

DEPARTMENT OF CHILDREN AND FAMILIES
Division of Early Care and Education

*monika 3/11/24
joshua m 3/11/24
26946-7991*

STATE OF WISCONSIN

Date Correction Plan Due
3/12/2024

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)(b) and (3)(g), 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 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
Kids R Just Kids Phase III

Provider Number / Facility ID Number
7000569867 / 002 - 1010819

Address - Facility (Street, City, State, Zip Code)
4678 N 40Th St Milwaukee WI 53209

Telephone Number
414-449-9676 or
414-798-5056

Date - Regulation Visit
2/21/2024

Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1 251.04(6)(a)8.b. Child Record - Physical Exam - Over 2, Under 5 Description: There was no record for Child 3 of having a follow up health examination within the past 2 years; the last exam was in November 2021.	<i>As it turned out this child did not need exam, mom took her to the doctor and the doctor said she was good. Here's a copy and to correct we put it in her file.</i>	<i>3/8/24</i>	
2 251.06(9)(d)1.b. Food Storage - Refrigeration Units Description: The kitchen refrigerator is not being maintained at 40 degrees; the refrigerator was at 50 degrees.	<i>We were not aware the refrigerator was at 50 degrees. We put it at 40 degrees and to correct we will check it often.</i>	<i>3/8/24</i>	

NAME - Agency Worker
Kristin Keck, Sarah Stormont

Date Issued
2/27/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed

Kristin Keck
DCF-FOS0294-E (R.05/2011)

3-10-24