STATE OF WISCONSIN

DEPARTMENT OF CHILDREN AND FAMILIES
Division of Early Care and Education

Date Correction Plan Due	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL
10/28/2024		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)(l) 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
Kidz N Paradise		9000587509 / 001 - 2000669
Address - Facility (Street, City, State, Zip Code) 4642 N 42Nd St Milwaukee WI 532095828	**Telephone Number** 414-875-8758	**Date - Regulation Visit** 10/9/2024

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	250.05(3)(fm) **Biennial Training - Child Abuse & Neglect** Description: Staff A does not have documentation of a current biennial child abuse and neglect training. The most recent training is from November 2021.	- get online link from agency and complete	10/14/24	
2	250.06(2)(k) **Deteriorating Or Toxic Paint** Description: There was flaking paint observed on the wall in the living room and on the picnic table in the outdoor play space.	- touch up paint on living room wall - touch up paint on outdoor picnic table (weather permitting)	12/1/24 4/1/24	

Name - Certified Operator / Licensed Center		Provider Number / Facility ID Number	
Kidz N Paradise		9000587509 / 001 - 2000669	
Address - Facility (Street, City, State, Zip Code) 4642 N 42Nd St Milwaukee WI 532095828	**Telephone Number** 414-875-8758	**Date - Regulation Visit** 10/9/2024	
Rule/Statute Number **Noncompliance Statement**	**Correction Plan**	**Expected Completion Date**	**Verification Date**
3 250.08(3) **Required Information For Each Trip** Description: Information is not being maintained in the vehicle and center when transporting children, as only one transportation binder is being used. There was no written schedule of transportation routes and scheduled stops as well.	- draw up Route Sheet	10/14/24	

NAME - Agency Worker
Kristin Keck, Sara Cooney

Date Issued
10/14/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee
Danielle Hughes

Date Signed
10/24/24