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| Date Correction Plan Due 12/20/2024 | NONCOMPLIANCE STATEMENT AND CORRECTION PLAN | TO FILE A COMPLAINT CALL 715-361-7700 |
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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 Family Forum Head Start Center 7 | | Provider Number / Facility ID Number 9000577839 / 005 - 620370 | | |
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| Address - Facility (Street, City, State, Zip Code) 301 13Th Ave E Ashland WI 548062135 | | Telephone Number 715-682-5035 | Date - Regulation Visit 11/22/2024 | |
| | Rule/Statute Number Noncompliance Statement | Correction Plan | Expected Completion Date | Verification Date |
| 1 | 251.05(2)(a)8. Staff Record - Orientation Description: Staff D did not have documentation of staff orientation on file. | <ul style="list-style-type: none"> • Staff orientation form is located in a "new" staff members binder. It follows them for 3-5 days. • Human Resources collects the orientation form from staff member & places in file at Superior Office | 12/8/2024 12/30/2024 | |
| 2 | 251.05(3)(cm) Child Abuse & Neglect - Biennial Training Description: Staff H did not have documentation on file that biennial mandated reporter training was completed. | <ul style="list-style-type: none"> • Staff person H completed child abuse / mandatory reporting • File reviews will be conducted monthly by leadership. • Staff have been informed & required to check emails daily as this is the main communication plan for all staff. | 12/12/2025 12/20/2025 12/13/2024 11/13/2025 | |

NAME - Agency Worker
Bonnie Davis

Date Issued
12/6/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed

12/16/2024