

Plan of Correction

SECTION A - IDENTIFYING INFORMATION

Facility Name: KIMBERLY CARE CHRISTIAN	Type of Facility: Center ☒ OST ☐ Day ☒ Night ☐ Family ☐ University ☐ Group ☐
Physical Address: 956 MOBILE ST MOBILE, AL 36617	Mailing Address:
Telephone Number: (251) 348-5034	Licensee: KIMBERLY W. FEGGINS
Capacity: 56	Director: KIMBERLY FEGGINS
Age Range: 6 Weeks to 12 Years	Date Prepared: 7/24/2026

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
QUALIFICATIONS OF STAFF, Allegation Plan of Action - I PLAN TO CONDUCT ONBOARDING, REQUIRE ORIGINAL HARD COPY OF ALL DOCUMENTS AND PLACE RESTRICTIONS ON LOCK AND KEYED FILES SO THEY CAN'T BE TAMPED WITH.	6/2/2026
REPORTED 24 HRS/5 DAYS, Allegation Plan of Action - I plan to report any AND ALL ISSUES REGARDING THE CHILDREN WITH IN 24 HOURS.BIG OR SMALL.	6/2/2026
In the three years to four years classroom the class was out of ration due to a staff member having an incomplete file in the center., Ad Hoc Plan of Action - NEW HIRE, I PLAN TO CONTINUE TO COMPLETE HER FILE.	6/2/2026
On May 21, 2026, a two (2) year old child was left unsupervised on the playground for an undetermined amount of time., Ad Hoc Plan of Action - I PLAN TO CONTINUE TO STRESS AND REMIND THE STAFF THE IMPORTANTS OF COUNTING IN AND OUT DAILY.AND HOLDING THEM ACCOUNTABLE.AS WELL AS ACTING SUPERVIROR.	6/2/2026
An incident which occurred on May 21, 2026, which involved the health, safety and well being of a child was not reported to the Department within 24 hours., Ad Hoc Plan of Action - I plan to CALL THE DEPARTMENT WITHIN 24HR OF ANY ISSUE CONCERNING A CHILD.REGARDLESS OF HOW BIG OR SMALL. HOWEVER, IN THIS CASE THE CHILD WAS NOT LEFT ALONE AND An ACTIVE MANAGER WAS WITH SAID CHILD. THESE FALSE HARMFUL ALLIGATIONS WHERE MADE BY A DISGRUNTLED	6/2/2026

MANAGER.	
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