

Date Correction Plan Due 1/1/2026	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	
Young Child Development Center		6000592436 / 001 - 2007595	
Address - Facility (Street, City, State, Zip Code)		Telephone Number	Date - Regulation Visit
719 W Ridgeview Dr Appleton WI 549141410		920-882-1685	10/14/2025
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date
1	<p>251.06(2)(b) Electrical Or Hot Surface Protection</p> <p>Description: Based on observation of the center on 10/14/25 there were a number of missing outlet covers throughout the center. Outlet covers were seen missing from outlets within the infant classroom and one year old classroom.</p>	<p>All outlet covers were put back in & the cleaning company that came the night before was talked to about ensuring they put the covers back in the outlets when they are done</p>	10/14/2025
2	<p>251.09(1)(j) Infant & Toddler - Crib Mattresses & Coverings</p> <p>Description: Based on observation of the infant classroom, the crib sheets failed to be tight fitting. The sheets were loose and could be pulled up on.</p>	<p>Parents were reminded they needed a pack-n-play sized sheet & we also bought bed sheet straps from Amazon in case a large sheet comes in we can make it tight fitting and did put these straps on all the crib sheets.</p>	10/14/2025

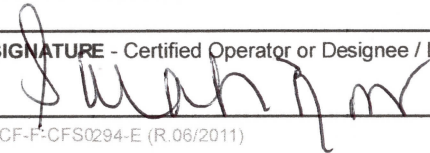
Name - Certified Operator / Licensed Center Young Child Development Center		Provider Number / Facility ID Number 6000592436 / 001 - 2007595	
Address - Facility (Street, City, State, Zip Code) 719 W Ridgeview Dr Appleton WI 549141410		Telephone Number 920-882-1685	Date - Regulation Visit 10/14/2025
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date Verification Date

NAME - Agency Worker
Cassandra Debauche

Date Issued
12/18/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed



12/18/2025