

**ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT**

SECTION A- IDENTIFYING INFORMATION

Facility Name: ELYTON HEAD START/ EARLY HS CENTER	Type of Facility : Center [X] Day [X] OST [] Night [] Family [] University [] Group []	Date of Visit: 05/14/2025
Facility Address: 432 CENTER STREET, BIRMINGHAM, AL 35204, Jefferson	Licensee: MISSISSIPPI ACTION FOR PROGRESS, INC	Telephone #: (659) 240-8998
Ages: 2 Years to 5 Years	Director (if applicable): LATORSHA GOWDY	Capacity: 61 , NA Day Night

SECTION B - DEFICIENCY INFORMATION

<u>Performance Standard Deficiency</u> HAZARDS MUST BE CORRECTED IMMEDIATELY*	Date Corrected by Licensee
Deficiency Summary	
Failed - Medications and drugs kept under lock and key or combination lock, separate from harmful items, Inspection Form Comments: Toothpaste not under lock and key in Head Start Classrooms (3-5yrs) 5130-A and 5130-C	05/14/2025
Failed - Containers labeled, Inspection Form Comments: Cleaning solution not labeled Head Start Classroom (3-5yrs)	05/15/2025
Failed - Hazardous substances under lock and key or combination lock, Inspection Form Comments: Cleaning supplies not under lock and key throughout the CenterBroken cabinet Lock in HS 5130-A	06/20/2025
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 Comments: Some staff at the facility are not enrolled in the Alabama Pathway's Registry.	06/20/2025
Failed - Ongoing Training, Staff Checklist Comments: Missing at least 4 hrs	06/20/2025
Failed - Health and Safety Training, Staff Checklist Comments: Missing 10 hrs	06/20/2025
Failed - Ongoing Training, Staff Checklist Comments: Missing 6.5 hrs	06/20/2025
Failed - Ongoing Training, Staff Checklist Comments: Missing 3 hrs	06/20/2025
Failed - Health and Safety Training, Staff Checklist	06/20/2025

Comments: Missing 11 hrs	
Failed - Ongoing Training, Staff Checklist	06/20/2025
Comments: Missing 10 hrs	
Failed - Ongoing Training, Staff Checklist	06/20/2025
Comments: Missing 3 hrs	
Failed - Health and Safety Training, Staff Checklist	06/20/2025
Comments: Missing 11 areas	
Failed - Ongoing Training, Staff Checklist	06/20/2025
Comments: Missing 2 hrs	
Failed - Ongoing Training, Staff Checklist	06/20/2025
Comments: Missing 9.5 hrs	
Failed - Health and Safety Training, Staff Checklist	06/20/2025
Comments: Missing 11 areas	
Failed - Ongoing Training, Staff Checklist	06/20/2025
Comments: Missing 3 hrs	
Some of the Facility staff are not enrolled in the Alabama	06/20/2025
Pathway's Registry., Ad Hoc	
Comments: NA	

INSTRUCTIONS TO LICENSEE: Column 2, Date Corrected by Licensee, is to be completed by the facility representative after each deficiency is corrected. The facility representative must put the date of correction and his/her initials in Column 2. This form must be returned to the Department of Human Resources on or before _____, as verification that deficiencies have been corrected.

NOTICE: Any misleading or any false statements or reports made to the Department and/or failure to correct the listed deficiencies can be the basis for adverse action. None of these requirements are to be interpreted to allow anyone to operate in violation of Performance Standards. A facility licensed by the Department must always meet Performance Standards applicable to that facility. It is the responsibility of the licensee to operate in compliance with Performance Standards.


Signature of Facility Representative
 Shundr Nevels

6-23-25
 Date

Signature of DHR Licensing Representative

 Date

COPIES TO: _____