

Date Correction Plan Due 8/4/2026	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 608-422-6765
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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 Ywca Roosevelt Child Care Program		Provider Number / Facility ID Number 0000555770 / 010 - 120345		
Address - Facility (Street, City, State, Zip Code) 316 Ringold Janesville WI 53545		Telephone Number 608-743-7047	Date - Regulation Visit 5/5/2026	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.04(6)(a)6m. Child Record - Immunization History Description: Child A did not have documentation of immunization records in their file as required.	Child A - immunization records are now on file.	7.29.26	
2	251.06(3)(b)4. Emergencies - Record Of Fire / Tornado Drills Description: The program did not have documentation of fire and tornado drills practiced in April 2026. Repeat violation: Previously cited on 5/27/2025	Staff were reminded to complete monthly drills	7.29.26	

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3	251.07(5)(b)5. Eating Surfaces - Cleaned, Sanitized Description: Tables were not cleaned and sanitized prior to eating snack. In addition, snack was prepared on a table that was not cleaned or sanitized and contained many other materials.	Staff were talked to and told to complete this process.	7.29.26	
4	251.07(6)(i)1. Washing Child's Hands & Face Description: Children did not wash hands prior to eating snack.	Staff were talked to and told to have the children wash hands.	7.29.26	
5	251.07(6)(i)2. Adult Handwashing Description: Staff did not wash their hands before serving afternoon snack.	Staff were talked to about hand washing procedures.	7.29.26	

NAME - Agency Worker
Jenny Sweeney

Date Issued
7/28/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed

Angie Thompson

7.29.26