

Date Correction Plan Due 8/27/2025	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 Grandmas House Cc And Early Dev Ctr		Provider Number / Facility ID Number 5000586035 / 003 - 2006437		
Address - Facility (Street, City, State, Zip Code) 6039 S Howell Ave Milwaukee WI 532076233		Telephone Number 414-522-3472	Date - Regulation Visit 8/7/2025	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.04(6)(a)6m. Child Record - Immunization History Description: Child # 1, and #3 did not have documentation of immunizations on file.	updating files	9/15/25	
2	251.04(6)(a)8.a. Child Record - Physical Exam - Under 2 Description: Child #3 did not have a current health report on file.	updating files	9/15/25	

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3	251.05(2)(a)3.a. Staff Record - Physical Examination Description: Staff B did not have a physical/TB test on file. Repeat violation: Previously cited on 5/3/2024	Dr Appt Aug 25, Will be done at that time	8/25/25	
4	251.05(3)(b) Abusive Head Trauma Prevention Training Description: Staff A, B, and C did not have current Child Abuse and Neglect training in staff file.	training being reviewed with registry	8/27/25	
5	251.05(3)(c) Cardiopulmonary Resuscitation Training Description: Staff A and Staff B did not have documentation of current CPR training in staff file.	CPR # setup for Sept 15, 2025	9/15/25	
6	251.055(1)(f) Child Tracking Procedure Description: The child tracking in the toddler room was not completed.	tracking sheets posted	9/1/25	

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7 251.06(2)(gm) Premises - Well Drained, Clean, In Good Repair Description: There was litter in the outdoor play space.	litter from street (small bag) picked up while licenso r was here.	8/7/25	
8 251.07(5)(a)5.a. Menus - Post Description: There was no menu posted in the kitchen.	posted	8/7/25	
9 251.08(4)(b) Driver Orientation - Requirement Description: There was no annual driver training completed for staff A.	Driver training is done before transporting starts in the Fall. We do not transport in Summer	9/1/25	
10 251.09(1)(c) Infant & Toddler - Documenting Changes In Development Description: The intake under two forms were not updated every three months as required.	updating now	9/15/25	

NAME - Agency Worker
Joel Marquez, Mary Schultek

Date Issued
8/13/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed
8/13/25