

Date Correction Plan Due
4/30/2026

NONCOMPLIANCE STATEMENT AND CORRECTION PLAN

STATE OF WISCONSIN

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)(c), DCF 251.04(2)(L) and (3)(f), DCF 252.41(1)(a) 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 notice of the sanction and / or penalty and your appeal rights.

Name - Certified Operator / Licensed Center

Bridging Bridges Child Care

Provider Number / Facility ID Number

2000591142 / 001 - 2006303

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

584 N 60th St Milwaukee WI 532182428

Telephone Number

414-573-2032

Date - Regulation Visit

4/8/2026

Rule/Statute Number
Noncompliance Statement

Correction Plan

Expected
Completion Date

Verification
Date

250.04(6)(a)1.e.

Child Record - Enrollment Information - Other Emergency Contact

Description: Child 2 did not have documentation of an emergency contact person, other than the parent, on file.

Repeat violation: Previously cited on 4/23/2025

New form was filled out to include emergency contact person other than parents.

4-12-26

250.04(6)(a)4.a.

Child Record - Physical Exam - Under 2

Description: Child 2, under two years of age, did not have documentation of a health exam on file.

Missing documentation currently. Mom scheduled appointment for new copy.

6-3-26

Operator / Licensed Center

Child Care

Address (Street, City, State, Zip Code)
Th St Milwaukee WI 532182428

Rule/Statute Number
Noncompliance Statement

250.04(6)(a)4.b.
Child Record - Physical Exam - Over 2, Under 5
Description: Child 1 did not have documentation of a health exam on file.

Telephone Number
414-573-2032

Correction Plan

Awaiting documentation.
Mom says she requested it. Will send verification when I receive it.

Expected Completion Date

5-5-26

4
250.04(6)(a)4m.
Child Record - Immunization History Compliance
Description: Child 1 did not have documentation of immunizations on file.

Waiting for records although parent signed a waiver.

5-10-26

5
250.06(2)(n)1.b.
Radon - Testing, Current Providers
Description: The provider did not have documentation of current radon testing results available, when the most recent radon tests results were completed March 30, 2024. Radon test results are required every two years.

waiting for results of test. Test sent in 4-25-26

5-11-26

6
250.06(3)(b)
Emergency Plans - Practice
Description: Fire drills were not documented in March 2026

Reminder set for the 15th of every month

4-15-26

ilding Bridges Child Care

2000591142 / 001 - 2008303

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

94 N 60Th St Milwaukee WI 532182428

Telephone Number

414-573-2032

Date - Regulation Visit

4/8/2026

Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
<p>250.04(6)(a)4.b. Child Record - Physical Exam - Over 2, Under 5</p> <p>Description: Child 1 did not have documentation of a health exam on file.</p>	<p>Awaiting documentation. Mom says she requested it. Will send verification when I receive it.</p>	<p>5-5-26</p>	
<p>250.04(6)(a)4m. Child Record - Immunization History Compliance</p> <p>Description: Child 1 did not have documentation of immunizations on file.</p>			
<p>250.06(2)(n)1.b. Radon - Testing, Current Providers</p> <p>Description: The provider did not have documentation of current radon testing results available, when the most recent radon tests results were completed March 30, 2024. Radon test results are required every two years.</p>	<p>waiting for results of test. Test sent in 4-25-26</p>	<p>5-11-26</p>	
<p>250.06(3)(b) Emergency Plans - Practice</p> <p>Description: Fire drills were not documented in March 2026.</p>	<p>Reminder set for the 15th of every month</p>	<p>4-15-26</p>	

ed Operator / Licensed Center

lges Child Care

Provider Number / Facility ID Number

2000591142 / 001 - 2008303

ility (Street, City, State, Zip Code)

Th St Milwaukee WI 532182428

Telephone Number
414-573-2032

Date - Regulation Visit
4/8/2026

Rule/Statute Number
Noncompliance Statement

Correction Plan

Expected
Completion Date

Verification
Date

- Agency Worker
Matuszak

Date Issued
4/16/2026

Date Signed
4-27-26

ATURE - Certified Operator or Designee / Licensee or Designee