

Date Correction Plan Due 11/25/2025	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 Chippewa Falls Ymca School-Age		Provider Number / Facility ID Number 5000556395 / 030 - 2005463		
Address - Facility (Street, City, State, Zip Code) 611 Jefferson Ave Chippewa Fls WI 547291353		Telephone Number 715-861-2338	Date - Regulation Visit 10/8/2025	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	<p>251.07(3)(a)2. Indoor Equipment - Construction, Condition</p> <p>Description: On 9-29-2025 at around pick-up time, a school-age child had checked out of care and was about to leave the center with his parent. When the child tried to remove his backpack from the wooden cubby located out in the hallway, the wooden cubby fell on top of him. The wooden cubby had been moved away from the wall earlier that day to have the walls painted. When the wooden cubby got moved back against the wall, it was not anchored back to the wall to ensure safety.</p>	The cubby that fell was removed from the premises that same day.	09.29.2025	

NAME - Agency Worker
Sou Yang

Date Issued
11/11/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed



11.13.2025