

Date Correction Plan Due 10/24/2025	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 262-446-7800
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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 St Catherine Day Care Center		Provider Number / Facility ID Number 6000573996 / 001 - 1005906		
Address - Facility (Street, City, State, Zip Code) 2647 N 51st St Milwaukee WI 532102306		Telephone Number 414-445-5116	Date - Regulation Visit 10/8/2025	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.04(6)(a)6m. Child Record - Immunization History Description: Child file reviewed did not have immunizations in the file Repeat violation: Previously cited on 10/15/2024, 11/28/2023	Request immunizations immediately	10/17/2025	10/15/25
2	251.04(6)(a)8.d. Child Record - Health Exam Report Description: The child health report in the child file reviewed was not signed or dated by a physician or other medical professional as required	Request health report immediately	10/17/2025	10/15/25

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3 251.055(1)(b) Supervision - Teacher Per Group Of Children Description: No lead teacher supervising the class during outside play Repeat violation: Previously cited on 10/15/2024	Have lead teacher w/ Class at all times. <hr/> Train asst so that they have lead teacher qualifications (future)	10/8/2025	10/8/2025
4 251.06(11)(b)7. Outdoor Play Space - Enclosure Description: Playground enclosure not complete. Parking gate open leaving significant gap in the enclosure	Have a gated enclosure on line before the parking lot begins.	10/24/2025	11/28/2025
5 251.06(2)(gm) Premises - Well Drained, Clean, In Good Repair Description: Standing, unsanitary water in bucket under water cooler accessible to children in class Repeat violation: Previously cited on 10/15/2024, 11/28/2023	Clean the water bin under the water cooler immediately. Every week hereafter.	10/8/2025	10/8/2025
6 251.07(6)(dm)1. Medical Log Book Description: Medical log book pages not numbered as required by rule	Number medical log pages.	10/8/2025	10/8/2025

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7	251.07(6)(dm)4. Medical Log - Reviewing Injury Records Description: No six month review of the medical log book documented Repeat violation: Previously cited on 10/15/2024	Review the medical log immediately and every 6 months thereafter.	10/20/2025
			Verification Date 10/21/2025

NAME - Agency Worker
Paul Spink

Date Issued
10/9/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed

10/24/2025