ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

Facility Name: TAMMY TUCKER	Type of Facility : Center [ ] Day [X] OST [ ] Night [ ] Family [ ] University [ ] Group [X]	Date of Visit: 06/26/2025
Facility Address: 5945 CO RD 6, SWEETWATER, AL, 36782, Marengo	Licensee: TAMMY TUCKER	Telephone #: (334) 992-2218
Ages: 6 Weeks to 12 Years	Director (if applicable):	Capacity: 12 / NA Day Night

SECTION B - DEFICIENCY INFORMATION

Performance Standard Deficiency ***HAZARDS MUST BE CORRECTED IMMEDIATELY****	**Date Corrected by Licensee**

Deficiency Summary

Failed - By August 1 2022 all home staff including licensee/substitutes/assistant caregivers must enroll in Alabama Pathways Professional Development Registry, Inspection Form
Comments: SOME STAFF ID NOT REGISTERED IN ALABAMA PATHWAYS

Failed - Ongoing Training, Staff Checklist
Comments: LICENSEE REQUIRES 20 HOURS OF PERFORMANCE STANDARD TRAINING.

Failed - Health and Safety Training, Staff Checklist
Comments: LICENSEE REQUIRES 11 HOURS OF HEALTH & SAFETY TRAINING

Failed - Infant -Child CPR Certification, Staff Checklist
Comments: EXPIRED

Failed - Infant -Child First Aid Certificate, Staff Checklist
Comments: EXPIRED

Failed - Ongoing Training, Staff Checklist
Comments: REQUIRES 6 HOURS OF PERFORMANCE STANDARD TRAINING

Failed - Health and Safety Training, Staff Checklist
Comments: REQUIRES 11 HOURS OF HELTH & SAFETY TRAINING

Failed - CA/N Clearance Form (Every Five Years), Staff Checklist
Comments: NOT FOUND IN FILE

Failed - Ongoing Training, Staff Checklist
Comments: REUIRES 6 HOURS OF PERFORMANCE STANDARD TRAINING

Failed - Health and Safety Training, Staff Checklist
Comments: REQUIRES 11 HOURS OF HEALTH & SAFETY TRAINING

Failed - Photo ID Verification, Staff Checklist
Comments: FILE INCOMPLETE/PHOTO ID

Failed - Medical, Staff Checklist
Comments: FILE INCOMPLETE/MEDICAL

Failed - TB Test Date and Results, Staff Checklist
Comments: FILE INCOMPLETE/TB

Failed - Verification of Education, Staff Checklist
Comments: NOT IN FILE

Failed - References, Staff Checklist
Comments: NOT IN FILE/ 3 REFERENCES

Failed - Current Driver's License, Staff Checklist
Comments: NOT IN FILE

Failed - Written verification of Emergency Procedures, Staff Checklist
Comments: NOT IN FILE

Failed - Written Verification of Standards Read, Staff Checklist
Comments: NOT IN FILE

Failed - Ongoing Training, Staff Checklist
Comments: REQUIRES 6 HOURS OF PERFORMANCE STANDARD TRAINING

Failed - Health and Safety Training, Staff Checklist
Comments: REQUIRES 11 HEALTH AND SAFETY TRAINING TOPICS

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 07/10/2025, 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.

Tammy Jacker — 06/06/2025
Signature of Facility Representative — Date

Oliva Jackson — **06/06/2025**
Signature of DHR Licensing Representative — Date

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