

Date Correction Plan Due  
6/2/2026

**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 252.4(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

Provider Number / Facility ID Number

Heaven's Playground Child Care

7000573877 / 002 - 1011667

Address - Facility (Street, City, State, Zip Code)  
4221 N 35Th St Milwaukee WI 532161709

Telephone Number  
414-449-9710

Date - Regulation Visit  
5/13/2026

Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1 251.04(6)(a)6. <b>Child Record - Health History</b>  Description: Child 2 and Child 5 have incomplete health history on file. Child 2 who has a food allergy does not have triggers and signs/symptoms. Child 5 has a known medical condition which is not listed, along with triggers, signs/symptoms, steps to be taken, when to contact parent and when to get emergency treatment.  Repeat violation: Previously cited on 11/19/2024	Child #2 NDM has completed health history Child #2 NDM has also completed the triggers, signs/symptoms Child #5 has been updated listel concerning the known meds and also listed triggers, signs/ symptoms. Mom already took steps to be taken and when to contact parents/emergency.	5-15-2024 5-15-2024 5-15-2024	
2 251.04(6)(a)8.a. <b>Child Record - Physical Exam - Under 2</b>  Description: Child 1 does not have a physical within the last 6 months on file. The last physical on file is dated 10/25/25.	MDM has called, and scheduled physical exam for child #1	7-20-2026	

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<p>3</p> <p>251.05(2)(a)6. <b>Staff Record - Days &amp; Hours Worked</b></p> <p>Description: Staff are not consistently documenting their days and hours worked and in which classroom when used to meet ratio.</p> <p>On 5/11/26 and 5/12/26 there are no staff hours listed for the Eagle Room. On 5/12/26 there are no staff hours listed for the Cub room. On 5/13/26 the staff member working the in classroom at the time of the visit is not signed in. On 5/11/26 the staff hours for the Cub room is 7am to 3:30pm however there are two children in care after 3:30pm. On 5/12/26 there are no staff hours for the Cub room.</p>	<p>All staff were done Day hours worked on the Daily Attendance second page, there was a brief meeting held on the proper way of signing in/out of the Attendance sheet, and page by Mrs Jackson After cub room is closed the two children are then transfer to school age group, we are asking another Attendance sheet for the cub room.</p>	5-18-2026	
<p>4</p> <p>251.06(2)(i) <b>Deteriorating Paint</b></p> <p>Description: There is flaking/deteriorating paint on the cement wall in the outdoor play space, accessible to children.</p>	<p>Flaking paint has been scraped to the ground &amp; repainted</p>	5-23-2026	
<p>5</p> <p>251.07(6)(dm)3.c <b>Medical Log - Medication Administration</b></p> <p>Description: A child was given an inhaler on 2/4/26 which is not documented in medical log book.</p>	<p>there was a brief meeting reminding staff about the accuracy of clear entries into the medical log book. Reminding all med admin staff must also go in medication Log book</p>	5-18-2026	

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6 251.07(6)(f)1.a. <b>Medication Administration - Parent Authorization</b> Description: A medication authorization form for an inhaler and Tylenol does not have an end date.	the medication authorization form for the inhaler has been end date corrected by nurse tylenol has been end date corrected by nurse	5-15-2026	
7 251.07(6)(f)1.b. <b>Medication Administration - Containers &amp; Labeling</b> Description: An inhaler for an enrolled child is not in its original container.	mom has envelope a new inhaler and will send the new inhaler in its original container and the carton will please in a container	6-8-2026	
8 251.08(5)(b) <b>Vehicle Inspection Report</b> Description: The vehicle inspection for the 2014 Chevrolet Express was not conducted in the last 12 months.	that has been updated to a copy has been sent to DCF.	5-21-2026	

NAME - Agency Worker  
Sara Cooney, Kristin Lange

Date Issued  
5/19/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed

DCF.F.CFS0294-R.06/2011  


5-22-2026