Date Correction Plan Due 12/2/2022

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 Provider Number / Facility ID Number					
The Learning Experience 4000590624 / 001 - 2005740					
Address - Facility (Street, City, State, Zip Code) 9335 N Green Bay Rd Brown Deer WI 532091105		Telephone Number 414-797-2291	Date - Regulation Visit 11/15/2022		
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date	
1	251.06(2)(gm) Premises - Well Drained, Clean Description: The door in the preschool 1 room was not in good working order. The door was jammed and would not close properly.	We called a company to fix the door. They will be out on 11123122 to fix the doore			
2	251.06(4)(j) Fire Alarms & Smoke Detectors - Maintenance, Drills, Testing Description: There was not date of fire drill testing for the month of October.	bile duils + Smoke Betectors will be tested monthly, and tested monthly, and will be documented will be documented of the dril	11/23/22 l		

Nan	me - Certified Operator / Licensed Center	er Number / Facility ID Number			
The Learning Experience 400059				90624 / 001 - 2005740	
Address - Facility (Street, City, State, Zip Code) 9335 N Green Bay Rd Brown Deer WI 532091105		Telephone Number 414-797-2291	Date - Regulation Visit 11/15/2022		
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date	
3	251.09(1)(b) Infant & Toddler - Location & Sharing Intake Information	Staff hosbeen instruct	tod 11/15/22		
	Description: The intake forms in the toddler B room were not in the classroom.	when a child is mor			
		men de le must follor			
	251.09(1)(c) Infant & Toddler - Documenting Changes In Development	Staff how been unstr	ucted		
	Description: The intake forms in the infant B were not updated every three months.	Stays how been unstrate to make fure they are updating in tare	11/15/22		
	Repeat violation: Previously cited on 5/24/2022	forms every 3 months			
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		which hus corner of	rst		

NAME - Agency Worker
Joel Marquez

SIGNATURE - Agency Worker

Date Issued
11/18/2022

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