DEPARTMENT OF CHILDREN AND FAMILIES
Division of Early Care and Education

STATE OF WISCONSIN

Date Correction Plan Due	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL
7/13/2026		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
West Allis Family Child Care	9000593209 / 001 - 2008252

Address - Facility (Street, City, State, Zip Code)	Telephone Number	Date - Regulation Visit
7318 W Beloit Rd West Allis WI 532192432	920-636-9413	6/26/2026

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	250.05(3)(fm) **Biennial Training - Child Abuse & Neglect** Description: Child Abuse and Neglect training for staff A was expired at the time of the monitoring visit.	Required child abuse and neglect training has been completed and updated. Training expiration dates will be monitored regulary To ensure all required trainings remain current.	06/29/2026	
2	250.06(4)(a)3. **Smoke Detectors - Testing** Description: Smoke and carbon monoxide testing was not completed for the months of January 2026- May 2026.	Smoke and carbon monoxide detector testing has been completed and documented. monthly safety checks and documentation will be maintained to ensure ongoing compliance	07/01/2026	

NAME - Agency Worker
Dominica Shaw

Date Issued
6/29/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee
Marlena Graff

Date Signed
07/01/2026