Date Correction Plan Due

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.

notice of the sanction and / or penalty and your appeal rights. Name - Certified Operator / Licensed Center Provider Number / Facility ID Numb			mber	
Ymc	a St. Jerome's Y Care	8000558698 / 031 - 2004628		
	ress - Facility (Street, City, State, Zip Code) 1 S Silver Lake St Oconomowoc WI 530664267	Telephone Number 262-567-9622	Date - Regulation Visit 11/29/2023	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.04(1)(a) Licensed Capacity Description: At the beginning of the monitoring visit, the program was overcapacity by 1 child. Three other children were set to arrive after their extra-curricular activities. A review of the weekly attendance revealed the program was overcapacity by 1 child on 11/28/2023.	Program adjusted (reduced enrollment) to meet current capacity. Increased capacity requested for program with additional school spaces.	1/5/24	
2	251.04(6)(a)1. Child Record - Enrollment Information Description: Physician/medical facility information was not observed on file for Child #3.	Updated Child's paperwork with family for information to be updated/added.	1/12/24	

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	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3	251.04(6)(a)6. Child Record - Health History Description: The health history was observed incomplete for Child #1.	Care plan/information added to health history. Document- ation has been added to child's record.	12/21/23	
4	251.04(6)(a)6m. Child Record - Immunization History Description: Documentation regarding immunization information was observed incomplete for Child #2 and Child #3.	Complete records requested for these child records from their family.	1/15/24	
5	251.05(2)(a)5. Staff Record - High School Diploma Description: Documentation of a high school diploma or its equivalent was not observed on file for Staff B.	Record of Staff's High school transcripts added to staff file for future review.	12/21/23	
6	251.05(2)(a)7. Staff Record - Continuing Education Description: Documentation regarding complete continuation hours for the 2022-2023 year were not observed for Staff C.	updated and corrected continuing education tracking with employee to reflect all training hours and in chronological order.	1/5/24	

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	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
7	251.05(3)(b) Abusive Head Trauma Prevention Training Description: Documentation of abusive head trauma training was not observed on file for Staff C.	Training certification added to staff record. Available for future review.	12/17/2023	
8	251.05(3)(c) Cardiopulmonary Resuscitation Training Description: A current infant/child CPR/AED certificate was not observed for Staff A and Staff B.	Emergency Medical Responds Certificate on file for Staff B. Both staff registered for certification and renewal.	1/15/24	
9	251,06(9)(d)1.c. Food Storage - Cold Storage Thermometers Description: The thermometer in the refrigerator was observed broken. The freezer did not contain a thermometer.	Corrected food storage with staff and added new thermometers to both fridge and freezer.	1/4/24	
10	251.07(6)(i)2. Adult Handwashing Description: Staff's hands were not washed prior to handling snacks.	Reviewed and corrected food safety of proper hand washing with staff team.	12/17/23	

Name - Certified Operator / Licensed Center Ymca St, Jerome's Y Care Address - Facility (Street, City, State, Zip Code) 1001 S Silver Lake St Oconomowoc WI 530664267		Provider Number / Facility ID Number 8000558698 / 031 - 2004628			
					Telephone Number Date - Re 262-567-9622 11/29/20
			Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date
11	251.094(6)(b) School-Age Program Aide - Age Description: The designated program aide, Staff C, is not 16 years of age. Staff C is 15 years at the time of the monitoring visit.	An exception has been Submitted. Our staff under 18 years old are not counted in child/staff ratios and are never alone with a child.	1/19/24		

NAME - Agency Worker	Date Issued	
Crescenta Sabree	12/14/2023	
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SIGNATURE - Certified Operator or Designee / Licensee or Designee	Date Signed	
TM-PMCDIOLE	11412024	
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