

## Plan of Correction

## SECTION A - IDENTIFYING INFORMATION

|                                                          |                                                                                                                                                                                                                                                                           |
|----------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| SECTION 1: IDENTIFYING INFORMATION                       |                                                                                                                                                                                                                                                                           |
| Facility Name:<br>UNIVERSITY DAYCARE                     | Type of Facility: Center <input checked="" type="checkbox"/> OST <input type="checkbox"/><br>Day <input checked="" type="checkbox"/> Family <input type="checkbox"/> University <input type="checkbox"/><br>Night <input type="checkbox"/> Group <input type="checkbox"/> |
| Physical Address:<br>1006 N. DEAN RD<br>AUBURN, AL 36830 | Mailing Address:                                                                                                                                                                                                                                                          |
| Telephone Number: (334) 203-1234                         | Licensee: TERRELL UNIVERSITY DAYCARE, LLC                                                                                                                                                                                                                                 |
| Capacity: 186                                            | Director: DEBORAH HOLLEY                                                                                                                                                                                                                                                  |
| Age Range:<br>6 Weeks to 12 Years                        | Date Prepared: 9/10/2026                                                                                                                                                                                                                                                  |

## 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 - Suitability Determination (Every 5 years), Staff Checklist<br>Plan of Action - staff will get suitability done.                      | 9/24/2026            |
| Failed - Preadmission Form, Child Checklist<br>Plan of Action - staff will get suitability done.                                              | 9/24/2026            |
| Failed - Preadmission Form, Child Checklist<br>Plan of Action - staff will get suitability done.                                              | 9/24/2026            |
| Failed - Preadmission Form, Child Checklist<br>Plan of Action - staff will get suitability done.                                              | 9/24/2026            |
| Failed - Preadmission Form, Child Checklist<br>Plan of Action - staff will get suitability done                                               | 9/24/2026            |
| Failed - Preadmission Form, Child Checklist<br>Plan of Action - staff will get suitability done                                               | 9/24/2026            |
| Failed - Shelving for equipment and supplies/anchored, Classroom<br>Checklist / pre one<br>Plan of Action - staff will get suitability done   | 9/24/2026            |
| Failed - Shelving for equipment and supplies/anchored, Classroom<br>Checklist / Pre two A<br>Plan of Action - staff will get suitability done | 9/24/2026            |
| Failed - Shelving for equipment and supplies/anchored, Classroom<br>Checklist / Pre two B<br>Plan of Action - staff will get suitability done | 9/24/2026            |
| Failed - Center free of apparent hazards, Inspection Form<br>Plan of Action - staff will get it done                                          | 9/24/2026            |
| Failed - Clear glass doors are marked at child level, Inspection Form                                                                         | 9/10/2026            |

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|-------------------------------------------------------------------------------------------------------------------|-----------|
| Plan of Action - has been corrected                                                                               |           |
| On 9/10/26 in pre-one classroom there were peeling paint., Ad Hoc<br>Plan of Action - owner will get it done      | 9/24/2026 |
| On 9/10/26 in pre-one classroom there were broken sink faucet., Ad Hoc<br>Plan of Action - owner will get it done | 9/24/2026 |
| On 9/10/26 in pre-two classroom there were peeling paint., Ad Hoc<br>Plan of Action - owner will get it done      | 9/24/2026 |