

Date Correction Plan Due
5/22/2026

NONCOMPLIANCE STATEMENT AND CORRECTION PLAN

TO FILE A COMPLAINT CALL

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

Grannies Daycare

7000592197 / 001

Address - Facility (Street, City, State, Zip Code)

4705 N 36Th St Milwaukee WI 532095941

Telephone Number

414-731-9990

Date - Regulation Visit

5/7/2026

**Rule/Statute Number
Noncompliance Statement**

Correction Plan

**Expected
Completion Date**

**Verification
Date**

1

202.08(2)(c)
The Indoor And Outdoor Areas Of The Home Shall Be Free Of Hazards. Potentially Dangerous Items And Materials Harmful To Children, Including Power Tools, Flammable Or Combustible Materials, Insecticides, Matches, Drugs And Any Articles Labeled Hazardous To Children Shall Be In Properly Marked Containers And Stored In Areas Inaccessible To Children.

Description: Loose cords were accessible in the indoor play area.

Removed all cords to an area where no children are allowed

5-18-2026

2

202.08(4m)(a)2.
The Emergency Plan Under Subd. 1. Shall Be Reviewed Periodically And Practiced As Specified In The Plan.

Description: The area designated for tornado drills was not cleared out to allow for completing tornado drills.

Removed all items from area that is an open space for tornado drill

5-18-2026

DEPARTMENT
Division of
Data Collec
8/15/2025

Use of Form:
This form is
and (2)(4). F
may submit par
Instructions:
Complete the
date(s) for each
noncompliance
penalty pursuant
notice of the sanc
Name - Certified
Florence Truss

Address - Facility
4705 N 36Th St
Milwaukee WI 532095941

Provider Number / Facility ID Number

7000592197 / 001

Name - Certified Operator / Licensed Center

Grannies Daycare

Address - Facility (Street, City, State, Zip Code)

4705 N 36Th St Milwaukee WI 532095941

Telephone Number

414-731-9990

Date - Regulation Visit

5/7/2026

Rule/Statute Number
Noncompliance Statement

Correction Plan

Expected
Completion Date

Verification
Date

Date Issued

5/8/2026

Date Signed

5-18-2026

NAME - Agency Worker
Deborah Kersting

SIGNATURE - Certified Operator or Designee / Licensee or Designee
Florence Truss

DCF-F-CFS0294-E (R.06/2011)

1
2020/12/01/4
Noncompliance Statement
Rule/Statute Number
Obtaining Information For Any Child In Care,
Including All Of The Following:
1. The Parents' Health
2. Health Status
Telephone
414-731-
Correct