

<b>Date Correction Plan Due</b> 9/2/2019	<b>NONCOMPLIANCE STATEMENT AND CORRECTION PLAN</b>	<b>TO FILE A COMPLAINT CALL</b> 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.

<b>Name - Certified Operator / Licensed Center</b> Little Nuggets Learning Center Llc	<b>Provider Number / Facility ID Number</b> 4000589764 / 001 - 2004408
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<b>Address - Facility (Street, City, State, Zip Code)</b> 4501 W Good Hope Rd Milwaukee WI 532234836	<b>Telephone Number</b> 414-446-8377	<b>Date - Regulation Visit</b> 8/14/2019
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	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	<p>250.04(5)(d) <b>Staff File - Days, Hours Worked</b></p> <p>Description: The Licensee and her Volunteer did not have documentation of days and hours worked after reviewing the attendance records.</p>	<p>Moving Forward any teacher, volunteer, even myself will document the days and hours worked on a daily basis.</p>	8/15/19	
2	<p>250.04(6)(b) <b>Current, Accurate Daily Attendance Record</b></p> <p>Description: The Licensee did not have a current, accurate written record of daily attendance on this monitoring visit, 8-14-19, because there were 7 children present but 2 children (licensee's children) were not signed-in after reviewing the attendance records.</p>	<p>Licensors explained that my 11 year will have to either stay in room during business or cannot be around. Moving Forward child will stay in bedroom.</p>	8/15/19	

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	<b>Rule/Statute Number</b> <b>Noncompliance Statement</b>	<b>Correction Plan</b>	<b>Expected Completion Date</b>	<b>Verification Date</b>
3	250.05(3)(L) <b>Procedure - Number, Names, Whereabouts Known At All Times</b>  Description: The Licensee did not follow her procedures for tracking children in her care on this monitoring visit, 8-14-19, because there were 7 children present but 2 children (licensee's children) were not signed-in and not being tracked after reviewing the attendance records.	Moving forward Licensee childray <sup>aka</sup> will not be present <sup>11 year old</sup> during business hours	8/15/19	
4	250.06(3) <b>Practice Of Written Emergency Plans</b>  Description: The Licensee did not have documentation of Co2 testing, fire and tornado drills practiced for June and July 2019.	Testing will be documented starting august 2019 and so fourth.	8/15/19	
5	250.06(4)(a) <b>Smoke Detectors</b>  Description: The Licensee did not have documentation of smoke detector testing for the months of June and July 2019.	Smoke detector testing will be documented starting August 2019 and so fourth	8/15/19	

**NAME - Certification Worker / Licensing Specialist**  
Tony Paige

**Date Issued**  
8/19/2019

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

T Summano

**Date Signed**

8/23/19

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