

**From:** [Nyren, Allison - DCF](#)  
**To:** [Clark, Deana L - DCF](#)  
**Subject:** Fw: 294 2006179- Ella's Bella's upload  
**Date:** Friday, May 16, 2025 7:23:12 AM

Good morning  
 Can you upload please? Thanks

**From:** Brianna Rashay <briannarashay3@gmail.com>  
**Sent:** Friday, May 16, 2025 3:45 AM  
**To:** Nyren, Allison - DCF <allison.nyren1@wisconsin.gov>  
**Subject:** Re: 294

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STATE OF WISCONSIN  
 DEPARTMENT OF CHILDREN AND FAMILIES  
 Division of Family Care and Education

TO FILE A COMPLAINT CALL  
 202-445-7930

NONCOMPLIANCE STATEMENT AND CORRECTION PLAN

Date Correction Plan Due: 5/15/2025

Use of Form: This form is used by certification / licensing staff to identify statute and / or administrative rule violations and to outline imposed plans of correction, if applicable. This form is used by the Department of Children and Families to ensure compliance with the requirements of DCF 202.066, DCF 202.067, DCF 202.068, DCF 202.069, DCF 202.070, DCF 202.41(1)(c) 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 address(es) of child care statute and / or administrative rule identified by the certification / licensing specialist. The Noncompliance Statement is for informational purposes only. The Noncompliance Statement is not a license suspension or revocation. The Noncompliance Statement is not a 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, you will be given a separate written notice of the sanction and / or penalty.

Name of Certified Operator / Licensed Center: Ella Bellas Learn And Play Academy  
 Address - Facility (Street, City, State, Zip Code): 2429 N 34th St Milwaukee WI 532103028  
 Telephone Number: 414-551-1139  
 Date - Regulation Visit: 4/28/2025  
 Provider Number / Facility ID Number: 5000590985 / 001 - 2008179

Noncompliance Number	Correction Plan	Expected Completion Date	Verification Date
1	Outdoor Play Space - Prohibited Surfaces Description: There was a large gap in the upper part of the fence facing the back side.	05/11/2025	
2	Emergency Plans - Practice Description: There were no documented plan practice for January, February, March and April of 2025. Repeat violation: Previously cited on 5/22/24	05/11/2025	

5000590985 / 001 - 2008179  
 Telephone Number: 414-551-1139  
 Date - Regulation Visit: 4/28/2025

Rule/Statute Number: 250.05(4)3  
 Noncompliance Statement: Smoke Detectors - Testing  
 Description: The record was missing/blank for all of 2025.

Correction Plan: forms completed but missing dates together was on separate form

On Thu, May 15, 2025 at 2:57 PM Nyren, Allison - DCF <[allison.nyren1@wisconsin.gov](mailto:allison.nyren1@wisconsin.gov)> wrote: