

Date Correction Plan Due
5/18/2026

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) 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 All My Children Lrng Academy II Llc
Provider Number / Facility ID Number 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 4/21/2026

Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
<p>1 251.04(6)(a)8.a. Child Record - Physical Exam - Under 2 Description: Child 1 does not have physical within last 6 months. The last physical on file is dated 5/28/25.</p>	<p>Mom was reminded that a updated physical was needed immediately</p>	<p>5-8-26</p>	
<p>2 251.06(9)(f)3. Food - Leftover Prepared Food Description: Lunch that was served around 11:30am was sitting on the table at 1:00pm for children to eat when they woke up from napping.</p>	<p>I trained staff how to properly store food when children awest ready to eat.</p>	<p>4-21-26</p>	

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Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3 251.07(5)(a)6. Menus - Changes Description: The menu posted did not match what was served. The menu state tacos with pineapple and corn however chicken with green beans and banana were served.	Staff will write in any changes that are made on the menu.	4-21-26	
4 251.07(6)(dm)4. Medical Log - Reviewing Injury Records Description: The medical log book was not reviewed in the last 6 months. The last reviewed is dated 8/26/25.	Medical log will be updated every 6 months	4-21-26	
5 251.09(3)(a)11. Infant & Toddler - Care During Feeding Description: A child sitting in a high chair is not strapped in.	Staff was reminded to Always strap children in high chair whenever placed in it.	4-21-26	

NAME - Agency Worker
Sara Cooney, Kristin Lange

Date Issued
5/4/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed

Sara Cooney

5-5-26