

Date Correction Plan Due 5/30/2025	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 Lennie's House		Provider Number / Facility ID Number 7000585097 / 001 - 1012857		
Address - Facility (Street, City, State, Zip Code) 3546 Glen Abbey Dr Green Bay WI 54311		Telephone Number 920-469-7588	Date - Regulation Visit 4/17/2025	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	250.04(6)(b) Current, Accurate Daily Attendance Record Description: Based on record review the attendance failed to be current and accurate when 9 children were signed into care on 3/28/25. Licensing specialist spoke to a parent whom stated one of her children were there a few days during the week but couldn't say specifically which one. Provider stated mom works from home and is a neighbor so comes and goes days provider failed to sign out.	I will sign in card out the neighbor when she comes and goes.	4-18-25	
2	250.06(3)(b) Emergency Plans - Practice Description: Based on record review on 4/17/25 the program failed to conduct a fire drill in the month of March 2025.	I will make sure to do fire drills and tornado drills on same day each month.	5-19-25	

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3	250.06(4)(a)3. Smoke Detectors - Testing Description: Based on record review on 4/17/25 the program failed to test the smoke detectors in the month of March 2025.	I will test the smoke detector when I do the fire drills each month.	5-19-25

RECEIVED
NERO - GREEN BAY

JUN 03 2025

**DEPT. OF CHILDREN
& FAMILIES**

NAME - Agency Worker
Cassandra Debauche

Date Issued
5/16/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Lennie Ann Pickett

Date Signed
5-27-25