

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

Marquette University Child Care Ctr

Provider Number / Facility ID Number

8000560348 / 001 - 225805

Address - Facility (Street, City, State, Zip Code)
500 N 19Th St Milwaukee WI 532332123

Telephone Number
414-288-5655

Date - Regulation Visit
2/5/2024

Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
<p>1</p> <p>Potential Source Of Harm On Premises</p> <p>Description: There was a loose cord hanging down from the wall in the Tree Room, which was accessible to children.</p> <p>There was a loose plastic bag underneath the changing table in the boy's bathroom, which was accessible to children.</p>	<p>Staff will remove the cord that is accessible in the tree room.</p> <p>Staff was reminded to check under the table for loose items accessible to children And move to a higher level.</p>	<p>02/09/2024</p> <p>02/09/2024</p>	
<p>2</p> <p>251.06(2)(d) Access To Materials Potentially Harmful To Children</p> <p>Description: There was a bag of wipes underneath the changing table in the boy's bathroom, which was accessible to children. The label on the wipes state to keep out of reach of children.</p> <p>Repeat violation : Previously cited on 1/26/2023</p>	<p>Staff will be sure to keep wipes out of the reach of the children.</p>	<p>02/09/2024</p>	

Name - Certified Operator / Licensed Center
 Marquette University Child Care Ctr

Address - Facility (Street, City, State, Zip Code)
 500 N 19Th St Milwaukee WI 532332123

Telephone Number
 414-288-5655

Provider Number / Facility ID Number
 8000560348 / 001 - 225805

Date - Regulation Visit
 2/5/2024

Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3 251.07(6)(dm)4. Medical Log - Reviewing Injury Records Description: Medical log books were not reviewed within the past 6 months.	Medical log books will be reviewed.	02/29/2024	
4 251.09(1)(c) Infant & Toddler - Documenting Changes In Development Description: There were no updates documented within the past 3 months on one child's intake form.	Classroom intake forms will be updated every 3 months.	02/09/2024	

NAME - Agency Worker
 Katrina Taranino, Sarah Stormont

Date Issued

SIGNATURE - Certified Operator or Designee / Licensee or Designee



Date Signed

2-7-24