Date Correction Plan Due	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL
7/31/2026		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
All The Way Childcare Dev Center	4000585634 / 001 - 1015433

Address - Facility (Street, City, State, Zip Code)	Telephone Number	Date - Regulation Visit
4261 N 25Th St Milwaukee WI 53209	414-873-4423	7/14/2026

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	250.05(2)(f) **Staff File - Continuing Education** Description: Staff A did not have documentation of continuing education completed for 2025.	Moving forward will have all continuing education documentation.	Aug 15, 2026	

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Rule/Statute Number **Noncompliance Statement**	**Correction Plan**	**Expected Completion Date**	**Verification Date**
2 250.06(2)(c) **Access To Materials Potentially Harmful To Children** Description: There was a container of antiseptic in the cabinet in the bathroom. The cabinet did have a lock on it, but the lock was not secured. There was a container of wipes accessible to children; the label states to keep out of reach of children. Included in a warning letter dated 2/7/25. Repeat violation: Previously cited on 1/27/2025	Removed the Container of Antiseptic in Cabinet Wipe was put upon Shelve away from Children	7/14/2026 7/14/2026	
3 250.06(2)(e) **Potential Source Of Harm On Premises** Description: There was siding standing up against the fence in the back of the outdoor play space that had sharp edges and was accessible to children in care. Included in an order dated 1/28/26. Repeat violation: Previously cited on 1/26/2026, 1/27/2025	Siding against the fence will be fixed all sharped edges will be Corrected by Sept 1, 2026	9/1/2026	

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4	250.06(2)(k) **Deteriorating Or Toxic Paint** Description: Chipping paint was observed around the window well frame in the outdoor play space, which was accessible to children. Included in a warning letter dated 2/7/25 and order dated 1/28/26. Repeat violation: Previously cited on 1/26/2026, 1/27/2025	All Chipping Paint will be corrected by Sept. 1, 2026	Sept 1, 2026	
5	250.06(9)(j) **Meals & Snacks - Records** Description: There was no written records of meals/snacks provided to children.	Weekly Menu plans was Corrected same day	7/14/2026	
6	250.07(4)(d) **Naps - Bedding** Description: Children over the age of one were provided a blanket with their cot but not an individual sheet.	All Children were Provided with individual sheet	7/22/2026	

NAME - Agency Worker
Katrina Tarantino

Date Issued
7/17/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee
Katie R Harris

Date Signed
7/31/2026