

Date Correction Plan Due 4/16/2024	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)(f) and (3)(d), DCF 251.04(2)(L) and (3)(f), DCF 252.41(1)(L) and (2)(X). 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 Ymca Sacc At Rita Hite	Provider Number / Facility ID Number 1000558721 / 080 - 1005764
Address - Facility (Street, City, State, ZIP Code) 9250 N Green Bay Rd Brown Deer WI 532091104	Telephone Number 414-357-1950
	Date - Regulation Visit 3/27/2024

Rule/Statute Number	Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1 251.04(6)(a)5m. Child Record - Immunization History	Description: Child #1 did not have documentation of immunizations on file. Repeat violation: Previously cited on 9/30/2022	Immunizations will be added to child file	4/10/24	
2 251.055(1)(f) Child Tracking Procedure	Description: Tracking was inaccurately recorded with 12 children marked in on the tracking form and 14 on the other backup form. Thirteen children were present in attendance, and reported by teachers.	Staff will be retrained on tracking and expectations will be re set	4/10/24	

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NAME - Agency Worker

Sarah Stormont

Date Issued

4/2/2024

SIGNATURE - Certified Operator or Designee or Licensee or Designee



Date Signed

4/22/24