

<b>Date Correction Plan Due</b> 3/9/2026	<b>NONCOMPLIANCE STATEMENT AND CORRECTION PLAN</b>	<b>TO FILE A COMPLAINT CALL</b> 262-446-7800
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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 or a future finding, you will be given a notice of the sanction and / or penalty and your appeal rights.

<b>Name - Certified Operator / Licensed Center</b> Kids Castle-Pleasant Prairie		<b>Provider Number / Facility ID Number</b> 7000581587 / 016 - 2004143	
<b>Address - Facility (Street, City, State, Zip Code)</b> 9208 Wilmot Rd Pleasant Pr WI 531582007		<b>Telephone Number</b> 262-515-3160	<b>Date - Regulation Visit</b> 2/20/2026
	<b>Rule/Statute Number Noncompliance Statement</b>	<b>Correction Plan</b>	<b>Expected Completion Date</b>
1	251.05(2)(a)3.a. <b>Staff Record - Physical Examination</b>  Description: Staff E did not have on file documentation of a physical examination within 30 days of employment at the center.  Repeat violation: Previously cited on 1/17/2025	Staff has been given final notice + deadline of missing Required Document.	3/10/26
2	251.07(6)(f)1.a. <b>Medication Administration - Parent Authorization</b>  Description: Medication authorization that was on file did not have a <input type="checkbox"/> start <input type="checkbox"/> and <input type="checkbox"/> end <input type="checkbox"/> date.	Staff have been retrained on medication form requirements and will work with the parent	3/10/26

to fill in the missing info.

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3	251.07(6)(f)6. <b>Current Authorizations For Medications On Premises</b>  Description: Medication was kept on premise without a current medication authorization and the medication, itself, had expired.	Staff have been retrained on proper medication procedures and documentation. They will work with the parent to get updated info.	3/10/26

**NAME - Agency Worker**  
Jennifer Brees

**Date Issued**  
2/23/2026

**SIGNATURE - Certified Operator or Designee / Licensee or Designee**

*Anahela Honey*

**Date Signed**  
2/26/26