Date Correction Plan Due 8/10/2026	**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)(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**	
Holistic Child Development Center		3000593663 / 002 - 2008369	
Address - Facility (Street, City, State, Zip Code) 2433 W Roosevelt Dr Milwaukee WI 532096640		**Telephone Number** 414-544-4092	**Date - Regulation Visit** 7/15/2026

	Rule/Statute Number **Noncompliance Statement**	**Correction Plan**	**Expected Completion Date**	**Verification Date**
1	251.04(6)(a)1. **Child Record - Enrollment Information** Description: Child 7 was missing the 1st date of attendance. Repeat violation: Previously cited on 4/22/2026	Attendance record has been corrected, 1st day of attendance has been added correctly.	7/24/26	
2	251.04(6)(a)6. **Child Record - Health History** Description: Child 7 was noted as having a disorder however the 2nd page of the health history form was incomplete.	2nd page of the health history has been completed	7/24/26	

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3	251.05(2)(a)1. **Staff Record - Personal Information** Description: Staff record forms were missing for Staff B,D,M, BB. The 2nd page of the staff record form was missing for staff G.	Staff record forms have been placed in staff folders for staff B,D,M,BB. 2nd page has been added for staff G.	8/9/26	
4	251.05(2)(a)3.a. **Staff Record - Physical Examination** Description: A staff health report was not available for review in the files of staff B,D,I, BB,DD, and FF.	Staff health report for B,D,I, BB, DD and FF has been added to the files.	8/9/26	
5	251.05(2)(a)4.a. **Staff Record - Registry Certificate** Description: A WI Registry Certificate was missing in the file for staff F, and staff DD.	Working with WI Registry to access a registry certificate for F and DD.	10/1/26	
6	251.05(2)(a)4.d. **Staff Record - Educational Qualifications** Description: The Department was not able to verifying education qualifications for staff F and staff DD.	A Staff DD educational qualifications have been placed in file. Staff B F is attending classes at MATC.	A 8/9/26 B 12/30/26	

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7	251.05(2)(a)5. **Staff Record - High School Diploma** Description: The Department was unable to verify a high school diploma for staff F.	Staff F is signed up for their high school diploma	12/26/27	
8	251.05(2)(a)8. **Staff Record - Orientation** Description: An orientation form was not in the file for non teacher staff D and staff I.	Orientation form has been added to the staff files and completed.	7/24/26	
9	251.05(3)(b) **Abusive Head Trauma Prevention Training** Description: The Department was not able to verify AHT training for staff F, and staff D.	Staff completed AHT training and put it in their files.	7/24/26	
10	251.05(3)(c) **Cardiopulmonary Resuscitation Training** Description: CAN training was expired for staff G.	Staff has completed training and certificate is put in their file.	7/25/26	

NAME - Agency Worker
Dominica Shaw

Date Issued
7/27/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee
Danita Jackson

Date Signed
8/10/2026