

Date Correction Plan Due 2/12/2026	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 262-446-7800
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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 Southwest Ymca Preschool		Provider Number / Facility ID Number 4000558914 / 034 - 2007041	
Address - Facility (Street, City, State, Zip Code) 11311 W Howard Ave Greenfield WI 532281887		Telephone Number 414-329-3852	Date - Regulation Visit 1/21/2026
Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1 251.04(6)(a)8.b. Child Record - Physical Exam - Over 2, Under 5 Description: There is no record for Child 1 of having a physical examination.	Child 1 family notified sent copy of CHR. Once returned will place in Childs file.	2/16/26	
2 251.05(2)(a)3.a. Staff Record - Physical Examination Description: There is no health report on file for Staff A. Staff A started working in February 2025 and would have needed a physical examination within 30 days after Staff A was hired.	Staff A has physical scheduled. once form is signed & completed, will be placed in file.	2/16/26	

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3	<p>251.05(2)(a)6. Staff Record - Days & Hours Worked</p> <p>Description: The center lacked documentation of days and hours worked and in which classroom when staff is included in staff-to-child ratios.</p> <p>Repeat violation: Previously cited on 2/19/2025</p>	<p>Staff will be reminded monitored & checked to make sure they are signing in & out of classroom binders</p>	<p>1/29/26</p>
4	<p>251.055(1)(f) Child Tracking Procedure</p> <p>Description: On the day of the licensing visit, there was no implemented tracking procedure when the group left the room to use the bathroom.</p>	<p>Tracking procedure has been put in place. Directors will check to ensure this continues.</p>	<p>1/29/26</p>
5	<p>251.06(2)(gm) Premises - Well Drained, Clean, In Good Repair</p> <p>Description: A metal cover over the pipe is not secure. Where the cover is not secure, it is sharp and accessible to children.</p>	<p>Metal cover will be inaccessible to children going forward.</p>	<p>1/29/26</p>

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6	<p>251.06(3)(b)2.</p> <p>Emergencies - Practice Written Plans</p> <p>Description: There is no documentation that monthly fire evacuation drills were conducted from February to December 2025 and there is no documentation that tornado drills were conducted from April through October 2025.</p>	All leadership staff to run and follow through on fire & tornado drills. January 26 has been completed.	1/29/26
7	<p>251.07(6)(dm)4.</p> <p>Medical Log - Reviewing Injury Records</p> <p>Description: There is no documentation that the medical log book was reviewed within the last 6 months.</p>	Director to review med log.	1/29/26
			Verification Date

NAME - Agency Worker
Kristin Lange, Sara Cooney

Date Issued
1/29/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Sara Cooney

Date Signed

1/29/26

