

Date Correction Plan Due
7/2/2026

NONCOMPLIANCE STATEMENT AND CORRECTION PLAN

TO FILE A COMPLAINT CALL
920-785-7811

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

Hhasd Ymca Day Camp

9000559219 / 035 - 2005027

Address - Facility (Street, City, State, Zip Code)

Telephone Number
262-247-1030

Date - Regulation Visit
6/12/2026

1750 WI-167 Hubertus WI 53033

Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
<p>1</p> <p>252.42(1)(a)4. Staff File - Pre-Camp Training</p> <p>Description: Based upon record review, Staff B and D did not have documentation of the completion of the pre camp training within the staff file.</p>	<p>Staff B and D completed pre-camp training form and they were uploaded to the site data and is accessible at the camp location</p>	<p>6/20/20</p>	<p>6/26/20</p>
<p>2</p> <p>252.42(2)(d) Camp Counselor - Minimum Age, High School Completion Or Equivalent</p> <p>Description: Based upon record review Staff D did not have documentation of a high school diploma within their staff file.</p>	<p>Staff d will have diploma uploaded</p>	<p>6/29/20</p>	<p>6/29/20</p>

Name - Certified Operator / Licensed Center

Provider Number / Facility ID Number

Hhand Ymca Day Camp

9000559219 / 035 - 2005027

Address - Facility (Street, City, State, Zip Code)

1750 WI-167 Hubertus WI 53033

Telephone Number
262-247-1030

Date - Regulation Visit
6/12/2026

Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3 252.A2(3)(a)13. Pre-Camp Training - Abusive Head Trauma Description: Based upon record review, staff C and D did not have documentation of completion of Abusive Head Trauma training within in the staff file and four year old children were enrolled in camp.	All staff will have uploaded AHT training	07/07/2020	07/07/2020
4 252.A2(3)(e) Cardiopulmonary Resuscitation Training Description: Based upon record review, Staff C did not have documentation of completion of Cardiopulmonary Resuscitation Training within the most recent two years. Repeat violation: Previously cited on 6/25/2025	STAFF C'S current CPR card was uploaded to the external drive and is now accessible at the Day Camp location	6/11/2020	6/22/2020
5 252.A3(1)(f) Base Camp Premises & Structures - Condition, Maintenance, Safe Description: He spent observation the stall partitions in the boys bathroom were not in good condition when they were observed to have corrosion exposed in areas accessible to children.	SADC Dir reached out to school on 6/25/2020 to address concerns - school responded they are aware of the situation	6/25/2020	6/25/2020

Name - Certified Operator / Licensed Center

Provider Number / Facility ID Number

Hhasd Ymca Day Camp

9000559219 / 035 - 2005027

Address - Facility (Street, City, State, Zip Code)
1750 WI-167 Hubertus WI 53033

Telephone Number
262-247-1030

Date - Regulation Visit
6/12/2026

Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
6 252.43(2)(b) Accessible Toxic Substances, Power Tools Description: Based on observation, sanitizing spray bottles belonging to school custodians were observed accessible to children in care in the base camp area.	SADC DIR. REACHED OUT ON 6/25/20, TO THE SCHOOL, AND THEY REMOVED ALL CHEMICALS	6/25/20	6/25/20
7 252.43(2)(e) Available Telephone & Emergency Telephone Numbers Description: Based upon observation and staff disclosure emergency numbers were not posted	EMERGENCY NUMBERS ARE DISPLAYED ON THE BOARD	6/12/20	6/12/20
8 252.43(3)(c) Fire Protection Facilities & Equipment Maintenance & Inspections Description: Observation the fire extinguisher off the main cafeteria had a tag of September 2024	SADC DIR. REACHED OUT TO SCHOOL ON 6/25/20, THEY WILL HAVE THE EXT. MOVED AT	6/25/20	6/25/20

NAME - Agency Worker
Amanda Holz

Date Issued
6/18/2026

SIGNATURE Certified Operator or Designee / Licensee or Designee

Date Signed



7/1/2026