

NONCOMPLIANCE STATEMENT AND CORRECTION PLAN

TO FILE A COMPLAINT CALL
262-448-7800

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 **Provider Number / Facility ID Number**
 La Pre Enterprise Dba La Pre Academy 5000579525 / 004 - 1012615

Address - Facility (Street, City, State, Zip Code) **Telephone Number** **Date - Regulation Visit**
 2711 19Th St Racine WI 534032314 262-619-3490 3/17/2026

#	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.04(6)(a)1. Child Record - Enrollment Information Description: Child 2 had incomplete authorized persons and emergency contact information available for review during the monitoring visit.	We contacted the parent and obtained all missing emergency contacts and authorized pick up persons. The updated information is now complete and filed. Files will be reviewed every 6 months.	3/31/2026	
	251.04(6)(a)6. Child Record - Health History Description: Child 1 had an incomplete health history available for review during the monitoring visit.	Child 1's health history has been updated and completed. All health histories will continue to be reviewed and updated every 6 months.	3/31/2026	

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Address - Facility (Street, City, State, Zip Code) 2711 19Th St Racine WI 534032314		262-619-3490	3/17/2026	
Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date	
<p>3 251.04(6)(a)8.a. Child Record - Physical Exam - Under 2</p> <p>Description: Child 2 did not have documentation on file of an updated health examination at least every 6 months.</p> <p>Repeat violation: Previously cited on 3/20/2024</p>	<p>Child 2's updated physical exam has been completed and placed in the file. All children under age 2 will have updated physical exams every 6 months.</p>	3/31/2026		
<p>4 251.05(2)(a)1. Staff Record - Personal Information</p> <p>Description: Staff D did not have a Staff Record available for review during the monitoring visit.</p>	<p>Staff D's full staff record will be completed and Filed by 4/20. All staff files are being reviewed to ensure all required documents are included.</p>	3/31/2026		
<p>5 251.05(2)(a)6. Staff Record - Days & Hours Worked</p> <p>Description: The Staff did not have documentation of days/hours worked, and in which classroom, when they are included in the staff-to-child ratios.</p> <p>Repeat violation: Previously cited on 8/20/2025</p>	<p>A New weekly sign-in sheet has been created and placed in a binder. Staff sign daily, and the sheet is filed every Friday Night to document days worked, hours worked, and classroom placement.</p>	3-31-2026		
<p>251.05(4)(a) Staff Orientation - Develop, Implement, Document</p> <p>Description: Staff A had an incomplete Staff Orientation available for review at the time of the monitoring visit.</p>	<p>Staff A will initial or sign all required orientation sections. All staff orientation files are being reviewed to ensure full completion and documentation.</p>	4-10-2026		

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La Pre Enterprise DBA La Pre Academy		5000579625 / 004 - 1012615	
Address - Facility (Street, City, State, Zip Code)		Telephone Number	Date - Regulation Visit
2711 15th St Racine WI 534032314		262-619-3490	3/17/2025
Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
7 251.055(2)(a) Group Size - Maximum Description: Group size maximum was exceeded in the infant room during the monitoring visit. There were five children, 1 and under, in the room with one teacher.	Staffing has been adjusted to ensure proper ratios at all times. Staff have been reminded of Infant room group size requirements and will follow ratio rules consistently.	3/31/2026	
8 251.06(9)(c)1. Safe Food Description: Baby oatmeal was dated upon receiving, not when opened. Manufacturers label reads to use within one month of date of opening.	All Food items will now be dated from the day they are opened. Items will be discarded after 30 days. The same process will be followed for all grocery items requiring dating.	3/31/2026	
9 251.07(6)(f)1.a. Medication Administration - Parent Authorization Description: Medication authorizations lacked dates for administration at the time of the monitoring visit.	All medication authorization forms have been updated with correct dates. Medication forms will be checked every 6 months to ensure accuracy and compliance.	3/31/2026	
10 251.07(6)(f)5. Medication Administration - As Labeled & Authorized Description: Neosporin was applied on 3.9.26 to an injury on a child in care without an authorization.	Staff have been retrained to follow medication rules. A Permission form will be completed and signed by parents before any medication is applied.	4/1/2026	

La Pre Enterprise Dba La Pre Academy		Provider Number / Facility ID Number 800879825 / 004 - 1012815	
Address - Facility (Street, City, State, Zip Code) 2711 19Th St Racine WI 534032314		Telephone Number 262-815-3495	Date - Regulation Visit 3/17/2025
Rule/Statute Number Noncompliance Statement		Correction Plan	
11	251.08(2) Permission & Emergency Information Description: Transportation forms were incomplete for all children reviewed during the monitoring visit.	Missing information has been added to the transportation forms. updated transportation forms will be sent out to all families for completion and returned for filing	Expected Completion Date 4/15/2026 Verification Date

NAME - Agency Worker
Lindi Sabljak, Rhonda Brueggemann

Date Issued
3/18/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed