

NONCOMPLIANCE STATEMENT AND CORRECTION PLAN

TO FILE A COMPLAINT CALL
262-446-7800

Date Correction Plan Due
8/27/2025

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 202.085, 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
Rainbow Of Beautiful Babies

Provider Number / Facility ID Number
5000590455 / 001 - 2005842

Address - Facility (Street, City, State, Zip Code)
4004 W Hope Ave Milwaukee WI 53216

Telephone Number
414-304-9080

Date - Regulation Visit
7/24/2025

Rule/Statute Number	Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	250.04(2)(a)1m. Child Record - Health History Description: The health history form for Child #2 was incomplete. None of the boxes were checked indicating if the child has a medical condition or not.	Corrected by parent 8-8-25	8-5-25	
2	250.05(3)(m) Biennial Training - Child Abuse & Neglect Description: The Child Abuse & Neglect training certificate on file for Staff B expired in February 2025	Completed on 7-29-2025	8-5-25	

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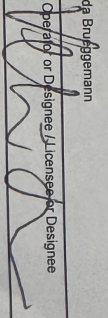
Telephone Number
414-304-9080

Date - Regulation Visit
7/24/2025

Rule/Statute Number	Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3	250.06(1)(b)4 Outdoor Play Space - Enclosure Description: There was an area of the fence that had a gap greater than 4 inches. Repeat violation: Previously cited on 3/27/2024	Added some chicken wire to the close up gap. corrected 8-4-25	8-5-25	
4	250.06(2)(c) Access To Materials Potentially Harmful To Children Description: There was a bottle of Purell hand sanitizer that was accessible to children; the label on the container states to keep out of reach of children. There was a container of fruit fly killer in the bathroom, which was accessible to children. There were packages of baby wipes in the infant room that were accessible to children; the label on these packages states to keep out of reach of children. Repeat violation: Previously cited on 1/16/2024, 10/17/2023	All Items were moved during visit. 7-24-25	8-5-25	
5	250.06(2)(e) Potential Source Of Harm On Premises Description: There were several prickly weeds in the outdoor space that were accessible to children. Repeat violation: Previously cited on 8/5/2024, 1/16/2024, 10/17/2023	Weeds were pulled and removed but visit from full pakey weeds. For the children, 8-4-25.	8-5-25	

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Rule/Statute Number 250.06(2)(m)	Noncompliance Statement Premises - Condition & Repair	Correction Plan	Expected Completion Date 8-5-25
Description: There was a hole in the wall in the infant room.		A door F/4t stopper was added to cover small doorknob hole. 8-4-25	
		Verification Date	

NAME - Agency Worker
Kaitina Taranino, Rhonda Bruggemann

SIGNATURE - Certified Operator or Designee / Licensee or Designee


Date Issued
8/13/2025

Date Signed
8-19-2025