

Plan of Correction

SECTION A - IDENTIFYING INFORMATION

Facility Name: WETUMPKA PRESCHOOL & CDC	Type of Facility: Center <input checked="" type="checkbox"/> OST <input type="checkbox"/> Day <input checked="" type="checkbox"/> Family <input type="checkbox"/> University <input type="checkbox"/> Night <input type="checkbox"/> Group <input type="checkbox"/>
Physical Address: 502 NORTH BRIDGE STREET WETUMPKA, AL 36092	Mailing Address: 502 NORTH BRIDGE STREET WETUMPKA, AL, 36092
Telephone Number: (334) 567-4689	Licensee: GATEWAY INC.
Capacity: 76	Director: DEBORAH JOHNSON
Age Range: 6 Weeks to 12 Years	Date Prepared: 5/13/2026

SECTION B - BASIS FOR PLAN OF CORRECTION

List each deficiency, the plan of action, and the target date for each item:

Deficiency Plan of Correction	Date to be completed
Failed - Electrical outlets covered, Classroom Checklist / Infants Plan of Action - Corrected during visit.	5/13/2026
Failed - Outdoor play area and equipment are free of apparent hazardous conditions, Inspection Form Plan of Action - Maintenance contacted	5/14/2026
Failed - Fence or wall free of sharp edges, Inspection Form Plan of Action - Maintenance contacted	5/14/2026
Failed - Outdoor play area free of apparent hazardous conditions:, Inspection Form Plan of Action - Maintenance contacted	5/14/2026
Failed - Thermometer in each area used by children, Inspection Form Plan of Action - Purchased	5/14/2026