DEPARTMENT OF CHILDREN AND FAMILIES
Division of Early Care and Education

STATE OF WISCONSIN

Date Correction Plan Due	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL
12/31/2025		920-785-7811

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
Sheboygan Ymca Youth Development Center	8000557178 / 001 - 420695

Address - Facility (Street, City, State, Zip Code)	Telephone Number	Date - Regulation Visit
812 Broughton Dr Sheboygan WI 530814115	920-451-8000	7/14/2025

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.055(1)(a) **Supervision Of Children** Description: Based upon staff statement and self report, on July 7, 2025, a child enrolled in care was out of sight and sound supervision for approximately one minute when the child left the YMCA locker room after swim lessons and ran through the YMCA to the child care center entryway in the main lobby of the YMCA. The worker was aware the child left and requested assistance immediately.	The childs parents were notified and future incidents of running from the group would result in termination of care. The incident was reviewed with staff to better understand the seriousness of the situation. Protocol was also discussed with the staff to prevent this in the future.	7/15/25	

NAME - Agency Worker
Amanda Holz

Date Issued
12/17/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed
11/17/26