

Date Correction Plan Due 8/12/2024	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)(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		
Phantom Lake Ymca Camp		3000557283 / 001 - 245006		
Address - Facility (Street, City, State, Zip Code)		Telephone Number	Date - Regulation Visit	
S110w30240 Ymca Camp Rd Mukwonago WI 53149		262-363-4386	7/25/2024	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	252.43(2)(b) Accessible Toxic Substances, Power Tools Description: Insect spray left on the ground outside the swimming area accessible to children.	<i>All insect spray will be required to be locked in swim box with other equipment</i>		
2	252.43(3)(c) Fire Protection Facilities & Equipment Maintenance & Inspections Description: Fire extinguisher in lodge not in proper working condition	<i>All broken or non functioning fire extinguishers will be disposed of properly and replace with working ones</i>		

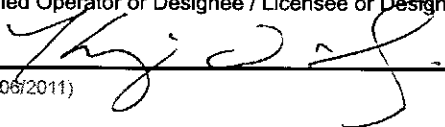
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3	252.44(6)(g)4. Medical Log - Review Description: No monthly review of medical log book documented Repeat violation: Previously cited on 7/27/2022	Medical log book will be reviewed monthly by head nurse and date reviewed will be documented in log book.	
4	252.44(6)(i)7. Sun Protection, Sun Screen, Insect Repellent Description: Sunscreen carried by children not labeled with the child's name. Camp staff unable to find written authorization for sunscreen	written authorization for the use of sunscreen will be specified in pre camp forms. All children's sunscreen will be labeled with their name at the start of each week.	

NAME - Agency Worker
Paul Spink

Date Issued
7/29/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed



8/11/24