

To: Department - of - Children - and - Families
BUREAU - OF EARLY - CARE - REGULATION
SOUTH EASTER - REGION

From - Ramaton - CULVER
MAMIS - FAMILY - CHILD - CARE
Facility - ID# 2005470

ATTACH - is - the

NONCOMPLIANCE - STATEMENTS
CORRECTION - PLAN

(4 page - is - being - FAX

Date Correction Plan Due
2/27/2025

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 202.005, DCF 250.04(2)(b) and (3)(d), DCF 251.04(2)(a) and (3)(f), DCF 252.41(1)(k) 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
Mami's Family Childcare
Provider Number / Facility ID Number
3000589483 / 001 - 2005470

Address - Facility (Street, City, State, Zip Code)
4985 S 25TH St Milwaukee WI 532212933
Telephone Number
414-841-1199
Date - Regulation Visit
2/4/2025

Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1 250.04(6)(a)1.d. Child Record - Enrollment Information - Parent Contact Info Description: Child 1 and Child 2 had incomplete enrollment forms available for review.	Child 1 and 2 enrollment enrollment forms will be complete February 12th 2025.	2/12/25	2/12/25
2 250.05(4)(c)4. Continuing Education - Documentation Of 12 Month Period Description: Staff had no documented continuing education available for review at the time of the monitoring visit Repeat violation: Previously cited on 5/14/2024	Continuing Education of a 12 month period will be available 2/28/25. I already submit reasons since 2/6/25	2/28/25	3/11/25

NAME - Agency Worker
Mindi Sadjak, Rhonda Brueggemann
Date Issued
2/10/2025

SIGNATURE - Certified Operator or Designee, Licensee or Designee

Date Signed
2/10/2025

**INSTRUCTIONS FOR COMPLETING THE CORRECTION PLAN SECTION OF THE
NONCOMPLIANCE STATEMENT AND CORRECTION PLAN (DCF-F-CFS294)**

I have attached the Noncompliance Statement and Correction Plan (DCF-F-CFS294) dated February 10, 2025 . Please complete this form as follows:

1. In the column titled "Correction Plan," indicate how you intend to correct each noncompliance listed on the form and outline the steps you will take to prevent future violation of the same rule. If you need more space than is provided on the form, attach additional pages and identify the item number to which the correction plan is related. Because completed and approved correction plans will be scanned and linked to the Regulated Child Care and YoungStar Public Search internet site, which shows each provider's violations, please note the following when writing your correction plan:
 - Do not include confidential information, including the names of children and staff.
 - Write in concise, plain English.
 - Be specific when describing what you have done or intend to do to correct each violation. Non-specific statements such as "It will be fixed", "Done", "Will do", "Don't agree" or "This won't happen again" do not provide the reader with any understanding of how the violation has been corrected or how you plan to prevent the violation from occurring again.
 - Be objective, factual and descriptive. The plan should not include derogatory comments, profanity or subjective observations, such as "The licensing specialist doesn't like me."
2. For each noncompliance, enter the date (month, day, year) by which you expect the correction plan to be completed.
3. Sign and date the form. Retain a copy for your records.
4. Return the completed and signed form to the department by the due date that appears at the top left of the form via:
 - **Email:** mindim.sabljak@wisconsin.gov or
 - **Fax:** (262) 446-7991 or
 - **Mail:** DEPARTMENT OF CHILDREN AND FAMILIES
BUREAU OF EARLY CARE REGULATION
SOUTHEASTERN REGION
635 N 26th ST

MILWAUKEE, WI 53233

If the correction plan and the completion dates are acceptable, the form will be linked to the Regulated Child Care and YoungStar Public Search internet site. If the correction plan or the expected completion dates are not acceptable, you will be contacted in writing or by telephone.

You are required to post a copy of the Noncompliance Statement and Correction Plan (DCF-F-CFS294) in a conspicuous area near the license so that it is visible to parents. This copy must remain posted until all noncompliances have been verified as corrected and the next DCF-F-CFS294 or DCF-F-CFS785 (Compliance Statement) has been issued. Note: If applicable, do not post the Staff and Child Identification Key. The information on the key is confidential and is meant for your reference only.

12:35



WISCONSIN
REGISTRY

English



Go Back

Event Details

Abusive Head Trauma Prevention Training for Child Care Providers with Mandated Reporter - Virtual

EVENT ID:968610
 TIER 1

Friday, February 28, 2025

6:00 PM to 8:30 PM
(2.50 Hours)

Description

The Wisconsin Legislature's 2006 **COURSE ID 326459** Prevent Violence Against Children Act went into effect in April 2007. The Act required that all child care providers working with children under age 5 years receive training in Shaken Baby Syndrome (SBS) Prevention and how to manage crying, fussing, or distraught children. Wisconsin's required Shaken Baby Syndrome (SBS) Prevention Training for Child Care Providers has been updated and renamed Abusive Head Trauma (AHT) Prevention Training for Child Care Providers. By September 1, 2020



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Registration Complete

Abusive Head Trauma Prevention Training for Child Care Providers with Mandated Reporter - Virtual

EVENT ID:968610

🏠 TIER 1

📅 Friday, February 28, 2025

Location

Web Based

<https://zoom.us>

(<https://zoom.us>)

Registration

Event Fee

\$30.00

Register By

2/25/2025

Required?

Yes

Learning Path

Sponsor

4C-For Children