

NONCOMPLIANCE STATEMENT AND CORRECTION PLAN

Date Correction Plan Due
6/27/2024

TO FILE A COMPLAINT CALL

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
7000589497 / 001

Cookies Playhouse Lrng Center

Address - Facility (Street, City, State, Zip Code)
5701 N 61st St Milwaukee WI 532182032

Telephone Number
414-484-2631

Date - Regulation Visit
6/12/2024

Rule/Statute Number
Noncompliance Statement

Correction Plan

Expected Completion Date
Verification Date

1

202.08(1)(b)3.d.

Each Certified Operator And Each Provider Shall Comply With S. 48.651 And Obtain And Recertify As Necessary To Maintain Current Certification In Infant And Child Cardiopulmonary Resuscitation (Cpr). The Cpr Training Must Result In A Certificate Of Completion. If The Certificate Of Completion Does Not Have A Date Specifying The Length Of Time For Which It Is Valid, The Cpr Training Must Be Renewed Every Year.

Print out providers
2nd cpr certificate

06/21/24

Description: The CPR training of the 2nd provider has expired.

Name - Certified Operator / Licensed Center		Provider Number / Facility ID Number	
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5701 N 61st St Milwaukee WI 532182032		414-484-2631	6/12/2024
Rule/Statute Number	Noncompliance Statement	Correction Plan	Expected Completion Date
			Verification Date
2	<p>202.08(12)(c) The Certified Child Care Operator Shall Be In Ongoing Communication With A Child's Parent Or Ensure That A Substitute Child Care Provider Is In Ongoing Communication With A Child's Parent By Developing A Written Contract That Specifies The Charge For Child Care And The Expected Frequency Of Payment For The Service. The Contract Shall Be Signed By The Operator And A Parent Or Guardian.</p> <p>Description: There is no contract on file for the family of child #5 on the Child Record Checklist.</p>	<p>We will have the parent turn in another contract (well sign). It was misplaced we will do an audit on all files to ensure compliance</p>	06/28/24
3	<p>202.08(12)(d) The Certified Child Care Operator Shall Be In Ongoing Communication With A Child's Parent Or Ensure That A Substitute Child Care Provider Is In Ongoing Communication With A Child's Parent By Making A Copy Of The Applicable Certification Standards Available To Each Parent</p> <p>Description: There was no documentation on file that the family of child #5 has been notified regarding certification standards.</p>	<p>We will have parent sign a introduction to the daycare, so that we are in compliance</p>	06/21/24

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5701 N 61st St Milwaukee WI 532182032		414-484-2631	6/12/2024
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4	<p>202.08(12)(i) The Certified Child Care Operator Shall Be In Ongoing Communication With A Child's Parent Or Ensure That A Substitute Child Care Provider Is In Ongoing Communication With A Child's Parent By Informing The Parent In Writing Whether The Premises And Child Care Business Are Covered By A Child Care Liability Insurance Policy.</p> <p>Description: There was no documentation of file that the family of child #5 on the Child Record Checklist had been notified regarding liability insurance coverage.</p>	<p>Will have parent sign all forms to ensure they are notified on all policies on insurance for the daycare</p>	06/21/24
5	<p>202.08(4)(a)1. For Each Child Under 2 Years Of Age, A Report Of A Physical Examination Conducted Not More Than 6 Months Prior To Nor Later Than 3 Months After The Child Is Admitted, And A Follow-Up Health Examination At Least Once Every 6 Months Thereafter.</p> <p>Description: The health report for child #4 of the Child Record Checklist has expired.</p>	<p>Sent out a new form for child #4. MD states we will have in 2 weeks</p>	06/28/24

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Address - Facility (Street, City, State, Zip Code) 5701 N 61st St Milwaukee WI 532182032		Telephone Number 414-484-2631	
Rule/Statute Number 202.08(5)(i)		Date - Regulation Visit 6/12/2024	
Noncompliance Statement <p>The Certified Child Care Operator Shall Keep Current And Accurate Written Records Of The Daily Hours Of Attendance Of Each Child In Care, Including The Actual Arrival And Departure Time Times For Each Child. If Children Are Transported To Or From The Premises Or School By The Operator Or Another Provider On Behalf Of The Operator, The Daily Attendance Record Shall Include The Actual Time The Child Was Picked Up Or Dropped Off.</p> <p>Description: The 2nd provider was not signed out of care on 6/10/2024, into or out of care on 6/11/2024 or into care on 6/12/2024.</p>		Correction Plan <p>Provider #2 has signed out on 06/10/24, 06/11/24 and 06/12/24. We will practice to continue to sign in and out daily.</p>	
		Expected Completion Date 06/14/24	
		Verification Date	

NAME - Agency Worker
 Jean Houston

Date Issued
 6/13/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed
 06/21/24