

Date Correction Plan Due 9/11/2024	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)(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 Ms Mary's Learning Center		Provider Number / Facility ID Number 2000587192 / 002 - 2006251		
Address - Facility (Street, City, State, Zip Code) 8050 N Port Washington Rd Fox Point WI 532172645		Telephone Number 414-875-0408	Date - Regulation Visit 8/6/2024	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.04(6)(a)6m. Child Record - Immunization History Description: Children 4 and 5 did not have documentation of immunizations on file.	Will check Children Files Monthly to see what is needed.	9/15/24	
2	251.05(2)(a)3.a. Staff Record - Physical Examination Description: Staff A and B did not have documentation of a physical exam on file completed either one year prior or 30 days after beginning the position. Repeat violation: Previously cited on 9/7/2023, 6/13/2023	Will check Staff Files Monthly to see what is need.	10/1/24	

Name - Certified Operator / Licensed Center

Provider Number / Facility ID Number

Ms Mary's Learning Center

2000587192 / 002 - 2006251

Address - Facility (Street, City, State, Zip Code)

Telephone Number

Date - Regulation Visit

8050 N Port Washington Rd Fox Point WI 532172645

414-875-0408

8/6/2024

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3	251.05(3)(c) Cardiopulmonary Resuscitation Training Description: Staff A and D were missing documentation of current CPR training. Repeat violation: Previously cited on 4/11/2023	Will schedule for CPR guy to come out right away	10/1/24	
4	251.05(4)(c)9. Continuing Education - Documentation Of 12 Month Period Description: Staff C did not have documentation of 15 hours of continuing education completed in 2023.	Will use form to start documenting hours.	9/15/24	
5	251.06(11)(bm)3. Outdoor Play Equipment - Construction, Condition Description: Broken equipment was observed in the outdoor play space.	Will check yard after use of the play toys	8/20/24	

Name - Certified Operator / Licensed Center		Provider Number / Facility ID Number		
Ms Mary's Learning Center		2000587192 / 002 - 2006251		
Address - Facility (Street, City, State, Zip Code)		Telephone Number	Date - Regulation Visit	
8050 N Port Washington Rd Fox Point WI 532172645		414-875-0408	8/6/2024	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
6	<p>251.06(2)(d) Access To Materials Potentially Harmful To Children</p> <p>Description: Roach and ant killer was accessible in an unlatched cupboard under the sink in the kitchen.</p> <p>Included on a Warning Letter April 20, 2023.</p> <p>Repeat violation: Previously cited on 4/11/2023</p>	<p>will keep gates closed and add lock on Cabinets</p>	9/15/24	
7	<p>251.06(2)(n) Garbage Containers - Construction & Disposal Schedule</p> <p>Description: The garbage can in the three year old room did not have a lid on it. Food refuse was observed in the garbage can.</p> <p>Repeat violation: Previously cited on 6/13/2023</p>	<p>will use garbage can with lids in each room.</p>	9/15/24	
8	<p>251.06(4)(j)2. Fire Alarms & Smoke Detectors - Maintenance</p> <p>Description: A chirping smoke detector was heard in the infant nap room indicating the battery needed to be changed.</p> <p>Repeat violation: Previously cited on 6/13/2023, 4/11/2023</p>	<p>Will change batteries every sixty days</p>	9/15/24	

Name - Certified Operator / Licensed Center Ms Mary's Learning Center		Provider Number / Facility ID Number 2000587192 / 002 - 2006251	
Address - Facility (Street, City, State, Zip Code) 8050 N Port Washington Rd Fox Point WI 532172645		Telephone Number 414-875-0408	Date - Regulation Visit 8/6/2024
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date
9	251.06(9)(d)2.a. Food Storage - Dry Food Description: Two opened packages of cereal were not stored in food grade containers and labeled. Repeat violation: Previously cited on 9/7/2023, 4/11/2023	Will purchase containers and label them	9/15/24
10	251.07(5)(a)5.a. Menus - Post Description: Current menus were not posted in the kitchen.	Will post current Menus on kitchen cabinet	8/6/24

NAME - Agency Worker
Cindy Matuszak

Date Issued
8/28/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed

DCF-F/CFS0294-E (R.06/2011)

9/9/24