

DEPARTMENT OF CHILDREN AND FAMILIES  
Division of Early Care and EducationDate Correction Plan Due  
4/30/2026**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

A New Happiness Childcare

2000592282 / 001 - 2007473

Address - Facility (Street, City, State, Zip Code)  
8537 W Denver Ave Milwaukee WI 532244814Telephone Number  
414-758-7607Date - Regulation Visit  
4/14/2026

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	250.04(6)(a)1.e. <b>Child Record - Enrollment Information - Other Emergency Contact</b>  Description: Child 1 did not have documentation of an emergency contact, other than the parents, on file.  Repeat violation: Previously cited on 3/6/2025	Have Parent Form with highlighted area that needed to get filled out. Form has gotten returned	4/18/2026	
2	250.04(6)(a)4.a. <b>Child Record - Physical Exam - Under 2</b>  Description: Child 2, under the age of two, did not have documentation of a health exam completed within the past six months.	Health Exam has been submitted.	4/18/2026	

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3	<p>250.04(6)(b) Current, Accurate Daily Attendance Record</p> <p>Description: Attendance was not documented on the day of the visit, or on the day prior to the visit. Children were not signed out on April 10, 2026.</p> <p>Repeat violation: Previously cited on 4/11/2025</p>	<p>Went BACK to Childrens arrival/de parture times and Documented</p>	<p>4/18/2026</p>	
4	<p>250.05(2)(c) Staff File - Days, Hours Worked</p> <p>Description: Staff hours were not documented on the day of the visit or the day prior to the visit.</p>	<p>Documented Staff hours.</p>	<p>4/18/2026</p>	
5	<p>250.05(3)(fm) Biennial Training - Child Abuse &amp; Neglect</p> <p>Description: Staff A's training in child abuse &amp; neglect laws, reporting, and identification was expired when it was last completed 2/7/24. Child abuse &amp; neglect training is required every two years.</p>	<p>Scheduled Class</p>	<p>4/18/2026</p>	
6	<p>250.05(4)(c)4. Continuing Education - Documentation Of 12 Month Period</p> <p>Description: Staff A did not have documentation on file of having completed 15 hours of continuing education in 2025.</p>	<p>Went to YCS and Scheduled classes</p>	<p>4/18/2026</p>	

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Rule/Statute Number Noncompliance Statement		Correction Plan	Expected Completion Date
7	260.07(6)(f)5. Current Authorizations For Medications On Premises  Description: A medication at the center did not have an authorization from the parent and another medication authorization did not include a timeframe.	Sent Back form to parent for authorization. and also informed them of including time frame	4/18/2026

NAME - Agency Worker  
Cindy Matuszak

Date Issued  
4/16/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee

*Channah Johnson*

Date Signed  
4/18/2026