

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

SECTION A- IDENTIFYING INFORMATION

Facility Name: THE NEIGHBORHOOD SCHOOL	Type of Facility : Center [X] Day [X] OST [] Night [X] Family [] University [] Group []	Date of Visit: 06/30/2025
Facility Address: 26481 KENSINGTON PLACE, DAPHNE, AL 36526, Baldwin	Licensee: THE NEIGHBORHOOD SCHOOL, INC	Telephone #: (251) 626-0074
Ages: 6 Weeks to 14 Years/1 Days to 10 Days	Director (if applicable): CARRIANN TOOMBS	Capacity: [c]90 / 45 Day Night

SECTION B - DEFICIENCY INFORMATION

<u>Performance Standard Deficiency</u> HAZARDS MUST BE CORRECTED IMMEDIATELY*	Date Corrected by Licensee
Deficiency Summary	
Failed - Character and suitability review conducted on required person (every 5 years), Inspection Form Comments: One suitability letter is the incorrect one	06/17/2025
Failed - All children supervised at all times, Inspection Form Comments: In the first toddler room on the right, when the teacher goes into the adjoined diaper changing area, the children not being changed are not supervised.	TBD
Failed - Suitability Determination (Every 5 years), Staff Checklist Comments: Wrong suitability letter	06/17/2025
Failed - Written Verification of Standards Read, Staff Checklist Comments: Minimum Standards	06/17/2025
Failed - Written Verification of Standards Read, Staff Checklist Comments: Minimum Standards	06/17/2025
Failed - TB Test Date and Results, Staff Checklist Comments: Missing TB test	06/17/2025
Failed - Health and Safety Training, Staff Checklist Comments: Missing Health and Safety Training	06/17/2025
Failed - References, Staff Checklist Comments: Missing one reference	06/30/2025
Failed - Ongoing Training, Staff Checklist Comments: Missing ongoing training	TBD
Failed - Health and Safety Training, Staff Checklist Comments: Missing health and safety training	06/17/2025
The children's records are incomplete., Ad Hoc	06/30/2025

? corrected
prior to
visit
GT

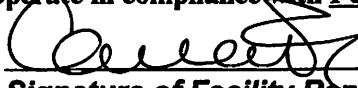
Comments: NA

School age children were outside of the fenced in area. , Ad Hoc TBD

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 07/20/25, 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

Takeila Turner

7/14/25

Date

Signature of DHR Licensing Representative

Date

COPIES TO: _____