

Date Correction Plan Due 6/26/2024	<b>NONCOMPLIANCE STATEMENT AND CORRECTION PLAN</b>	TO FILE A COMPLAINT CALL
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**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 Yeethao Child Care		Provider Number / Facility ID Number 6000590236 / 001		
Address - Facility (Street, City, State, Zip Code) 6720 WAcacia St Milwaukee WI 532235742		Telephone Number 414-553-4179	Date - Regulation Visit 6/6/2024	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	<p>202.08(1)(b)5. After Completion Of Preservice Training Under Subd 3., A Child Care Provider Shall Receive And Document Receiving At Least 5 Hours Of Qualifying Continuing Education Annually. Continuing Education Qualifies Under This Subdivision If It Covers Any Of The Topics Listed Under 202.08(1)(B)5. A. Through N.</p> <p>Description: The operator did not have 5 hours of qualifying continual education.</p>	<p>Read: Rest Uneasy: Sudden Infant Death Syndrome by Brittany Cawgill</p>	<p>June 16, 2024</p>	

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2	202.08(4)(a)2. <b>For A Child 2 Years Of Age Or Older, A Report Of A Physical Examination Conducted Not More Than 2 Years Prior To Nor Later Than 3 Months After The Child Is Admitted, And A Follow-Up Health Examination At Least Once Every 2 Years Thereafter</b>  Description: Child #4 is missing the health report on file. Child #6 and #7 was missing updated health report on file.	The up to date health report are in the binder now	6/21/24	
3	202.08(4m)(a)2. <b>The Emergency Plan Under Subd. 1. Shall Be Reviewed Periodically And Practiced As Specified In The Plan.</b>  Description: The basement is used for Tornado shelter and drills; however, the designated space in the basement is not clear and safe for shelter or Tornado drills to be practiced.	The designated space is now clear and safe for shelter or tornado drills.	7/25/24	

NAME - Agency Worker  
Lou Thao

Date Issued  
6/12/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed



7/29/24

**CONTINUING EDUCATION RECORD – INDEPENDENT READING / VIDEO VIEWING**

**Use of form:** Use of this form is voluntary. It is used to document web-based training or each child care-related book, article, or video pertaining to the population served by the facility that is read / viewed as part of an employee's continuing education (CE) effort. **Level 1 (Regular) Certified Operators** – Certifying agencies may allow up to 5 hours of independent continuing education per year.

**Instructions:** The provider or employee must complete a separate form for each book / article read or video / web-based training viewed. Place completed form(s) in the employee's file for the licensing specialist or certification worker to review.

**EMPLOYEE INFORMATION**

Employee Name Yeethao Yiong

Position Title Child care owner

Full time  
 Part time

**BOOK OR ARTICLE**

Title Rest Uneasy: Sudden Infant Death Syndrome Date published May 7, 2018

Author Brittany Cowgill

Number of Pages 250 pages Actual amount of time spent reading 8 hours Date you completed reading the material June 16, 2024

**VIDEO OR WEB-BASED TRAINING**

Title \_\_\_\_\_ Length (Minutes) \_\_\_\_\_

Name of Presenter \_\_\_\_\_ Date you viewed the material \_\_\_\_\_

**SELF ASSESSMENT**

List two things you learned from your reading or viewing.

- Sudden infant death syndrome is the sudden death of an infant usually under the age of 1. The cause of death is mostly unknown.
- Sudden infant death syndrome usually occur when a baby is sleeping.

List two ways your viewing or reading has improved your facility and / or your ability to provide care to the population served by your facility.

- Make sure to keep baby's crib free of blanket, stuff animals, and toys to prevent sudden infant death syndrome.
- Have a clean environment, no smoking or strong cooking.