

**INSTRUCTIONS FOR COMPLETING THE CORRECTION PLAN SECTION OF THE  
NONCOMPLIANCE STATEMENT AND CORRECTION PLAN (DCF-F-CFS294)**

I have attached the Noncompliance Statement and Correction Plan (DCF-F-CFS294) dated August 20, 2025 . Please complete this form as follows:

1. In the column titled "Correction Plan," indicate how you intend to correct each noncompliance listed on the form and outline the steps you will take to prevent future violation of the same rule. If you need more space than is provided on the form, attach additional pages and identify the item number to which the correction plan is related. Because completed and approved correction plans will be scanned and linked to the Regulated Child Care and YoungStar Public Search internet site, which shows each provider's violations, please note the following when writing your correction plan:
  - Do not include confidential information, including the names of children and staff.
  - Write in concise, plain English.
  - Be specific when describing what you have done or intend to do to correct each violation. Non-specific statements such as "It will be fixed", "Done", "Will do", "Don't agree" or "This won't happen again" do not provide the reader with any understanding of how the violation has been corrected or how you plan to prevent the violation from occurring again.
  - Be objective, factual and descriptive. The plan should not include derogatory comments, profanity or subjective observations, such as "The licensing specialist doesn't like me."
2. For each noncompliance, enter the date (month, day, year) by which you expect the correction plan to be completed.
3. Sign and date the form. Retain a copy for your records.
4. **Return the completed and signed form to the department by the due date that appears at the top left of the form via:**
  - **Email:** Katrina.Tarantino1@wisconsin.gov or
  - **Fax:** (262) 446-7991 or
  - **Mail:** DEPARTMENT OF CHILDREN AND FAMILIES  
BUREAU OF EARLY CARE REGULATION  
SOUTHEASTERN REGION  
635 N 26th ST

MILWAUKEE, WI 53233

If the correction plan and the completion dates are acceptable, the form will be linked to the Regulated Child Care and YoungStar Public Search internet site. If the correction plan or the expected completion dates are not acceptable, you will be contacted in writing or by telephone.

**You are required to post a copy of the Noncompliance Statement and Correction Plan (DCF-F-CFS294) in a conspicuous area near the license so that it is visible to parents. This copy must remain posted until all noncompliances have been verified as corrected and the next DCF-F-CFS294 or DCF-F-CFS785 (Compliance Statement) has been issued. Note: If applicable, do not post the Staff and Child Identification Key. The information on the key is confidential and is meant for your reference only.**

Please take a few minutes to complete the Department of Children and Families (DCF) customer satisfaction survey so that you can tell us about your experience. The responses we receive to the survey will be compiled and reviewed by DCF staff to help us improve our services to child care providers. The survey takes approximately 5 minutes to complete. It is voluntary and anonymous, and there is no penalty for not responding. DCF staff will not be able to tell whether or not you responded to the survey or know what responses you submitted. Please follow this link to provide your feedback: <https://www.surveymonkey.com/r/LicenseFeedback>. Or, if you don't have internet access, contact your licensing office and request a paper version of the survey and a prepaid reply envelope .

Contact me if you have any questions.

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|---|--|---|
| <b>Date Correction Plan Due</b><br>9/4/2025 | <b>NONCOMPLIANCE STATEMENT AND CORRECTION PLAN</b> | <b>TO FILE A COMPLAINT CALL</b><br>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.

|  |   |   |  |                              |
|--|---|---|--|------------------------------|
| <b>Name - Certified Operator / Licensed Center</b><br>Jennifer's Love Nest Llc                       |   | <b>Provider Number / Facility ID Number</b><br>4000591214 / 001 - 2006381   |  |                              |
| <b>Address - Facility (Street, City, State, Zip Code)</b><br>2434 W Hadley St Milwaukee WI 532061157 |   | <b>Telephone Number</b><br>414-871-2120   | <b>Date - Regulation Visit</b><br>8/7/2025 |                              |
|  | <b>Rule/Statute Number<br/>Noncompliance Statement</b>  | <b>Correction Plan</b>  | <b>Expected<br/>Completion Date</b>        | <b>Verification<br/>Date</b> |
| 1  | 251.04(6)(a)6.<br><b>Child Record - Health History</b><br><br>Description: The health history on file for Child #2 was incomplete; there were no child care staff listed as those who have received specialized training/instructions to help treat symptoms.<br><br>Repeat violation: Previously cited on 9/7/2023 | <b>The child's health history form for Child #2 has been updated to include the names of all staff who have received specialized training or instructions to treat the child's specific health symptoms. A review of all children's health history forms is now being conducted to ensure they are complete and accurate. Going forward, health history forms will be reviewed during intake and at each staff meeting to confirm proper documentation.</b> | 8/7/2025                                   |                              |
| 2  | 251.06(2)(a)<br><b>Potential Source Of Harm On Premises</b><br><br>Description: There was a part of the fencing that exposed a sharp end in the outdoor play space, which was accessible to children.   | <b>The sharp end of the fencing in the outdoor play area was immediately covered and secured. A maintenance inspection checklist has been implemented to identify any potential hazards weekly. All staff have been reminded to report any visible hazards to management immediately.</b>   | 8/7/2025                                   |                              |

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| 3  | <p>251.06(2)(d)<br/><b>Access To Materials Potentially Harmful To Children</b></p> <p>Description: There was a container of baby wipes and Purrell hand sanitizer that were accessible to children.</p> <p>There were tubes of toothpaste under the sink in an unlocked cabinet in the 2 year old room. The label on the toothpaste states to keep out of reach of children under 6 years of age.</p> <p>Repeat violation: Previously cited on 9/7/2023</p> | <p>The baby wipes and hand sanitizer were removed from children's reach immediately, and the toothpaste was relocated to a locked cabinet. We have installed childproof locks on all accessible lower cabinets. A daily classroom safety checklist is now in place to ensure hazardous materials are stored properly.</p> | 8/7/2025                    |                      |
| 4  | <p>251.06(2)(gm)<br/><b>Premises - Well Drained, Clean, In Good Repair</b></p> <p>Description: There were areas throughout the center where the floor tiles were separating and lifted from the floor.</p> <p>Repeat violation: Previously cited on 8/29/2024</p>   | <p>We are in the process of scheduling repairs for the areas with lifted or separating floor tiles. A contractor has already been contacted and is expected to complete repairs within the next two weeks. We will now conduct a monthly building inspection and log all maintenance requests for prompt resolution.</p>  | 8/21/2025                   |                      |
| 5  | <p>251.06(2)(i)<br/><b>Deteriorating Paint</b></p> <p>Description: There was an area at the back of the building in the outdoor play space that had chipping paint and was accessible to children.</p>  | <p>The chipping paint at the back of the building has been scraped and repainted using a child-safe, lead-free exterior paint. We will include exterior paint inspections in our quarterly outdoor safety reviews to prevent future deterioration.</p>  | 8/8/2025                    |                      |

|  |   |  |  |                              |
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| 6  | 251.06(9)(d)1.b.<br><b>Food Storage - Refrigeration Units</b><br><br>Description: The thermometer in the kitchen's refrigerator read at 56 degrees Fahrenheit.<br><br>Repeat violation: Previously cited on 8/29/2024 | The faulty thermometer was replaced, and the refrigerator was serviced to ensure it operates within the required temperature range. Staff were retrained on monitoring and logging refrigerator temperatures daily. A second thermometer has been added for verification.  | 8/21/2025                                  |                              |
| 7  | 251.07(6)(dm)2.<br><b>Medical Log - Pages &amp; Entries</b><br><br>Description: The medical log book was reviewed and found to have a skipped line.   | The skipped line in the medical log has been clearly marked as "intentionally left blank" with initials and date. Staff were reminded of proper medical log documentation procedures during our August staff meeting. We will continue monthly reviews of the medical log to ensure entries follow compliance standards. | 8/7/2025                                   |                              |
| 8  | 251.07(6)(dm)4.<br><b>Medical Log - Reviewing Injury Records</b><br><br>Description: The medical log book has not been reviewed within the last 6 months.<br><br>Repeat violation: Previously cited on 8/29/2024      | The medical log has now been reviewed by the center director and documented accordingly. A calendar reminder has been set for quarterly medical log reviews moving forward. This process will be overseen and documented by the center administrator.  | 8/7/2025                                   |                              |

**NAME - Agency Worker**  
Katrina Tarantino

Date Issued  
8/20/2025

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

*Reshunda Dobbs*      *Jennifer Dobbs*

Date Signed  
9/3/2025