

Date Correction Plan Due
8/6/2024

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)(O), 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, you will be given a notice of the sanction and / or penalty and your appeal rights.

Name - Certified Operator / Licensed Center

Reaching Past The Stars Academy

Provider Number / Facility ID Number
6000591316 / 001 - 2006487

Address - Facility (Street, City, State, Zip Code)
4431 W Kiley Ave Milwaukee WI 532235332

Telephone Number
414-426-7659

Date - Regulation Visit
7/22/2024

Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
<p>1 250.04(6)(a)1.f Child Record - Enrollment Information - Medical Contact</p> <p>Description: Child #2 did not have contact information for a physician or medical facility.</p>	<p>Had parent complete this section</p>	<p>ASAP</p>	
<p>2 250.06(2)(e) Potential Source Of Harm On Premises</p> <p>Description: There were items labeled <input type="checkbox"/> Keep out of reach of children <input type="checkbox"/> accessible to children. Items included: a bottle of hydrogen peroxide and cleaning products. A closet with additional items was not closed during the visit.</p>	<p>In the future I will keep harm items locked away and away from children. This will not happen again</p>	<p>ASAP</p>	

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3 250.06(4)(a)1. Smoke Detectors Description: A smoke detector was chirping during the visit, indicating it was not in optimal operating condition.	Bought batteries and switched them out. This will not happen again	7/29/24	
4 250.07(6)(b)2. Medical Log Book - Pages And Entries Description: The medical log book was observed with skipped lines. One entry did not contain a signature of the person who wrote the entry. Repeat violation: Previously cited on 11/27/2023	This has been corrected and this will not happen again	7/29/24 ASAP	
5 250.07(6)(k)2. Wound Cleaning Description: The provider reported that she cleaned a child's wound with hydrogen peroxide instead of just soap and water.	I will remember to clean wounds with soap and water	ASAP	
6 250.09(4)(b) Infant & Toddler - Diaper Changing Surface - Disinfection Description: There were tears in the changing mat. This prevents the mat from being thoroughly sanitized following diaper changes.	Ordered a new mat from Amazon	7/29/24	

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NAME - Agency Worker
Sarah Stormont, Kristin Keck

Date Issued
7/23/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed
7/29/2024