

Scanned 6/13/25 10:25 AM

Date Correction Plan Due 6/24/2025	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN		TO FILE A COMPLAINT CALL 262-446-7800
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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 Grandma's House Day Care Center		Provider Number / Facility ID Number 1000563691 / 006 - 1015345	
Address - Facility (Street, City, State, Zip Code) 229 E Capitol Dr Hartland WI 53029		Telephone Number 262-361-4809	Date - Regulation Visit 5/29/2025

Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1 251.04(6)(a)6. Child Record - Health History Description: Two children with known food allergies do not have a complete health history form on file.	<i>Thought forms were filled out enough but with new parents fill in all the blanks.</i>	<i>6/2/25</i>	<i>6/2/25</i>
2 251.04(7)(a) Disclosure Of Personal Information Description: A child's allergy information is posted on a board in the classroom which is visible for anyone to see.	<i>Will cover name. (It was done per parent request and will file for an exception with state)</i>	<i>5/29/25</i>	<i>5/29/25</i>

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Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3 251.05(3)(g)2. Assistant Child Care Teacher - Qualifications Description: Staff B who has been an assistant teacher for more than 6 months does not have documentation of completed 2 credits in early childhood education or its equivalent. Repeat violation: Previously cited on 6/21/2023	State number enrolling in classes, she was finishing her other degree prior to enrolling	5/30/25	5/30/25
4 251.06(4)(a) Fire Extinguishers - Operable, Inspected, Labeled Description: The fire extinguishers have not been inspected and labeled within the last 12 months. The last inspection was in April 2024.	Extinguishers were updated following den.	5/30/25	5/30/25
5 251.09(1)(c) Infant & Toddler - Documenting Changes In Development Description: One of six infant and toddler intake forms reviewed have not been updated in the last 3 months. The last update was on 2/6/25.	Infant teachers updated the one intake form that had not been.	5/30/25	5/30/25

NAME - Agency Worker
 Sara Cooney, Kristin Lange

Date Issued
 6/10/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed



6/10/25