

Date Correction Plan Due 2/21/2024	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 920-785-7811
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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.

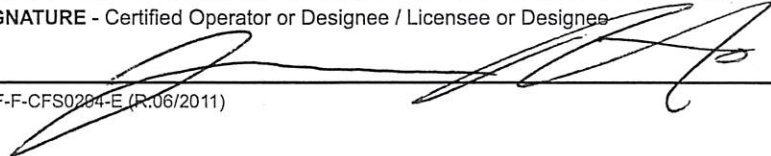
Name - Certified Operator / Licensed Center Three Sisters Head Start		Provider Number / Facility ID Number 8000560408 / 004 - 1007586		
Address - Facility (Street, City, State, Zip Code) 2801 W Mason St Green Bay WI 543135009		Telephone Number 920-496-5201	Date - Regulation Visit 1/25/2024	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.05(2)(a) Staff Record - Maintenance & Availability Description: The center had a file with only the name and start date of an employee on site. No other information was in the file at the time of the visit. Repeat violation: Previously cited on 1/17/2024	We are working diligently to update and complete all staff files. We will make sure, that all needed staff information will be completed and attached into all staff files.	02/26/2024	
2	251.05(2)(a)2. Staff Record - Completed Background Check Description: A person was allowed to work in the child care program prior to receiving an eligible background check and continued to work after being deemed ineligible. Repeat violation: Previously cited on 11/15/2022	That ineligible person is no longer working in this department. She was terminated immediately. We are working with Oneida HRD to change and correct our background check process.	01/25/2024	

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NAME - Agency Worker
Jody Beyer

Date Issued
2/7/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee



Date Signed

2/7/2024