PAGE 2/4 RECD 7/22/2026 8:20:47 AM [Central Daylight Time] PRD 082265479

07-22-'26 08:19 FROM-

DEPARTMENT OF CHILDREN AND FAMILIES
Division of Early Care and Education

STATE OF WISCONSIN

Date Correction Plan Due 7/7/2026	**NONCOMPLIANCE STATEMENT AND CORRECTION PLAN**	TO FILE A COMPLAINT CALL 920-785-7811

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**
Montessori Children's House Inc	1000557211 / 001 - 420678

Address - Facility (Street, City, State, Zip Code)	**Telephone Number**	**Date - Regulation Visit**
1907 N 20Th St Sheboygan WI 53081	920-458-0510	5/4/2026

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.04(3)(k)1. **Report - Law Enforcement Contact - Harm** Description: On 12/23/2025, Law Enforcement was called to the center due to a child care worker being under the influence of alcohol while on the premises of the center. This contact was not reported to the Department.	We added all person State and police will be notified of use of drug alchohol at work will be reported (Added to staff hand book and automatice termination of staff	7/21/26	
2	251.055(1)(a) **Supervision Of Children** Description: On 05/04/2026, it was observed that children are leaving the 3-6-year-old classroom without the child care worker's knowledge and using the bathroom unsupervised. Repeat violation: Previously cited on 11/13/2024	Children will be taken in small groups to the bathroom by a staff to the Bathroom, with 100% Supervision While maintaing class ratios. Door will remained Closed to Classroom.	7/21/26	

T-010 P0002/0004 F-016

Name - Certified Operator / Licensed Center	Provider Number / Facility ID Number
Montessori Children's House Inc	1000557211 / 001 - 420678

Address - Facility (Street, City, State, Zip Code)	Telephone Number	Date - Regulation Visit
1907 N 20Th St Sheboygan WI 53081	920-458-0510	5/4/2026

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3	251.055(1)(f) **Child Tracking Procedure** Description: The provider failed to adhere to a procedure to ensure that the number, names, and whereabouts of children in care are known to assigned child care workers at all times when on 05/04/2026 children were observed in the bathroom without the knowledge of the child care worker. In addition, there is no tracking completed when children move from the opening classroom to their regularly assigned classrooms.	Staff and children will be moved on our program when subs or movement of children are needed to maintain S.Lisc. Ratios an open/close room has been created on Child pilot App.	7/20/26	
4	251.055(1)(j) **Contact With Children - Alcohol, Controlled Substances** Description: On 12/23/2025, a child care worker was under the influence of alcohol while on the premises of the center.	A Review of policies were reviewed at our 7/21/26 staff meeting if this happens State will be contacted automatic termination.	7/22/26	
5	251.055(2)(a) **Group Size - Maximum** Description: On April 22, 2026, maximum group size was exceeded when attendance records showed 9 infants under the age of 2 in care with 2 child care workers.	-Enrollment will be Within Ratio guidelines of State Liscensing rules and Regulations	7/17/26	

NAME - Agency Worker
Erin Taylor

Date Issued
6/30/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee
Lisa L. Kenyon - director

Date Signed
7/16/2026

07-22-'26 08:20 FROM-

T-010 P0003/0004 F-016