

Plan of Correction

SECTION A - IDENTIFYING INFORMATION

Facility Name: BOYS AND GIRLS CLUB-BERNARD MALKOVE	Type of Facility: Center ☐ OST ☐ Day ☒ Night ☐ Family ☐ University ☒ Group ☐
Physical Address: 35 CODY ROAD NORTH MOBILE, AL 36608	Mailing Address: P.O. BOX 6724 MOBILE, AL, 36660-_____
Telephone Number: (251) 432-1235	Licensee: BOYS AND GIRLS CLUB-BERNARD MALKOVE
Capacity: 147	Director: JEMINA WILLIAMS
Age Range: 6 Years to 18 Years	Date Prepared: 7/22/2026

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 - I will update Eric folder with medical file once he completes it and I receive it.	7/31/2026
Failed - Outdoor area, Inspection Form Plan of Action - All deficiencies will start being addressed immediately. The gas can have already been removed. The well drain, the fencing and everything has already been submitted to the main office administrators and safety & facility manager.	8/31/2026
Failed - Area well-drained, Inspection Form Plan of Action - I have reported this issue to the safety and facility manger along with the CEO and Operation manager to start repairs on the drain under the fence.	7/24/2026