

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

**SECTION A- IDENTIFYING INFORMATION**

Facility Name: HARTFORD CHILDCARE & LEARNING CTR LLC 2	Type of Facility : Center [X] Day [X]            OST [ ] Night [ ]        Family [ ] University [ ] Group [ ]	Date of Visit: 06/23/2025
Facility Address: 2001 N STATE HIGHWAY 123, HARTFORD, AL, 36344, Geneva	Licensee: HARTFORD CHILDCARE & LEARNING CENTER LLC	Telephone #: (334) 588-0184
Ages: 12 Years	Director (if applicable): SHELBY LETT	Capacity: 64        /    NA Day        Night

**SECTION B - DEFICIENCY INFORMATION**

<u>Performance Standard Deficiency</u> <i>HAZARDS MUST BE CORRECTED IMMEDIATELY*</i>	Date Corrected by Licensee
<b>Deficiency Summary</b>	
Failed - Center free of apparent hazards, Inspection Form Comments: Several chemicals were not locked up.	05/21/2025
Failed - Hazardous substances under lock and key or combination lock, Inspection Form Comments: in the school age room chemicals were not locked up.	05/21/2025
Failed - Containers labeled, Inspection Form Comments: In the school age room, there was a container not labeled.	05/21/2025
Failed - Outdoor play area and equipment are free of apparent hazardous conditions, Inspection Form Comments: The ramp leading outside has a drop off on the left-hand corner.	06/23/2025
Failed - Outdoor play area free of apparent hazardous conditions;, Inspection Form Comments: The ramp leading outside has a drop off on the left-hand corner.	06/23/2025

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 of the facility staff are not enrolled in the Alabama Pathway Registry.

Failed - Health and Safety Training, Staff Checklist  
Comments: There were only 10 of the 12 hours needed.

05/21/2025

Failed - Ongoing Training, Staff Checklist  
Comments: There was no verification of ongoing training.

Failed - Ongoing Training, Staff Checklist  
Comments: There was no verification of ongoing training.

Failed - Ongoing Training, Staff Checklist  
Comments: There is no verification of ongoing training.

Failed - References, Staff Checklist  
Comments: There were only 2 references.

06/23/2025

Failed - Ongoing Training, Staff Checklist  
Comments: There was no verification of ongoing performance standard training.

Failed - Ongoing Training, Staff Checklist  
Comments: There was no verification of ongoing performance standard training.

Failed - Immunization Certificate, Child Checklist  
Comments: no immunization form

06/23/2025

Failed - Hazardous substances locked, Classroom Checklist / School Kids  
Comments: There was Ant poison, wasp spray and toilet bowl cleaner in the bathroom cabinet not under lock and key. There was plumbing putty under the kitchen cabinet and 2 spray containers in a closet not locked.

05/21/2025

Failed - Containers labeled, Classroom Checklist / School Kids  
Comments: There was a spray container that was not labeled.

05/21/2025

There were 31 children ages 2 1/2 to 4 in a room licensed for 19., Ad Hoc  
Comments: NA

06/23/2025

**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 July 7, 2025 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.

Shelby Lett  
\_\_\_\_\_  
*Signature of Facility Representative*

6/23/25  
\_\_\_\_\_  
Date

Jay Dalton  
\_\_\_\_\_  
*Signature of DHR Licensing Representative*

**June 23, 2025**  
\_\_\_\_\_  
Date

COPIES TO: Shelby Lett