Date Correction Plan Due 11/20/2023

## NONCOMPLIANCE STATEMENT AND CORRECTION PLAN

TO FILE A COMPLAINT CALL 715-361-7700

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		
Мс	hs Ymca Child Development Center	4000557914 / 018 - 2005988		
Address - Facility (Street, City, State, Zip Code) 601 N Pine Ave Marshfield WI 544491967		<b>Telephone Number</b> 715-387-7555	Date - Regulation Visit 10/18/2023	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.06(10)(dm)1.  Washrooms - Sanitary Conditions  Description: Bathrooms in the school-age area smelled of urine. There was a large piece of wood in the bottom of a urinal in the boys' restroom.	Wood and Smell removed from the winal. Moving forward facilities staff will inform administration of any plumbing issues and author Dlans.	10-30-23	
2	251.06(2)(gm)  Premises - Well Drained, Clean, In Good Repair  Description: -Garbage can covers in several classrooms were sticky and had spilled food on themHalf-doors between the jack and jill bathrooms in several classrooms were stickySchool-age classroom floors were not cleanChanging tables had dirt accumulated underneath the changing pads.	Job tasks between while care staff and cure staff and cure staff and custalians clarified. Tosk lists updated and monitered in classicoms. Knows	11-13-23	

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Rule/Statute Number	Correction Plan	Expected Verification		
Noncompliance Statement		Completion Date Date		
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		)		
NAME - Agency Worker	Date Issued			
Kelly Iverson, Tiisha Harrell	11/6/2023			
SIGNATURE - Certified Operator or Designee / Licensee or Designee Date Signed				
SIGNATURE - Certified Operator or Designee / Licensee or Designee    Date Signed   1/- 27 3 3				
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