Plan of Correction

SECTION A - IDENTIFYING INFORMATION

Facility Name: LULLABIES AND LAUGHTER CDC, LLC	Type of Facility: Center [X] OST [ ] Day [X] Family [ ] University [ ] Night [ ] Group [ ]
Physical Address: 860 REDMONT DRIVE TUSCALOOSA, AL 35404	Mailing Address: 237 30TH STREET EAST TUSCALOOSA, AL, 35405-____
Telephone Number: (205) 722-2478	Licensee: KANESA WITHERSPOON
Capacity: 40	Director: KANESA WITHERSPOON
Age Range: 0 Weeks to 12 Years	Date Prepared: 9/2/2026

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 - Medication locked, Classroom Checklist / CocoMelon 18mo-24mo Plan of Action - All medications brought into the center will be stored in a designated locked area and kept inaccessible to children at all times. Staff members will not leave medication unattended or in classrooms, diaper bags, purses, countertops, cabinets, or other areas accessible to children.	9/3/2026
Failed - Cribs/2 feet of space between occupied cribs, Classroom Checklist / Little Dreamers Plan of Action - The cribs were repositioned to ensure that a minimum of two (2) feet of space is maintained between occupied cribs.	9/3/2026
Failed - Character and suitability review conducted on required person (every 5 years), Inspection Form Plan of Action - The required Character and Suitability Review was immediately addressed and the necessary documentation was submitted/completed to bring the individual into compliance.	10/8/2026
Failed - Ongoing Training, Staff Checklist Plan of Action - Staff training records were reviewed to identify any missing or incomplete ongoing training requirements. Staff members who are not current with required training will complete the necessary training, and documentation will be maintained in their personnel files.	10/8/2026
Failed - Health and Safety Training, Staff Checklist Plan of Action - All staff training records were reviewed to identify missing or incomplete Health and Safety Training. Any staff member who is not current will complete the required training immediately, and documentation of completion will be placed in the employee's personnel file.	10/8/2026

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Failed - Medical, Staff Checklist Plan of Action - All applicable records were reviewed, and any missing or expired medical documentation was requested and/or obtained and will be placed in the appropriate file.	10/2/2026
Failed - Suitability Determination (Every 5 years), Staff Checklist Plan of Action - The records of all required staff were reviewed to identify any expired or missing Suitability Determinations. Any required renewal was immediately initiated and/or completed, and documentation will be maintained in the appropriate personnel file.	10/2/2026
Failed - Ongoing Training, Staff Checklist Plan of Action - Staff training records were reviewed to identify any missing or incomplete ongoing training requirements. Staff members who are not current with required training will complete the necessary training, and documentation will be maintained in their personnel files.	10/8/2026
Failed - Health and Safety Training, Staff Checklist Plan of Action - All staff training records were reviewed to identify missing or incomplete Health and Safety Training. Any staff member who is not current will complete the required training immediately, and documentation of completion will be placed in the employee's personnel file.	10/8/2026
Failed - By August 1, 2022, director/all teachers/substitutes/all service staff must be enrolled in the Alabama Pathway’s Professional Development Registry, Inspection Form Plan of Action - All required staff members will be reviewed to verify enrollment in the Alabama Pathways Professional Development Registry. Any staff member who is not currently enrolled will complete the enrollment process immediately.	9/11/2026
Failed - Records on file at time of employment, Inspection Form Plan of Action - The personnel files of all current employees will be reviewed, and any missing required documentation will be obtained and placed in the appropriate employee file.	10/8/2026
Failed - Drinking water without added sweeteners or carbonation readily available throughout the day, Inspection Form Plan of Action - Plain drinking water was made readily available to all children throughout the day. Staff were reminded that children must have access to drinking water and be offered water regularly.	9/3/2026
Failed - No physical restraint as punishment, Inspection Form Plan of Action - Staff were immediately counseled and retrained regarding appropriate discipline and behavior-management practices. Staff were informed that physical restraint will not be used as punishment or discipline under any circumstances.	9/3/2026
Failed - Outdoor play area and equipment are free of apparent	9/3/2026

hazardous conditions, Inspection Form Plan of Action - The outdoor play area was immediately inspected, and the identified hazardous condition was corrected or removed. Staff were reminded that children are not permitted to use any area or equipment that presents a potential safety hazard.	
Failed - Center free of apparent hazards, Inspection Form Plan of Action - The identified hazard(s) were immediately corrected, removed, or made inaccessible to children. Staff were reminded of their responsibility to maintain a safe environment at all times.	9/3/2026
Failed - Two feet between occupied cribs, Inspection Form Plan of Action - Cribs were immediately repositioned to ensure at least two feet of space between occupied cribs.	9/3/2026
Failed - Foods that may cause choking prepared appropriately for the child, Inspection Form Plan of Action - Staff were immediately instructed to ensure all foods are prepared and served in a manner appropriate for each child's age and developmental ability.	9/3/2026
Failed - Individual records on each child on file on first day of attendance, Inspection Form Plan of Action - All current children's files were reviewed, and missing required documentation will be obtained and placed in each child's individual record.	9/9/2026