

## Plan of Correction

### SECTION A - IDENTIFYING INFORMATION

Facility Name: V.I.P CHILDCARE	Type of Facility:    Center [ ] OST [ ] Day [X]                    Family [X] University [ ] Night [ ]                    Group [ ]
Physical Address: 6081 JOHNS ROAD HUEYTOWN, AL 35023	Mailing Address: 6081 JOHNS ROAD HUEYTOWN, AL, 35023
Telephone Number: (517) 574-2580	Licensee: ARTORIAN WEBSTER
Capacity: 10	Director:
Age Range: 0 Weeks to 16 Years	Date Prepared: 6/16/2026

### 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 - Medical, Staff Checklist Plan of Action - make appointment for medical eval.	6/30/2026
Failed - Medical, Staff Checklist Plan of Action - make medical appointment.	6/30/2026
Failed - Immunization Certificate, Child Checklist Plan of Action - request from parent	6/30/2026