Date Correction Plan Due	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL
5/22/2026		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
Simon Says Early Lrng Center Llc	9000593329 / 001 - 2008373

Address - Facility (Street, City, State, Zip Code)	Telephone Number	Date - Regulation Visit
5001 W Mill Rd Milwaukee WI 532181410	414-231-3829	4/23/2026

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.05(2)(a)6. **Staff Record - Days & Hours Worked** Description: Center lacked accurate documentation of staff days and hours worked when used to meet applicable staff-to-child ratios. A staff was signed into the infant room but was not present. Repeat violation: Previously cited on 10/7/2025	LICENSEE WILL MAKE SURE ALL STAFF IS SIGNED IN AND OUT. THIS VIOLATION WAS CORRECTED AND SENT PROOF TO LICENSURE.	4/28/26	
2	251.07(6)(f)1.a. **Medication Administration - Parent Authorization** Description: A blanket authorization was observed on the premise, exceeding the length of time specified on the label. Authorization was noted for five years, the medication expiration date was March 2027. A Warning Letter was issued February 23, 2026. Repeat violation: Previously cited on 2/2/2026, 8/6/2025	LICENSE WILL REVIEW AND MAKE SURE AUTHORIZATION DOESNT EXCEED MEDICATION EXPIRATION DATE. THIS WAS FIXED BY PARENT AND PROOF WAS SUBMITTED	4/28/26	

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	Rule/Statute Number **Noncompliance Statement**	**Correction Plan**	**Expected Completion Date**	**Verification Date**
3	251.09(2)(bm) **Infant & Toddler - Sleep Position** Description: Upon licensing arrival, three infants were observed sleeping in bouncy chairs. Two children were moved to cribs, one child continued to sleep in the bouncy seat until licensee directed staff to move the child.	LICENSEE RETRAINED STAFF ON SLEEPING POSITIONS. THIS WAS CORRECTED BY LICENSEE DURING VISIT	4/28/26	

NAME - Agency Worker
Kayla Sands, Janette Cromell

Date Issued
5/8/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed
5/11/26