Date Correction Plan Due 3/3/2026	**NONCOMPLIANCE STATEMENT AND CORRECTION PLAN**	TO FILE A COMPLAINT CALL 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**
Kids Castle - Ruth Harman	7000581587 / 012 - 2001480

Address - Facility (Street, City, State, Zip Code)	**Telephone Number**	**Date - Regulation Visit**
8518 22Nd Ave Kenosha WI 531436455	262-652-8287	2/6/2026

	Rule/Statute Number **Noncompliance Statement**	**Correction Plan**	**Expected Completion Date**	**Verification Date**
1	251.04(6)(a)6m. **Child Record - Immunization History** Description: No immunization records in child file reviewed	Staff was not able to get the record from the schools office. we are implementing a new procedure to collect printed copy for easier access when required.	4/30/26	
2	251.055(1)(f) **Child Tracking Procedure** Description: Child tracking not completed properly, 11 children documented, 12 present	Child was originally reported as not attending by the parent so staff marked him absent when he came staff wrote his time in over the absent note	2/6/26	
3	251.06(2)(d) **Access To Materials Potentially Harmful To Children** Description: Disinfectant spray stored in open, accessible cabinet	Staff has been retrained on procedures to lock cabinet where cleaning spray is stored	3/2/26	

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	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
4	251.06(2)(gm) **Premises - Well Drained, Clean, In Good Repair** Description: Restroom facilities were observed as unsanitary with excessive litter all over the floors and facilities used by children enrolled in the program	School Custodial staff are required to clean bathrooms between school end and after School start. Staff will check and tidy bathrooms as needed before after school use	3/2/26	
5	251.07(5)(a)5.b. **Menus - Plan** Description: Menu did not document AM snacks as required. AM snacks simply indicated □teacher□s choice□ without record of actual foods served	Staff have been retrained on recording snack served. They will write in what is offered each AM.	2/6/26	

NAME - Agency Worker
Paul Spink

Date Issued
2/17/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee
Andrea Honey

Date Signed
2/26/26