Date Correction Plan Due	NONCOMPLIANCE STATEMENT AND CORRECTION	TO FILE A COMPLAINT CALL
8/17/2023	PLAN	262-446-7800

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.

Nam	Name - Certified Operator / Licensed Center Provider Number / Facility ID Number			
Ymo	Ymca Day Camp At Lincoln Park 1000558721 / 105 - 1009209			
Address - Facility (Street, City, State, Zip Code) 1301 W Hampton Ave Glendale WI 532096531		Telephone Number 414-662-4297	Date - Regulation Visit 7/27/2023	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	252.41(1)(L)1 a Monitoring Results Posted Description The most recent monitoring results were not posted.	Results will be revised and Posted	7/31/23	
2	252 41(4)(a)1.a Child Record - Enrollment Information Description The emergency contact listed for child 6 did not have a phone number or email listed.	Information will be Utlates.	7/31/23	

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3	252.41(4)(a)2 Child Record - Emergency Medical Consent Description Children 2, 3, and 6 did not a have permission from the parent for emergency medical treatment on file	Form has been sent out to be UPJates.	7/31/23	
4	252 41(4)(a)4. Child Record - Field Trip Authorization Description Children 2, 3, and 6 did not have field trip and transportation permission on file	Field triP Form has been signed and added to Child Files For children 2,3, and 6.	7/31/23	
5	252 41(4)(a)6.d. Child Record - Health History - Medical Contact Description Child 4, 5, and 6 did not have a physician or medical facility listed.	Families will be contacted and request any missing information.	7/31/23	
6	252 41(4)(a)6m. Child Record - Immunization History Description Children 2-5 were missing documentation of immunizations	Immunization Records have been collected and added to Child Files.	7/31/23	

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7	252 41(4)(a)8. Child Record - Swimming Ability Assessment Description Children 1, 4, and 5 were missing documentation of swimming ability assessment	Swimming Ability Will be added to Child Files.	7/31/23	
8	252 42(1)(a)1. Staff File - Personal Information Description. Staff C was missing information found in a staff record form.	Staff record form has Geen Fillet and added to Staff Files.	7/31/23	
9	252 42(1)(a)4 Staff File - Pre-Camp Training Description Staff C did not have documentation of having completed pre-camp training Repeat violation: Previously cited on 7/27/2021	Pre-camp Training Room will be added to State C, State File.	7/31/23	
10	252 42(2)(b)2 Camp Director - Age & Experience / Education Description The identified camp director did not have documentation of qualifications on file. Repeat violation Previously cited on 8/1/2022	Documentation has been absed for staff member.	7/31/23	

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	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
11	252 42(3)(e) Cardiopulmonary Resuscitation Training Description Staff B did not have documentation of CPR training on file. Staff A, D, and E had adult CPR training only. Repeat violation Previously cited on 7/27/2021	CPR certificate has been updated and added to Staff Files	7/31/23	
12	252 425(1)(b) Child Tracking Procedure Description Tracking was not accurate at the start of the visit. Two groups did not have tracking implemented when sixteen children were in care, but were not tracked by staff. Another group had 11 children in care with 10 children documented on tracking. A warning letter was issued on August 11, 2022. Repeat violation. Previously cited on 8/1/2022, 6/29/2022, 8/13/2021.	Camp Staff have been trained again on Tracking. Counselors will be tracking by Using the daily tracket Sheet.	7/28/23	
13	252 44(5)(d)1 Menus - Posted & Accessible Description: No breakfast or snack menus were posted for July. Repeat violation: Previously cited on 8/1/2022, 7/27/2021	Menus have been Posted. All Menus are up to date.	7/28/23	

	lame - Certified Operator / Licensed Center Provider Number / Facility ID Number			
Address - Facility (Street, City, State, Zip Code) Telephone Number			Date - Regulation Visit	
1301 W Hampton Ave Glendale WI 532096531		414-662-4297 Correction Plan	7/27/2023	
	Rule/Statute Number Noncompliance Statement	Correction Flan	Expected Completion Date	Verification Date
14	252 44(6)(e)4. Medication Storage - Current Authorization Description: A medication did not have an authorization.	Authorization Form Has been sent out	8/19/23	
15	252.44(6)(e)5 Authorization For Child To Carry Medication Description Two inhaler carned by children over the age of 7, did not have authorizations from the parent and physician allowing the child to carry the inhaler	Forms have been sent out to Families to Fill out.	8/19/23	

NAME - Agency Worker Cindy Matuszak

Date Issued 8/3/2023

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Diego Flores

Date Signed