

Date Correction Plan Due 2/26/2024	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 Lil' Cubs Family Child Care		Provider Number / Facility ID Number 1000589601 / 001 - 2004340		
Address - Facility (Street, City, State, Zip Code) 8402 66Th St Kenosha WI 531428244		Telephone Number 262-455-6696	Date - Regulation Visit 2/1/2024	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	
1	250.04(6)(a)4.a. Child Record - Physical Exam - Under 2 Description: Child #3 did not have a current health report on file.	I text the mom and she make appointment and bring.	2-9-24	2-12-24
2	250.04(6)(a)4m. Child Record - Immunization History Compliance Description: Child #1 did not have documentation of immunizations on file.	The mother bring the next day	2-2-24	2-2-24

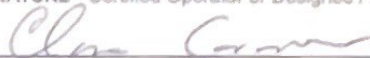
Name - Certified Operator / Licensed Center		Provider Number / Facility ID Number		
Lil' Cubs Family Child Care		1000589601 / 001 - 2004340		
Address - Facility (Street, City, State, Zip Code) 8402 66Th St Kenosha WI 531428244		Telephone Number 262-455-6696	Date - Regulation Visit 2/1/2024	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3	250.04(6)(b) Current, Accurate Daily Attendance Record Description: There were six children in care and only 4 children were signed in. Repeat violation: Previously cited on 1/27/2023	signed in signed in immediately	2-1-24	2-1-24
4	250.06(9)(c) Safe Food Description: The center had cans of formula for children that was not dated to ensure no spoilage.	the date was set immediately	2-1-24	2-1-24

NAME - Agency Worker
Joel Marquez

Date Issued
2/12/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed



2-19-2024