

Date Correction Plan Due
10/16/2025

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
Education 2 Success Llc
Provider Number / Facility ID Number
6000591196 / 002 - 2007235

Address - Facility (Street, City, State, Zip Code)
7620 W Burreigh St Milwaukee WI 532225002
Telephone Number
414-988-0101
Date - Regulation Visit
9/30/2025

Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1 251.05(2)(a)6. Staff Record - Days & Hours Worked Description: The center failed to document days and hours worked, and in which classroom, when the person was included in the staff-to-child ratio when staff would sign in to classrooms but did not indicate hours in classrooms.	We will introduce a detail sign in sheet for each classroom meaning staff to not only sign in but also log the hours they spend in the classroom. This sheet will be designed to ensure clarity and accountability	9/30/25 10/15/25	
2 251.05(2)(a)7. Staff Record - Continuing Education Description: Documentation of compliance with continuing education requirements was not observed for Staff A.	We will conduct a thorough review of staff continuing education record to determine the specific training requirements that may not have been documented. This will ensure that there are no gaps, for accuracy and compliance	10/15/25	

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Rule/Statute Number Noncompliance Statement	Description	Correction Plan	Expected Completion Date	Verification Date
3 251.07(6)(dm)4. Medical Log - Reviewing Injury Records	Description: Documentation of reviews of injuries every 6 months by the director or director's designee was not observed during review of the medical log book.	we will conduct a thorough audit of the medical log book to identify any and all entries that related injury reviews every six months to ensure proper documentation is observed upon re-audit	9/30/25	
4 251.08(4)(b) Driver Orientation - Requirement	Description: Documentation of orientation for the driver was not observed.	we will conduct a thorough review of current materials and processes to make sure all drivers are up to date and state compliant we will implement a standardized assessment tool to be used during each interaction with the child, and record each milestone we each 3 month period we will provide to parents as well.	10/6/25	
5 251.09(1)(c) Infant & Toddler - Documenting Changes In Development	Description: Documentation of changes in a child's development and routines every three months based on discussions with parents was not observed.		9/30/25	

NAME - Agency Worker
Tisha Harrell

Date Issued
10/2/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed

Tisha Harrell
Harrell

10/2/25