

NONCOMPLIANCE STATEMENT AND CORRECTION PLAN

Date Correction Plan Due
2/14/2025

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 252.4(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

All My Children Lrng Academy II Llc

1000588891 / 001 - 2002878

Address - Facility (Street, City, State, Zip Code)
5148 N Teutonia Ave Milwaukee WI 532095500

Telephone Number
414-249-3897

Date - Regulation Visit
1/29/2025

Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
<p>1 251.06(4)(i)2. Fire Alarms & Smoke Detectors - Maintenance</p> <p>Description: A smoke detector in the 2 year old classroom above the door is chirping indicating it is not in operable condition and the battery needs to be replaced.</p>	<p>Smoke detector has working Batteries not</p>	<p>1/29/25</p>	
<p>2 251.07(4)(d) Naps Or Rest Periods - Individual Bedding</p> <p>Description: In the 2-year-old room, a child was observed sleeping on a cot without being provided an individually identified sheet.</p>	<p>Bedding was provided for children,</p>	<p>1/29/25</p>	

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Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3 251.07(6)(f)1.a. Medication Administration - Parent Authorization Description: An inhaler being stored in the infant room does not have a start or end date for the authorization.	medication was removed	1/29/25	
4 251.07(6)(f)1.b. Medication Administration - Containers & Labeling Description: In the infant room medication container, two tubes of teething gel, an inhaler, and a container of children's Motrin drops are not labeled with the child's name.	medication was removed from room	1/29/25	
5 251.07(6)(f)6. Current Authorizations For Medications On Premises Description: In the infant room, two tubes of teething gel and a bottle of children's Motrin drops do not have an authorization to administer the medication.	Parent provided Authorization for medication	1/30/25	

NAME - Agency Worker
 Daniel Noel
 Date Issued
 1/30/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee
Janine Kagle
 Date Signed
 3/26/25