

NONCOMPLIANCE STATEMENT AND CORRECTION PLAN

TO FILE A COMPLAINT CALL
262-446-7800

Date Correction Plan Due
3/20/2026

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, 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

Y C Family Day Care

2000565772 / 004 - 1011580

Address - Facility (Street, City, State, Zip Code)
1651 N 28Th St Milwaukee WI 532082004

Telephone Number
414-418-7844

Date - Regulation Visit
3/3/2026

**Rule/Statute Number
Noncompliance Statement**

Correction Plan

**Expected
Completion Date**

**Verification
Date**

1 250.04(6)(a)4m.

Child Record - Immunization History Compliance

Description: There was no documentation of an immunization history for Child 1.

* Request the parent to get an immunization update on child 1

3/26/26

2 250.06(2)(e)

Potential Source Of Harm On Premises

Description: There were several items in the outdoor play space that could be a potential source of harm to children in care. The items include an old toilet, trash bags, grills and beer bottles.

* Have removed and clean the outdoor play space

3/11/26

NAME - Agency Worker
Rhonda Brueggemann, Mindi Sabljak

Date Issued
3/5/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Rhonda Brueggemann

Date Signed

3/12/26