SENT VIA CERTIFIED MAIL AND REGULAR U.S. MAIL
Article No. 9589 0710 5270 0064 7109 59

October 9, 2026

David Morgan
YMCA SACC Stormonth Elementary
Attn: Stephanie Gayfield
9250 N. Green Bay Rd.
Brown Deer, WI 53209-1104

RE: WARNING LETTER OF NONCOMPLIANCE

YMCA SACC Stormonth Elementary
Facility ID Number: 1010648

Dear David Morgan/YMCA SACC Stormonth Elementary:

This letter constitutes a warning to you, David Morgan, regarding substantial non-compliances with Chapter 48, Wis. Stats., and/or DCF 251, Wis. Administrative Code in the operation of YMCA SACC Stormonth Elementary, a licensed group child care center. Failure to correct these non-compliances may result in further Department action.

This warning is based on the Department's findings by Licensing Specialists April Lynch and Crescenta Sabree during a visit to the center on September 29, 2026. The Department finds that you have failed to meet requirements for a group child care license in the following respect(s):

1. **DCF 251.05(2)(a)2.** states that documentation must exist of a completed background check from the department, either paper or electronic, that indicates a child care background check was completed in compliance with the timelines and requirements specified in s. 48.686, Stats., and ch DCF 13 and the person is eligible to work in a child care program. Contrary to 251.05(2)(a)2 there is no documentation of a completed background check from the department for staff B and D. **This rule was previously cited on August 20, 2026, May 21, 2026, February 21, 2025, and November 20, 2024.**

2. **DCF 251.06(2)(d)** states that materials harmful to children, including power tools, flammable or combustible materials, insecticides, matches, drugs, cleaning supplies, bleaches, and other hazardous, toxic, or poisonous articles shall be appropriately labeled and stored in areas inaccessible to children. Contrary to 251.06(2)(d) there were cleaning chemicals observed in the school lunch room on low shelves that were accessible to children. **This rule was previously cited on February 23, 2026, and April 9, 2026.**

A Noncompliance Statement and Correction Plan (DCF-F-CFS294) listing the code violations documented at this visit is attached and incorporated herein by reference.

The Department will continue to closely monitor YMCA SACC Stormonth Elementary to ensure that you come into compliance with the Wisconsin Statute and Administrative Code. Continued violation may result in licensing sanctions and penalties, pursuant to Wis. Stat. § 48.715, including, but not limited to, issuance of an order, assessment of forfeitures ranging from $10 to $1,000 per day, per violation, or actions to revoke your group child care license.

Please note that in accordance with Wis. Stat. § 48.657(2g), and Wis. Admin. Code § DCF 251.04(2)(L), the child care center shall post with the license any notice received from the Department relating to rule violations, including this warning letter. This notice must be posted in an area of the center that is visible to parents and must remain posted until the licensing specialist has verified the violations as corrected and in compliance at or before the next licensing site visit.

Please contact Licensing Specialist April Lynch at (414)-270-4731 if you have questions regarding this notice.

Sincerely,

Janette Cromell

Janette Cromell, Licensing Supervisor
Bureau of Early Care Regulation
DIVISION OF EARLY CARE AND EDUCATION

Attachment – CFS 294

cc: Randall Gasser, Regional Licensing Manager
Rhonda Brueggemann, Licensing Specialist
Bureau of Child Care Subsidy Administration
Waukesha Co
4C for Children
Department of Public Instruction
Wisconsin Early Care Association
Southeastern Regional Office Staff

INSTRUCTIONS FOR COMPLETING THE CORRECTION PLAN SECTION OF THE NONCOMPLIANCE STATEMENT AND CORRECTION PLAN (DCF-F-CFS294)

I have attached the Noncompliance Statement and Correction Plan (DCF-F-CFS294) dated October 09, 2026 . Please complete this form as follows:

1. In the column titled "Correction Plan," indicate how you intend to correct each noncompliance listed on the form and outline the steps you will take to prevent future violation of the same rule. If you need more space than is provided on the form, attach additional pages and identify the item number to which the correction plan is related. Because completed and approved correction plans will be scanned and linked to the Regulated Child Care and YoungStar Public Search internet site, which shows each provider's violations, please note the following when writing your correction plan:
   - Do not include confidential information, including the names of children and staff.
   - Write in concise, plain English.
   - Be specific when describing what you have done or intend to do to correct each violation. Non-specific statements such as "It will be fixed", "Done", "Will do", "Don't agree" or "This won't happen again" do not provide the reader with any understanding of how the violation has been corrected or how you plan to prevent the violation from occurring again.
   - Be objective, factual and descriptive. The plan should not include derogatory comments, profanity or subjective observations, such as "The licensing specialist doesn't like me."

2. For each noncompliance, enter the date (month, day, year) by which you expect the correction plan to be completed.

3. Sign and date the form. Retain a copy for your records.

4. **Return the completed and signed form to the department by the due date that appears at the top left of the form via:**
   - **Email:** April.Lynch@wisconsin.gov **or**
   - **Fax:** (262) 446-7991 **or**
   - **Mail:** DEPARTMENT OF CHILDREN AND FAMILIES
     BUREAU OF EARLY CARE REGULATION
     SOUTHEASTERN REGION
     635 N 26th ST

     MILWAUKEE, WI 53233

If the correction plan and the completion dates are acceptable, the form will be linked to the Regulated Child Care and YoungStar Public Search internet site. If the correction plan or the expected completion dates are not acceptable, you will be contacted in writing or by telephone.

You are required to post a copy of the Noncompliance Statement and Correction Plan (DCF-F-CFS294) in a conspicuous area near the license so that it is visible to parents. This copy must remain posted until all noncompliances have been verified as corrected and the next DCF-F-CFS294 or DCF-F-CFS785 (Compliance Statement) has been issued. Note: If applicable, do not post the Staff and Child Identification Key. The information on the key is confidential and is meant for your reference only.

Please take a few minutes to complete the Department of Children and Families (DCF) customer satisfaction survey so that you can tell us about your experience. The responses we receive to the survey will be compiled and reviewed by DCF staff to help us improve our services to child care providers. The survey takes approximately 5 minutes to complete. It is voluntary and anonymous, and there is no penalty for not responding. DCF staff will not be able to tell whether or not you responded to the survey or know what responses you submitted. Please follow this link to provide your feedback: https://www.surveymonkey.com/r/LicenseFeedback. Or, if you don't have internet access, contact your licensing office and request a paper version of the survey and a prepaid reply envelope.

Contact me if you have any questions.

Date Correction Plan Due 10/23/2026	**NONCOMPLIANCE STATEMENT AND CORRECTION PLAN**	**TO FILE A COMPLAINT CALL** 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.

Name - Certified Operator / Licensed Center		**Provider Number / Facility ID Number**	
Ymca Sacc Stormonth Elementary		1000558721 / 111 - 1010648	
Address - Facility (Street, City, State, Zip Code) 7301 N Lombardy Rd Fox Point WI 532173532	**Telephone Number** 414-357-1934	**Date - Regulation Visit** 9/29/2026	

	Rule/Statute Number Noncompliance Statement	**Correction Plan**	**Expected Completion Date**	**Verification Date**
1	251.04(6)(a)1. **Child Record - Enrollment Information** Description: 251.04(6)(a)1 states enrollment information shall be kept on file including emergency contact and authorized pickup information. Contrary to 251.04(6)(a) Child 1 was missing emergency contact information. Children 2 and 5 were missing authorized pickup information.	Contacted parents to get proper emergency contact and authorization information.	10/30/2026	

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2	251.05(2)(a)1. **Staff Record - Personal Information** Description: 251.05(2)(a)1. states that the employee's name, address, date of birth, education, position, previous work experience in child care, including the reason for leaving previous positions, and the name, address, and telephone numbers of persons to be notified in an emergency. (May use Staff Record - Child Care Centers form). Contrary to Staff 251.05(2)(a)1. the staff record form was missing for staff A,C, and D.	Auditing Staff Files to make sure all documents are filed correctly, waiting on agency worker to send list of staff to cross reference what is missing.	11/25/2026	
3	251.05(2)(a)2. **Staff Record - Completed Background Check** Description: 251.05(2)(a)2. states that documentation must exist of a completed background check from the department, either paper or electronic, that indicates a child care background check was completed in compliance with the timelines and requirements specified in s. 48.686, Stats., and ch DCF 13 and the person is eligible to work in a child care program. Contrary to 251.05(2)(a)2 there is no documentation of a completed background check from the department for staff B and D. Repeat violation: Previously cited on 8/20/2026, 5/21/2026, 2/21/2025, 11/20/2024	Auditing Staff Files to make sure all documents are filed correctly, waiting on agency worker to send list of staff to cross reference what is missing.	11/25/2026	

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4	251.05(2)(a)3.a. **Staff Record - Physical Examination** Description: 251.05(2)(a)3.a. states that a report on a physical examination that was completed not more than 12 months prior to nor more than 30 days after the person was hired shall be included in the staff file. Contrary to 251.05(2)(a)3.a., staff A,B,C and D did not have a health report on file. Repeat violation: Previously cited on 2/23/2026	Auditing Staff Files to make sure all documents are filed correctly, waiting on agency worker to send list of staff to cross reference what is missing.	11/25/2026	
5	251.05(2)(a)4.a. **Staff Record - Registry Certificate** Description: 251.05(2)(a)4.a. states that each staff record must include a registry certificate from the Wisconsin Registry documenting that the person has met the educational qualifications for the position under sub. (3). Contrary to 251.05(2)(a)4.a., staff C, and D did not have a WI Registry certificate on file.	Auditing Staff Files to make sure all documents are filed correctly, waiting on agency worker to send list of staff to cross reference what is missing.	11/25/2026	
6	251.05(2)(a)5. **Staff Record - High School Diploma** Description: 251.05(2)(a)5., states that each staff person is required to have a high school diploma or its equivalent, documentation of a high school diploma or its equivalent as determined by the Wisconsin department of public instruction. Contrary 251.05(2)(a)5., staff C did not have documentaion iof a high school diploma or its equivalent on file.	Auditing Staff Files to make sure all documents are filed correctly, waiting on agency worker to send list of staff to cross reference what is missing.	11/25/2026	

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7	251.05(2)(a)7. **Staff Record - Continuing Education** Description: 251.05(2)(a)7., states that each staff record must include documentation of compliance with continuing education requirements under sub. (4) (c). Contrary to 251.05(2)(a)7., Staff E hired 9/29/2015, did not have documentation of completd continuing education for 2025.	Auditing Staff Files to make sure all documents are filed correctly, waiting on agency worker to send list of staff to cross reference what is missing.	11/25/2026	
8	251.05(2)(a)8. **Staff Record - Orientation** Description: 251.05(2)(a)8., states that each staff record must include documentation of compliance with orientation requirements under sub. (4) (a). Contrary to 251.05(2)(a)8., staff C and D did not have documentation of compliance with orientation requirements on file.	Auditing Staff Files to make sure all documents are filed correctly, waiting on agency worker to send list of staff to cross reference what is missing.	11/25/2026	
9	251.05(3)(b) **Abusive Head Trauma Prevention Training** Description: 251.05(3)(b) states each child care worker counted in staff-to-child ratio, or substitute who provides care and supervision to children under 5 years of age shall document completion of department approved training in abusive head trauma prevention. Contrary to 251.05(3)(b) Staff A and D did not have a current training certificate of completion of abusive head trauma on file. Repeat violation: Previously cited on 4/9/2025	Auditing Staff Files to make sure all documents are filed correctly, waiting on agency worker to send list of staff to cross reference what is missing.	11/25/2026	

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10	251.05(3)(c) **Cardiopulmonary Resuscitation Training** Description: 251.05(3)(c) states that all employees in regular contact with children shall obtain, maintain and place in the employee's file a current certificate of completion for infant and child cardiopulmonary resuscitation and automated external defibrillator use from an agency approved by the department within 3 months after beginning to work with children in care, and for volunteers included in ratio, required after volunteering for 240 hours. Contrary to 251.05(3)(c) staff B, and C did not have a current CPR training certificate of completion on file. Repeat violation: Previously cited on 4/9/2025	Auditing Staff Files to make sure all documents are filed correctly, waiting on agency worker to send list of staff to cross reference what is missing.	11/25/2026	
11	251.05(3)(cm) **Child Abuse & Neglect - Biennial Training** Description: 251.05(3)(cm) states that within one week after beginning work at the center and at least every 2 years thereafter, each employee or volunteer who comes in contact with children in care shall complete training in child abuse and neglect. Contrary to 251.05(3)(cm), staff A, B, and D did not have a current training certificate of completion for child abuse and neglect on file. Repeat violation: Previously cited on 4/9/2025	Auditing Staff Files to make sure all documents are filed correctly, waiting on agency worker to send list .of staff to cross reference what is missing	11/25/2026	

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12	251.06(2)(d) **Access To Materials Potentially Harmful To Children** Description: 251.06(2)(d) states that materials harmful to children, including power tools, flammable or combustible materials, insecticides, matches, drugs, cleaning supplies, bleaches, and other hazardous, toxic, or poisonous articles shall be appropriately labeled and stored in areas inaccessible to children. Contrary to 251.06(2)(d) there were cleaning chemicals observed in the school lunch room on low shelves that were accessible to children. Repeat violation: Previously cited on 2/23/2026, 4/9/2025	School will remove their cleaning supplies form the lunchroom during program hours.	10/23/2026	
13	251.06(3)(b)4. **Emergencies - Record Of Fire / Tornado Drills** Description: 251.06(3)(b)4 states that the center must keep a written record of dates and times of all fire and tornado drill practiced. Contrary to 251.06(3)(b)4 a written record of fire and tornado drills practiced was Missing for May 2026 and June of 2026.	Drills were conducted in Many and June, just not documented. Staff will document drills moving forward.	9/29/2026	
14	251.07(6)(dm)2. **Medical Log - Pages & Entries** Description: 251.07(6)(dm)2., states that pages may not be removed from the medical log book under subd. 1. and lines may not be skipped. Each entry in the log book shall be in ink, dated, and signed or initialed by the person making the entry. Contrary to 251.07(6)(dm)2, pages in each of the log books reviewed were skipped.	Medical log was fixed day of visit, pages were corrected. Review with staff was conducted on how to use medical logs appropriately.	9/29/2026	

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15	251.07(6)(dm)4. **Medical Log - Reviewing Injury Records** Description: 251.07(6)(dm)4 states that the director or the director's designee shall review records of injuries with staff every 6 months to ensure that all possible preventive measures are being taken. The reviews shall be documented in the medical log book under subd. 1. Contrary to 251.07(6)(dm)4., the medical log book was not reviewed within the last 6 months.	. Medical log will be review by Director or Site Supervisor in Oct. and April of each year.	10/23/2026	
16	251.094(4)(b)3. **School-Age Program Leader - Experience** Description: 251.094(4)(b)3., states a school-age program leader is to have at least 240 hours of experience as a group leader, school-age assistant, public or private school teacher, student teacher or practicum, coach, camp counselor, mentor through a community-based organization, or in another approved setting. Contrary to 251.094(4)(b)3., there was no documentation on file documenting school-age program leader experience for staff A, C and D.	Auditing Staff Files to make sure all documents are filed correctly, waiting on agency worker to send list .of staff to cross reference what is missing	11/25/2026	
17	251.094(5)(c)3. **School-Age Group Leader - Training** Description: 251.094(5)(c)3 states school age group leader should have a record of competed training of school-age training course on record. Contrary to 251.094(5)(c)3 the staff files had no record of completed school-age training.	Auditing Staff Files to make sure all documents are filed correctly, waiting on agency worker to send list .of staff to cross reference what is missing	11/25/2026	

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	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date

NAME - Agency Worker
April Lynch, Crescenta Sabree

Date Issued
10/9/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee
Stephanie Gayfield

Date Signed
10/23/2026