

Date Correction Plan Due
9/3/2026

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)(i) 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 notice of the sanction and / or penalty and your appeal rights.

Name - Certified Operator / Licensed Center

Alyssa's Learning Center

Address - Facility (Street, City, State, Zip Code)
5363 N 52Nd St Milwaukee WI 532183312

Telephone Number
414-897-0288

Provider Number / Facility ID Number
7000589887 / 001 - 2004980

Date - Regulation Visit
8/18/2026

Correction Plan

Expected Completion Date
Verification Date

Rule/Statute Number
Noncompliance Statement

1 250.04(6)(a)1.b.
Child Record - Enrollment Information - Parent's Names
Description: The full names of both child's parents were not observed on file for Child #1 and Child #3.

Revised & Fixed.

9-1-26

2 250.04(6)(a)1.e.
Child Record - Enrollment Information - Other Emergency Contact
Description: The name, address, telephone number, and relationship to the child of a person to be notified in an emergency when a parent cannot be reached immediately was not observed on file for Child #1.

Revised & Fixed.

9-1-26

Child Care Centers

with DCF 250.04(6)(b); Section C may be completed to ensure compliance with DCF 250.04(6)(b) and by certified providers to ensure compliance with Wisconsin Statutes. Completion of this form may be required for 3 years for certified providers. 250.04(6)(b) to retain attendance

Name - Certified Operator / Licensed Center		Telephone Number		Provider Number / Facility ID Number	
Address - Facility (Street, City, State, Zip Code)		Correction Plan		Date - Regulation Visit	
Rule/Statute Number		Expected Completion Date		Verification Date	
Noncompliance Statement					
3	250.04(6)(a)1.g Child Record - Enrollment Information - Authorized Pickup Description: The names, addresses, and telephone numbers of persons other than a parent authorized to call for the child, pick up the child, or accept the child who is dropped off was not observed on file for Child #3. Repeat violation: Previously cited on 8/19/2025	414-897-0288	Revised & fixed	9-1-26	
4	250.04(6)(a)1m. Child Record - Health History Description: The health history form was observed incomplete for Child #3. The 2nd page of the form was not in the file. Repeat violation: Previously cited on 9/13/2024		Added the page corrected.	9-1-26	
5	250.04(6)(a)2. Child Record - Field Trip Permission Description: Field trip permission was not observed complete for Child #1 and Child #3.		Completed	9-1-26	
	250.05(2)(b) Staff File - Background Check Results Description: Background check results were not on file for Staff B.		Staff B is not with us anymore, but when she returns I will have it updated.	9-1-26	

Licensed Child Care Centers

Order to comply with DCF 250.04(6)(b); Section C may be completed to ensure this form may be used by Group Child Care Centers to ensure compliance with and 252.42(1)(a)5, and by certified providers to ensure compliance with s. 15.04(1)(m), Wisconsin Statutes]. Completion of this form may be required under DCF 201.04(6) and for at least 3 years for certified providers. Stat., 49.155(6m)(b) to retain attendance

Name - Certified Operator / Licensed Center
 Alyssa's Learning Center
 Address - Facility (Street, City, State, Zip Code)
 5363 N 52Nd St Milwaukee WI 532183312

Provider Number / Facility ID Number
 7000589887 / 001 - 2004980

Telephone Number
 414-897-0288

Date - Regulation Visit
 8/18/2026

Rule/Statute Number Noncompliance Statement		Correction Plan		Expected Completion Date	Verification Date
7	250.05(2)(d)1. Staff File - Physical Examination - Form Description: A health exam on file for Staff B was not signed by a licensed physician, physician's assistant, or other HealthCheck provider.	Will have it updated when she returns		9-1-26	
8	250.05(2)(f) Staff File - Continuing Education Description: Documentation of the continuing education for the 2025 year was not observed on file for Staff A or Staff B.	Observing another child care for second shift on 9-2-26.		9-1-26	
	250.05(3)(e)2. Provider Training - Current Cpr Certificate Description: Documentation of current completed infant/child CPR/AED training was not observed on file for Staff A and Staff B. Staff A did not complete the hands-on skills portion of the CPR/AED training.	Retaking the class through protrainings.		9-1-26	

Name - Certified Operator / Licensed Center

Alyssa's Learning Center

Address - Facility (Street, City, State, Zip Code)
5363 N 52Nd St Milwaukee WI 532183312

Provider Number / Facility ID Number
7000589887 / 001 - 2004980

Date - Regulation Visit
8/18/2026

Rule/Statute Number Noncompliance Statement		Telephone Number 414-897-0288	Expected Completion Date	Verification Date
14	250.06(4)(a)3, Smoke Detectors - Testing Description: A record of the required smoke detector testing was not observed for January 2026 - July 2026.	Documented this information	9-1-26	
15	250.06(4)(b) Fire Extinguisher Description: Documentation of the required yearly fire extinguisher inspection was not observed on file.	Got a brand new one & inspection is updated	9-1-26	
16	250.06(9)(a) Kitchen Equipment, Utensils, Eating Surfaces Description: The refrigerator and the freezer were observed not clean with dried and sticky spills.	Deep cleaned the refrigerator & freezer	9-1-26	
17	250.07(3)(a)4, Play Equipment - Condition Description: The outdoor play equipment was observed dirty and need of a cleaning. Repeat violation: Previously cited on 9/13/2024	Equipment is thrown away.	9-1-26	

MSIN

ited ition Plan This the If is
e: ey

Name - Certified Operator / Licensed Center
Alyssa's Learning Center

Address - Facility (Street, City, State, Zip Code)
5363 N 52Nd St Milwaukee WI 532183312

Provider Number / Facility ID Number
7000589887 / 001 - 2004980

Telephone Number
414-897-0288

Date - Regulation Visit
8/18/2026

Rule/Statute Number
Noncompliance Statement

Correction Plan

Expected
Completion Date

Verification
Date

18

250.07(4)(d)
Naps - Bedding

Description: A child was observed sleeping with a blanket, but not provided with an additional sheet.

Added fitted sheets to
the mats

9-1-26

ME - Agency Worker
centa Sabree, Tisha Harrell

Date Issued
8/20/2026

ATURE - Certified Operator or Designee / Licensee or Designee

Alyssa Sabree

Date Signed
9-1-26