

Date Correction Plan Due
3/11/2022

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

Provider Number / Facility ID Number

Little People Big Purpose

9000590199 / 001 - 2005269

Address - Facility (Street, City, State, Zip Code)
4258 N 61st St Milwaukee WI 532161215

Telephone Number
414-915-3888

Date - Regulation Visit
3/1/2022

Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
<p>1 250.04(4)(c)2.c. Parent Notification - Injury, Consumption Of Allergen, Incorrect Medication</p> <p>Description: The licensee failed to immediately notify the parent of a one year old toddler that experienced a head injury while in the care of the licensee. The injury occurred at 4:00 P.M. The toddler was picked up by his parent at approximately 7:10 P.M. at which time the licensee still failed to notify the parent of the head injury. The licensee notified the parent at 8:10 P.M. during a telephone call from the parent to the licensee inquiring about why her child had a bump on his head.</p>	<p>Moving forward notify right away</p>	<p>3/8/22</p>	

Name - Certified Operator / Licensed Center		Provider Number / Facility ID Number	
Little People Big Purpose		9000590199 / 001 - 2005269	
Address - Facility (Street, City, State, Zip Code)		Telephone Number	Date - Regulation Visit
4258 N 61st St Milwaukee WI 532161215		414-915-3888	3/1/2022
Rule/Statute Number	Correction Plan	Expected Completion Date	Verification Date
250.07(6)(b)3.b. Medical Log Book - Injuries Received In Care			
Description: The licensee failed to record in the medical log book an injury received by a child while in the care of the center on the date the injury occurred. A toddler received a head injury while in care on 2/24/22. As of 3/1/22 the licensee had not recorded the injury in the center medical log book.		moving forward document right away	
		3/8/22	

NAME - Certification Worker / Licensing Specialist
Maureen Statten

Date Issued
3/3/2022

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed