

Date Correction Plan Due 6/3/2026	<b>NONCOMPLIANCE STATEMENT AND CORRECTION PLAN</b>	TO FILE A COMPLAINT CALL 608-422-6765
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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.

<b>Name - Certified Operator / Licensed Center</b>		<b>Provider Number / Facility ID Number</b>	
Anthony's Bilingual Preschool		6000587866 / 002 - 2004162	
<b>Address - Facility (Street, City, State, Zip Code)</b>		<b>Telephone Number</b>	<b>Date - Regulation Visit</b>
3702 Susan Ln Madison WI 537042014		608-446-6142	5/19/2026
	<b>Rule/Statute Number Noncompliance Statement</b>	<b>Correction Plan</b>	<b>Expected Completion Date</b>
1	<p>250.05(3)(g) <b>Provider Training - Abusive Head Trauma</b></p> <p>Description: A certificate of completion for abusive head trauma was not on file prior to a provider working with children.</p> <p>Un proveedor no tenia un certificado de finalización sobre traumatismo craneal por maltrato antes de que el personal comenzara a trabajar con niños.</p>	<p><i>El proveedor tiene y tenia su certificado del entrenamiento de traumatismo craneal por maltrato. Ya que no lo habia imprimido.</i></p>	5-19-2026

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Address - Facility (Street, City, State, Zip Code) 3702 Susan Ln Madison WI 537042014		Telephone Number 608-446-6142	Date - Regulation Visit 5/19/2026
Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
<p>2 250.06(11)(b)4. <b>Outdoor Play Space - Enclosure</b></p> <p>Description: The outdoor play enclosure did not meet the 4 feet of height in all areas.</p> <p>La cerca de juego al aire libre no cumplía con los 4 pies de altura en todas las áreas.</p> <p>Repeat violation: Previously cited on 7/16/2025</p>	<p>La cerca se arregló nuevamente!</p> <p>La cerca de juego ya fue arreglada. Mas sin en cambio los niños trepan y se volvió a bajar.</p>	<p>7-18-25</p> <p>6-3-2026</p>	
<p>3 250.06(2)(c) <b>Access To Materials Potentially Harmful To Children</b></p> <p>Description: Materials labeled keep out of the reach of children were accessible.</p> <p>Materiales etiquetados con la indicación mantener fuera del alcance de los niños estaban accesibles.</p>	<p>It has been put away. The hand lotion was in a top shelf in the kitchen.</p> <p>No había materiales "harmful to children". Solo una lotion para manos. En la cocina.</p>	<p>5-19-2026</p>	
<p>4 250.06(3)(a) <b>Written Emergency Plans</b></p> <p>Description: The center was not practicing appropriate actions in the event of a tornado when provider described using a tornado shelter area was near exit door and window.</p> <p>El centro no estaba llevando a cabo las acciones apropiadas en caso de tornado, dado que el proveedor describió que el área designada como refugio contra tornados se encontraba cerca de una puerta de salida y de una ventana.</p>	<p>El centro esta haciendo los practicas del tornado lejos de las ventanas y de la puerta.</p>	<p>5-19-2026</p>	

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5	<p>250.07(3)(a)2. <b>Play Equipment - Safe &amp; Sturdy</b></p> <p>Description: Toy trucks in the outdoor play space were not in good condition when they had rusting and peeling paint.</p> <p>Los camiones de juguete en el espacio de juego al aire libre no se encontraban en buen estado, ya que presentaban óxido y con pintura descascarada.</p>	<p>Los camiones del espacio de juego al aire libre han sido reparados.</p>	5-19-26	
6	<p>250.07(6)(f)3. <b>Medication - Storage</b></p> <p>Description: Medication being kept at the center was accessible to children.</p> <p>Un medicamento guardado en el centro esta disponible a los niños.</p>	<p>El medicamento estaba en el cubículo de un niño dentro de una bolsa. Los papas lo llevaron a casa. El medicamento estaba vacío y los papas se les había olvidado llevar la botella a casa.</p>	5-19-2026	
7	<p>250.07(6)(f)5. <b>Current Authorizations For Medications On Premises</b></p> <p>Description: Center did not have current parent authorization during licensing visit for a medication kept on premise.</p> <p>El centro no tenía una autorización vigente de los padres, durante la visita de licencia, para un medicamento que se mantenía en las instalaciones.</p>	<p>El centro tenía una autorización vigente manebada por corre electrónico, se le mandó inmediatamente a licencia con fecha especificada.</p>	5-19-2026	

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<b>Noncompliance Statement</b>			

**NAME - Agency Worker**  
Michelle Garcia, Luzdarys Marquez

**Date Issued**  
5/20/2026

**SIGNATURE - Certified Operator or Designee / Licensee or Designee**

**Date Signed**

*Michelle Garcia*

5-27-2026