

Date Correction Plan Due
3/17/2025

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)(f) and (3)(d), DCF 251.04(2)(L) and (3)(f), DCF 252.4(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

Baby Fever Childcare Llc

Provider Number / Facility ID Number
9000590859 / 001 - 2005989

Address - Facility (Street, City, State, Zip Code)
7625 W Mill Rd Milwaukee WI 532181443

Telephone Number
414-236-5028

Date - Regulation Visit
2/11/2025

Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1 251.05(2)(a)3.a. Staff Record - Physical Examination Description: There was no staff health report on file for Staff B.	Appointment scheduled for physical Nur. 30.05	3/30/25	
2 251.05(2)(a)6. Staff Record - Days & Hours Worked Description: During the licensing visit, the driver was signed in but was not present.	Speak w/ driver about making sure we clocks out upon leaving	2/11/25	

Name - Certified Operator / Licensed Center
 Baby Fever Childcare LLC

Provider Number / Facility ID Number
 9000590869 / 001 - 2005989

Address - Facility (Street, City, State, Zip Code)
 7625 W Mill Rd Milwaukee WI 53218143

Telephone Number
 414-236-5028

Date - Regulation Visit
 2/11/2025

Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3 251.05(2)(a)8. Staff Record - Orientation Description: There was no documentation of an orientation completion for Staff A or Staff B.	Complete Staff Orientation	2/11/2025	
4 251.05(3)(cm) Child Abuse & Neglect - Biennial Training Description: The Child Abuse & Neglect training on file for Staff A expired in November 2024. There was no Child Abuse & Neglect training on file for Staff B.	Have all staff update & complete Child Abuse & Neglect training	2/11/25	
5 251.08(4)(b) Driver Orientation - Requirement Description: There was no annual driver training done within the last year for Staff A.	Complete Annual staff driver records	2/11/25	
6 251.08(4)(c)1. Driver Record - Obtain & Review Description: There was no updated driver record on file for Staff A; the one on file was done in November 2023.	update drivers records Annually	2/11/25	

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Date - Regulation Visit
2/11/2025

Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date

NAME - Agency Worker
Katrina Tarantino, Kristin Keck

Date Issued
3/3/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee



Date Signed

3/11/2025