)(a)4.d. Child Record - Heath Exam Report Description: Child 2 did not have documentation of a child health report in the child record.	Rule/Statute Number	Correction Plan	Completion Date
Child Record - Enrollment & Health History Forms Child S lacked a complete health history and emergency care plan upon licensing review. Child S file noted emergency care plan upon licensing review. Child S file noted emergency care plan upon licensing review. Child S file noted what the emergency care plan upon licensing any medical conditions and what 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. 250,04(6)(a)4.d. Child Record - Heath Exam Report Child Record - Heath Exam Report Description: Child 2 did not have documentation of a child health report in the child record.	Noncompliance Statement		angualitation of Maria
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77		Annesighamone et announce un est	8/11/21
	Description: Child 2 did not have documentation of a child health report in the child record.		e de la maria della maria dell

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FROM: Office Depot #3364

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I WOOD	Name - Certified Operator / Licensed Center	FTOVIG	Provider Number / Facility ID Number	Jer T
Z	Mama li	60005	6000569846 / 001 - 2003819	
Ada 601	Address - Facility (Street, City, State, Zip Code) 6010 N 98Th Ct Milwaukee WI 532251606	Теlephone Number 414-416-8085	Date - Regulation Visit 8/12/2021	X
Links Control (1000) Management	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
ယ	250.04(6)(b) Current, Accurate Daily Attendance Record	Corrected atd	8/13/2021	man de la companya d
0000ki Ottoborooopopopopopominki deli Flatistatiskii	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	41012000		
niineliselaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaa	on 08/10/21.	Done		The state of the s
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	9/4/21	
nggagagamin inin di dalam di d		D000		
5 7	250.05(2)(c) Staff File - Days, Hours Worked	7 8u 7 S	0 16/2021	
000000 mmmmmmmmmmmmmmmmmmmmmmmmmmmmmmm	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.	documented Done	8	
o	250.06(2)(a) Electrical Or Hot Surface Protection	WALL REPLACES, Put	8/16/2021	use o possession consistent militarità in militari
markatiin oo	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.	Q 3		

Name - G Mama li	Name - Certified Operator / Licensed Center Mama li	60005	6000569846 / 001 - 2003819	Ē
Addn 6010	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	isit
- ANDREAN NO DESERTITOR	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
7	250.06(2)(c) Access To Materials Potentially Harmful To Children	REMOVE bag	8/12/2021	
	Description: There was a plastic bag containing beer cans that was accessible to children in the outdoor play space.	J 0 7 0		
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 POINT REMOVE NEW PRINT PONE	Koz [1.1/207	The second secon
Ø	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 Cleanupe outside and inside counter-top clean up fruit FIY's are gone. Done	8 1.2 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 8/13/2021 THE CHILDREN 8/13/2021	8/13/2021	

Name - C	Name - Certified Operator / Licensed Center	60005	6000569846 / 001 ~ 2003819	
Addr 6010	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	***
ALLOCATION POPULATION AND ADDRESS OF THE POPULATION AND ADDRESS OF	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
크	And Emergency Information	transportation		
	Description: The center did not have copies of completed transportation permission and emergency information forms for 5 children in the vehicle.	PERMISSION PUT IN FoldER IN the car. Done	8/14/2021	
2	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 documentation	8/13/2021	
Ü	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	8/12/201	
	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	8//2/2021	

9/9/2021 6:36 PM FROM: Office Depot #3364 Ρ. 6

Mama li Address - Facility (Street, City, State, Zip Code) 6010 N 98Th Ct Milwaukee WI 532251606 Name - Certified Operator / Licensed Center NAME - Certification Worker / Licensing Specialist SIGNATURE - Certified Operator or Designee / Licensee or Designee Daniel Noel Noncompliance Statement Rule/Statute Number mera Correction Plan 414-4/16-8085 Telephone Number 6000569846 / 001 - 2003819 Provider Number / Facility ID Number Date Issued 8/25/2021 State Signed / 2021 Completion Date Expected Date - Regulation Visit 8/12/2021 Verification Page 6 of 6

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PAGE 6/6 REC'D 9/9/2021 6:36:16 PM [Central Daylight Time] PRD 082265423