

Date Correction Plan Due 11/7/2025	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	
Little Champs Academy Llc I		9000 88549 / 001 - 2002034	
Address - Facility (Street, City, State, Zip Code)		Telephone Number	Date - Regulation Visit
10127 Northwestern Ave Franksville WI 531269206		262-884-4226	10/2/2025
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date
1	251.04(3)(c) Report - Change In Administrator Or Center Director Description: The Department was not notified of a change in director.	Will notify department of former directors departure rather than using the allowed 30 days to try and find adequate replacement	10/5/25
2	251.05(2)(a)6. Staff Record - Days & Hours Worked Description: Documentation of staff signed into rooms to meet staff-to-child ratio was not observed. Repeat violation: Previously cited on 10/19/2023	Reviewed staff signing in and out with the staff	10/5/25

Name - Certified Operator / Licensed Center		Provider Number / Facility ID Number		
Little Champs Academy Lic I		9000588549 / 001 - 2002034		
Address - Facility (Street, City, State, Zip Code)		Telephone Number	Date - Regulation Visit	
10127 Northwestern Ave Franksville WI 531269206		262-884-4226	10/2/2025	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3	<p>251.05(3)(e)4.d. Center Director / Large Center - Entry-Level Training</p> <p>Description: Documentation of educational qualifications to be in the position of a center director for a large group center was not observed for the identified designated director.</p>	Will Reduce license to 50 kids	10/24/25	
4	<p>251.055(1)(a) Supervision Of Children</p> <p>Description: A child was observed down the hall from his classroom filling a water bottle unattended. Two children from the preschool room were allowed to leave their room and use the bathroom unattended.</p> <p>Repeat violation: Previously cited on 8/30/2024, 10/19/2023</p>	A staff member will remain in hallway while children are present	10/5/25	
5	<p>251.055(1)(f) Child Tracking Procedure</p> <p>Description: Child tracking was not accurate in the infant room when a child was not signed in on the tracking sheet. Child tracking was not accurate in the 2-3 year old room when a child was not signed out on the tracking sheet.</p> <p>Repeat violation: Previously cited on 3/1/2024</p>	Reviewed the protocol for maintaining accurate tracking throughout the day	10/5/25	

Name - Certified Operator / Licensed Center		Provider Number / Facility ID Number		
Little Champs Academy Lic I		9000588549 / 001 - 2002034		
Address - Facility (Street, City, State, Zip Code)		Telephone Number	Date - Regulation Visit	
10127 Northwestern Ave Franksville WI 531269206		262-884-4226	10/2/2025	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
6	251.06(2)(b) Electrical Or Hot Surface Protection Description: An unprotected outlet was observed in the infant room.	Reviewed locations of outlet covers as well as center policy for them	10/5/2025	
7	251.06(2)(d) Access To Materials Potentially Harmful To Children Description: A spray bottle of bleach water and a can of Off insect repellent was observed on a table in the school aged room and accessible to children.	Reviewed with the staff the designated and adequate place for bleach water/ and insect repellent to be kept	10/5/25	
8	251.06(2)(m) Cleaning Aids - Equipment Description: A bucket of water with a mop was observed in the hallway outside of a classroom.	Reviewed with all staff that the mop bucket will not be left unattended	10/5/25	
9	251.07(2)(b) Policy - Child Guidance Description: Child guidance policy was not implemented when a child care teacher was heard speaking harshly to children in the school age room.	Spoke with staff member and reviewed positive child guidance protocol	10/2/25	

Name - Certified Operator / Licensed Center		Provider Number / Facility ID Number	
Little Champs Academy Llc I		9000 88549 / 001 - 2002034	
Address - Facility (Street, City, State, Zip Code)		Telephone Number	Date - Regulation Visit
10127 Northwestern Ave Franksville WI 531269206		262-884-4226	10/2/2025
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date
10	251.07(6)(dm)4. Medical Log - Reviewing Injury Records Description: Documentation of the review of the medical log books was not observed.	Med logs will be reviewed at least every 6 months	11/6/25
			Verification Date

NAME - Agency Worker
Colleen Hanser, Tiisha Harrell

Date Issued
10/24/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Tyler Tucker

Date Signed 11/7/25