

Name - Certified Operator / Licensed Center

Bears Caring Hands Childcare Center

Provider Number / Facility ID Number  
7000591137 / 001 - 2006298

Address - Facility (Street, City, State, Zip Code)  
2029 N 28Th St Milwaukee WI 532081518

Telephone Number  
414-793-8720

Date - Regulation Visit  
5/23/2024

Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3 250.07(3)(e) Trampolines & Inflatable Bounce Surfaces Description: There was a large trampoline located in the outdoor play space that is accessible to children. **A picture the trampoline is not accessible to children was verified via email on 5/29/24**	Moving forward I will ensure that the necessary equipment is not accessible to the children in center care. Situation was rectified day after on site visit and verified via email.	05/24/2024	
4 250.08(3)(c) Required Information - Route And Stops Description: A written schedule of transportation routes and stops are being maintained in the vehicle but are not being maintained in the center.	I will make sure that all paperwork is on site while children are being transported to and from daycare facility.	05/30/2024	
5 250.08(6)(a) Child Safety Restraint System Description: On 5/23/24, a 3 year old child, being transported by the center, was not placed in a forward facing car seat as required by law.	I will purchase a booster seat that fits the child's weight and age appropriate immediately after on site visit.	05/24/2024	
6 250.09(1)(c)5. Infant & Toddler - Use Of Safety Gates Description: There is no safety gate at the entrance of the staircase leading upstairs.	I will purchase a safety gate to ensure that children in care will not have access to areas that aren't licensed to ensure safety and sight of children immediately after on site visit.	05/24/2024	

Date Correction Plan Due  
6/13/2024

**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.

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Completion Date

Verification  
Date

1 250.06(2)(a)  
**Electrical Or Hot Surface Protection**

Description: An electrical plug outlet on the wall in the main living room was missing a child safety guard cover. \*\*This was corrected during the visit\*\*

Moving forward I will make periodic rounds to ensure that after each use of the licensed area circuits are covered. Situation was rectified at site visit.

05/23/2024

2 250.06(4)(a)3.  
**Smoke Detectors - Testing**

Description: The smoke detector upstairs was beeping at the time of the licensing visit.

Moving forward I will make periodic rounds to ensure that devices and batteries are up to part and replaced when need be.

05/30/2024

Repeat violation: Previously cited on 5/23/2023

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NAME - Agency Worker  
Kristin Keck, Katrina Tarantino

Date Issued  
5/30/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee

*Kristin Keck* *Katrina Tarantino*

Date Signed  
05/30/2024