

Date Correction Plan Due 4/6/2026	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 920-785-7811
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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 Neenah-Menasha Ymca Child Dev Ctr		Provider Number / Facility ID Number 5000560455 / 029 - 420513		
Address - Facility (Street, City, State, Zip Code) 110 W North Water St Neenah WI 54956		Telephone Number 920-886-2160	Date - Regulation Visit 3/19/2026	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.06(2)(n) Garbage Containers - Construction & Disposal Schedule Description: Based on observations on 3/19/26, there was a garbage can with food in it without a cover in the Porcupine room.	- tamp down waste that is at/near top of waste can - add additional waste container to classroom - change waste bag mid-day as needed	3/27/2026	
2	251.07(6)(f)1.a. Medication Administration - Parent Authorization Description: Based on record review on 3/19/26, there was a medication authorization form without a start and end date in the Porcupine room. Repeat violation: Previously cited on 2/5/2025	- look closely at document returned by family; pay attention to dates & include start/end dates - return to parent to complete when not correct - admin will review documents	3/27/2026	

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Noncompliance Statement			

NAME - Agency Worker
Dao Xiong

Date Issued
3/23/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed
3/24/2026

Mary Siebert