

Date Correction Plan Due 8/18/2025	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 715-930-1148
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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 Ymca School Age-Eagle Bluff		Provider Number / Facility ID Number 7000556007 / 013 - 1001753		
Address - Facility (Street, City, State, Zip Code) 200 Eagle Bluff Ct Onalaska WI 54650		Telephone Number 608-519-5495	Date - Regulation Visit 7/30/2025	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.055(1)(f) Child Tracking Procedure Description: During the monitoring visit there were 56 children signed in and an actual standing count had 59 children.	Staff will ensure that parents are directly signing children in to care. The sign-in sheet will be moved to closer to staff members to ensure staff can visually see the parent signing the children in.	08/11/2025	
2	251.07(6)(f)1.a. Medication Administration - Parent Authorization Description: Multiple medication authorizations were missing end dates when reviewed during the monitoring visit.	Staff will have parents re-complete the medication authorization forms. Parents will be asked to fill out the physical form at site to ensure staff are double checking that all boxes of the form are correctly filled out. Director will go out biweekly to ensure forms are all correctly completed.	09/02/2025	

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3	251.07(6)(f)1.b. Medication Administration - Containers & Labeling Description: During the monitoring visit an epi pen for EG was expired and an inhaler for EC was expired.	Parents of EG and EC will be notified of this and asked to bring in an unexpired medication. (parents will provide this medication by the first day of SAC of the school year)	9/02/2025

NAME - Agency Worker
Kimberly Jasper

Date Issued
8/4/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed