

<b>Date Correction Plan Due</b> 10/8/2025	<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> Love Care And Hope Childcare Ctr		<b>Provider Number / Facility ID Number</b> 4000573364 / 002 - 2002950	
<b>Address - Facility (Street, City, State, Zip Code)</b> 2840 N 44Th St Milwaukee WI 532101707		<b>Telephone Number</b> 414-445-2946	<b>Date - Regulation Visit</b> 9/18/2025
	<b>Rule/Statute Number Noncompliance Statement</b>	<b>Correction Plan</b>	<b>Expected Completion Date Verification Date</b>
1	250.04(6)(a)1m.f. <b>Child Record - Health History - Medical Condition Symptoms</b>  Description: The files for Child 2, 3, and 4 were incomplete upon licensing review; all three files listed a medical condition on the health history form. Files lacked additional information pertaining to the signs, symptoms, and steps to follow in the event of an emergency.  Repeat violation: Previously cited on 3/7/2024	<i>I will view all Paperwork Thoroughly upon admission. 9/22/25</i>	
2	250.06(11)(b)4. <b>Outdoor Play Space - Enclosure</b>  Description: The outdoor play space lacked a complete enclosure, no less than four feet high. The wooden gate for the play space was observed off its hinges, creating a large gap in the enclosure.	<i>The wooden gate will be replaced and reinforced</i>	<i>10/3/25</i>

FILE A COMPLAINT CALL

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3	250.06(2)(k) Deteriorating Or Toxic Paint  Description: The premise was not free from flaking and deteriorating paint at the time of licensing visit. White paint was observed flaking off the garage, accessible to children in the outdoor play space.	I will use paint that's durable and long lasting	10/3/25
4	250.08(4)(c)1. Driver Record - Obtain & Review  Description: Licensee failed to obtain and review an annual driver record, upon licensing review. The last obtained record was from January 19, 2024. Licensee stated they recently conducted transported.	I will keep an updated driver's record on file	9/18/25
5	250.08(6)(a) Child Safety Restraint System  Description: A child safety restraint system, observed in the vehicle at the time of licensing visit, was expired. The safety restraint expired in 2022; the vehicle was recently used to transport.	I updated all carseats.	9/27/25

NAME - Agency Worker  
Kayla Sands

Date Issued  
9/24/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed

*Kristina Love*

10/3/25