

Date Correction Plan Due 7/1/2024	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 262-446-7800
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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 Learning Institute Mke Llc		Provider Number / Facility ID Number 1000591091 / 001 - 2006256		
Address - Facility (Street, City, State, Zip Code) 4730 N Teutonia Ave Milwaukee WI 532096231		Telephone Number 414-391-9354	Date - Regulation Visit 6/10/2024	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.05(2)(a)1. Staff Record - Personal Information Description: Staff A and B do not have all of the required personal information on file, including emergency contact information.	STAFF A HAS BEEN LAID OFF UNTIL HER TRAINING BEEN COMPLETED. I DO NOT HAVE STAFF B. STAFF E HAS BEEN LAID OFF UNTIL ALL REQUIRED TRAINING IS COMPLETED.	06/11/2024	
2	251.05(2)(a)2. Staff Record - Completed Background Check Description: Staff E, observed working with children during the time of the licensing visit, does not have documentation of a completed child care background check in the staff record or online, including they are eligible to work in a child care program. **A background check was verified as completed via online on 6/12/24**	STAFF E BACKGROUND CHECK WAS COMPLETED ON 06/12/2024	06/12/2023	

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3	<p>251.05(2)(a)3.a. Staff Record - Physical Examination</p> <p>Description: Staff A and C do not have documentation of a completed physical examination within 30 days after staff was hired.</p>	<p>STAFF A WAS LAID OFF UPON RETURNING SHE WILL NEED TO HAVE PHYSICAL EXAM COMPLETED BEFORE RETURNING.</p> <p>STAFF C PROVIDED A COPY OF HER PHYSICAL EXAM AND WAS UPDATED IN HER FILE.</p>	06/12/2024	
4	<p>251.05(2)(a)6. Staff Record - Days & Hours Worked</p> <p>Description: Staff hours worked were documented but it does not include what room staff is working in when used to meet staff-to-child ratio.</p>	<p>ALL STAFF AND ADMINISTRATOR ARE REQUIRED TO USE THE STAFF TO CHILD RATIO FORM TO TRACK HOURS AND RATIOS PER ROOM.</p>	06/12/2024	
5	<p>251.05(3)(b) Abusive Head Trauma Prevention Training</p> <p>Description: Staff E does not have documentation of completing training in abusive head trauma and appropriate ways to manage crying, fussing, or distraught children prior to beginning to work with children under 5 years of age.</p> <p>Repeat violation: Previously cited on 6/12/2023</p>	<p>STAFF E IS CURRENTLY IN TRAINING WITH ROSS WISCONSIN WORKS PROGRAM ALL TRAINING IS COVERED BY ROSS W-2 PROGRAM</p>	ONGOING	

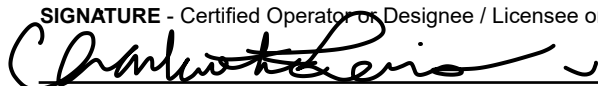
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6	<p>251.05(3)(cm) Child Abuse & Neglect - Biennial Training</p> <p>Description: Staff C and Staff E, present and working with children during the licensing visit, lacked documentation of Child abuse and neglect training.</p> <p>Documentation of child abuse and neglect training was not on file for Staff A.</p> <p>Repeat violation: Previously cited on 6/12/2023</p>	<p>STAFF C PROVIDED TRAINING DOCUMENTATION ON 6/12/2024. FILE HAS BEEN UPDATED</p> <p>STAFF E IS CURRENTLY IN TRAINING WITH ROSS WISCONSIN WORKS PROGRAM ALL TRAINING IS COVERED BY ROSS W-2 PROGRAM.</p> <p>THIS TRAINING WILL BE VERIFIED CLOSELY UPON HIRING.</p>	6/12/2024	
7	<p>251.05(3)(gr)3.a. Meal Prep Personnel - Training</p> <p>Description: Staff F, identified as a meal prep personnel, does not have documentation of completing at least 4 hours of training in kitchen sanitation, food handling, and nutrition.</p>	<p>STAFF F CURRENTLY IN TRAINING WITH EARLY EDUCATION STATION CERTIFICATE WILL BE EMAIL TO LICENSOR ONCE COMPLETED.</p>	ONGOING	
8	<p>251.05(4)(a) Staff Orientation - Develop, Implement, Document</p> <p>Description: Staff A does not have documentation of a written orientation (staff orientation checklist) on file.</p>	<p>STAFF A ORIENTATION CHECKLIST WAS COMPLETED AND ADD TO STAFF A FILE</p>	06/12/2024	

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9	251.06(11)(b)5. Outdoor Play Space - Energy-Absorbing Surfaces Description: In the outdoor play space, equipment over 4 feet tall did not have energy absorbing material at least 9 inches deep.	OUTDOOR PLAY AREA 3 YARDS OF MULCH WAS INSTALLED UPTO 9 INCHES DEEP AND MEASURED. PICTURES WILL BE SENT ALONG WITH A RECEIPT OF PURCHASE.	06/27/24	
10	251.07(6)(dm)2. Medical Log - Pages & Entries Description: Entries in the medical log book are not initialed or signed by the person making the entry. Lines were skipped in the medical log book.	REVIEW AND TRAINED STAFF ON HOW TO NOT TO SKIP LINES AND TO ADD A SIGNATURE FROM THE PERSON WHO MADE THE ENTRY.	06/10/2024	
11	251.07(6)(dm)4. Medical Log - Reviewing Injury Records Description: The medical log book was not reviewed within the last six months. **This was corrected during the monitoring visit**	GOING FORWARD THE MEDICAL LOG BOOK WILL BE REVIEWED EVERY 6 MONTHS WITH THE ADMINISTRATOR SIGNATURE.	06/10/2024	

NAME - Agency Worker
Kristin Keck, Daniel Noel

Date Issued
6/17/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee



Date Signed
06/28/2024