

Date Correction Plan Due 3/26/2026	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 608-422-6765
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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, 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 Kids Prairie View		9000556279 / 005 - 1000462	
Address - Facility (Street, City, State, Zip Code) 510 N Crystal Lake Rd Beaver Dam WI 539161993		Telephone Number 920-887-8811	Date - Regulation Visit 3/9/2026
Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1 251.07(6)(dm)4. Medical Log - Reviewing Injury Records Description: Records were not reviewed every 6 months to ensure that all possible preventive measures are being taken when the medical log book was last reviewed last 08/27/2025.	Will make sure the log book gets reviewed in accordance with regulation and appoint a designee if need be.	3/20/26	
2 251.07(6)(f)1.a. Medication Administration - Parent Authorization Description: A written medication authorization had a blanket authorization which exceeds the length of time specified on the medication label. Repeat violation: Previously cited on 4/18/2024	Will make sure the parent is spoken to and form gets filled out properly.	3/27/26	

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NAME - Agency Worker
 Kimberly Liebhart

Date Issued
 3/12/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Kimberly Liebhart
 3/17/26