Date Correction Plan Due	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL
7/21/2026		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 Child Care	8000558698 / 001 - 1006942

Address - Facility (Street, City, State, Zip Code)	Telephone Number	Date - Regulation Visit
1750 Valley Rd Oconomowoc WI 530666999	262-567-9622	7/1/2026

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.06(11)(b)5. **Outdoor Play Space - Energy-Absorbing Surfaces** Description: Energy absorbing surfacing on the outdoor space was not at a depth of nine inches under swings, and slides.	Woodchips were ordered they were installed 7/2/26 and rake was brought out to keep level	7/2/26	
2	251.06(2)(n) **Garbage Containers - Construction & Disposal Schedule** Description: A full garbage bag was observed to be attached to the fence in the outdoor play space, not in a covered, watertight container.	Bag was removed new garbages w/ lids purchased	7/9/26	

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3	251.07(6)(f)1.a. **Medication Administration - Parent Authorization** Description: A medication in the 4K room did not have an end date listed on the authorization.	Had parent correct form, all other meds were checked and staff was reminded of proceedure	7/3/26	
4	251.07(6)(f)1.b. **Medication Administration - Containers & Labeling** Description: A medication in the 4K room was not labeled with the child's name.	medication was labeled and all others checked staff was retrained on proceedure	7/2/26	

NAME - Agency Worker
Cindy Matuszak

Date Issued
7/3/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee
Kimberly J Schewe

Date Signed
7/10/2026