

Date Correction Plan Due
7/15/2025

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
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
6/17/2025

Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1 250.04(6)(a)4m. Child Record - Immunization History Compliance Description: Child #1, Child #5 and Child #6 do not have documentation of immunizations on file. Repeat violation: Previously cited on 2/5/2024	I now have all files updated.	7.15.2025	

On 06/17/2025 two children were cited for no immunization plan there is no present though the visit was not signed in.
Description: Attendance is not current and accurate. A child who was current, accurate daily attendance record
350 04(6)(a)
Noncompliance Statement
Registration Number
Correction Plan
Completion Date
Date

Name - Certified Operator / Licensed Center

Reaching Past The Stars Academy

Address - Facility (Street, City, State, Zip Code)
4431 W Kiley Ave Milwaukee WI 532353332

Provider Number / Facility ID Number
6000591316 / 001 - 2006487

Telephone Number
414-426-7659

Date - Regulation Visit
6/17/2025

Rule/Statute Number	Correction Plan	Expected Completion Date	Verification Date
<p>250.04(6)(b) Current, Accurate Daily Attendance Record</p> <p>Description: Attendance is not current and accurate. A child who was present during the visit was not signed in. On 6/9/25 three children are signed in but are not signed. On 6/10/25 two children were said to be in attendance but there is no time in or out for them. Repeat violation: Previously cited on 11/27/2023</p>	I will ensure all kids are signed in at all times	7.6.2025	
<p>250.05(3)(fm) Biennial Training - Child Abuse & Neglect</p> <p>Description: Staff A does not documentation of current training in Child Abuse and Neglect. The training on file expired in October 2024.</p>	Training has been completed	7.6.2025	
<p>250.05(1)(L) Procedure - Number, Names, Whereabouts Known At All Times</p> <p>Description: A child who is present is not signed in on the attendance sheet which is the center's procedure for child tracking.</p>	I will ensure all children are signed in at all times.	7.6.2025	

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Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
5 250.06(2)(k) Deteriorating Or Toxic Paint Description: There is flaking/peeling paint on the trim of the garage in the outdoor play space, accessible to children.	I have sanded the area and no more chipped paint.	7.6.2025	
6 250.06(2)(m) Premises - Condition & Repair Description: The wood siding on the home is splintering which is accessible to children. Repeat violation: Previously cited on 2/5/2024	landlord has removed and replaced.	7.14.2025	
7 250.06(9)(j) Meals & Snacks - Records Description: There are no menus for review for 6/3/25, 6/9/25, 6/10/25, 6/16/25 and 6/17/25.	I will ensure I keep track of menus and keep them updated.	7.6.2025	
8 250.07(3)(a)5. Play Equipment - Manufacturer Instructions And Recommendations Description: An infant sitting in a bouncy seat was not strapped in.	I will ensure safety of all kids	7.6.2025	

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<p>8.0002(1) - [Faint text]</p> <p>8.0002(2) - [Faint text]</p> <p>8.0002(3) - [Faint text]</p> <p>8.0002(4) - [Faint text]</p> <p>8.0002(5) - [Faint text]</p> <p>8.0002(6) - [Faint text]</p> <p>8.0002(7) - [Faint text]</p> <p>8.0002(8) - [Faint text]</p> <p>8.0002(9) - [Faint text]</p> <p>8.0002(10) - [Faint text]</p>	<p>[Faint handwritten notes]</p>	<p>[Faint handwritten notes]</p>	<p>[Faint handwritten notes]</p>

NAME - Agency Worker
Sara Cooney, Kristin Lange

SIGNATURE - Certified Operator or Designee / Licensee or Designee

[Handwritten signature]

Date Issued

7/1/2025

Date Signed
7-15-2025