

Date Correction Plan Due
5/31/2023

NONCOMPLIANCE STATEMENT AND CORRECTION PLAN

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 Little Rubies Childcare Center		Provider Number / Facility ID Number 9000562969 / 001	
Address - Facility (Street, City, State, Zip Code) 7937 W Custer Ave Milwaukee WI 532183529		Telephone Number 414-455-8040	Date - Regulation Visit 5/15/2023
Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
<p>1. 202.08(12)(f)1-4 Prior To A Child's First Day Of Attendance For Any Child In Care, Obtaining Information On A Form Prescribed By The Department With Enrollment And Health History Information, Including All Of The Following:</p> <ol style="list-style-type: none"> 1. The Parents' Home And Work Phone Numbers. 2. Health History, Including Information Relating To A Child's Special Health Care Needs And Emergency Care Plan. 3. The Parents' Signed Consent For Emergency Medical Care. 4. A Name And Number To Call If The Child Requires Emergency Medical Care. <p>Description: The Enrollment/Health History form for children #1, #2, and #6 were incomplete.</p>	<p>Parents #1, #2, and #6 were given a copy of the enrollment/health history form to complete for their records.</p>	06/06/2023	

Certified Operator / Licensed Center

Provider Number / Facility ID Number

Little Rabies Childcare Center

9000562969 / 001

Address - Facility (Street, City, State, Zip Code)
7937 W Custer Ave Milwaukee WI 532183529Telephone Number
414-455-8040Date - Regulation Visit
5/15/2023

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
2	202.08(2)(f) The Premises, Furnishings, And Equipment Shall Be Free From Litter And Vermin, Maintained In A Sanitary Condition, And In Good Repair. Description: An uncovered trash can was accessible in the kitchen of the home.	A new garbage can with a lid to cover the trash will be in the kitchen. The old one without the lid will be removed.	05/17/23	
3	202.08(2)(m)1 Pets In The Home Shall Be Tolerant Of Children And Vaccinated Against Rabies. The Rabies Vaccination Shall Be Documented With A Current Certificate From A Veterinarian. Description: The rabies vaccine for 1 of the family cats has expired.	An appointment was made for cat #1 to get a Rabies vaccination. It will be documented and on file.	07/22/2023	
4	202.08(5)(v) 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. Description: The daily attendance records were not current and accurate at the time of the site visit as 3 children were present and none were signed into care.	All children will be signed into care and signed out upon arrival and departure each day going forth.	5/16/2023	

Certified Operator / Licensed Center
Rabies Childcare Center
Provider Number / Facility ID Number
9000562969 / 001

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7937 W Custer Ave Milwaukee WI 532183529
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414-455-8040
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Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date

NAME - Agency Worker
Jean Houston

Date Issued
5/17/2023

SIGNATURE - Certified Operator or Designee / Licensee or Designee
Debra Wilkins Perry

Date Signed
06/02/2023