

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

SECTION A - IDENTIFYING INFORMATION

Facility Name: JAKITA WARD	Type of Facility : Center [] Day [X] OST [] Night [] Family [X] University [] Group []	Date of Visit: 7/15/2025
Facility Address: 10486 ST HWY 95 N, ABBEVILLE, AL 36310, Henry	Licensee: JAKITA WARD	Telephone #: (334) 689-9116
Ages: 6 Weeks to 12 Years	Director (if applicable):	Capacity: 6 / NA Day Night

SECTION B - DEFICIENCY INFORMATION

<u>Performance Standard Deficiency</u> <i>HAZARDS MUST BE CORRECTED IMMEDIATELY*</i>	Date Corrected by Licensee
Deficiency Summary	
All deficiencies are corrected as of 07/15/2025.	
Failed - Formula and food brought from child's home labeled and stored properly, Inspection Form Comments: Bottle not labelled	6/17/2025
Failed - Formula provided by parent must be ready to feed labeled and refrigerated, Inspection Form Comments: Bottle not labelled	6/17/2025
Failed - Special foods for children labeled with child's name and stored as directed, Inspection Form Comments: Not labelled	6/17/2025
Failed - By August 1 2022 all home staff including licensee/substitutes/assistant caregivers must enroll in Alabama Pathways Professional Development Registry, Inspection Form Comments: None of the facility staff are enrolled in the Alabama Pathway's Registry.	7/15/2025
Failed - Licensee and each caregiver has current infant-child CPR and first aid certificate copies on file in home, Inspection Form Comments: Substitute cpr is missing documentation	6/17/2025

Failed - Home and grounds free of apparent hazards including abandoned automobiles unused appliances uncovered wells and cisterns stacked lumber with exposed nails explosives, Inspection Form Comments: two active antbeds	6/17/2025
Failed - Outdoor play area and equipment free from apparent hazards, Inspection Form Comments: two active antbeds	6/17/2025
Failed - Record for licensee/household member, Inspection Form Comments: Expired & Missing Documentation	6/17/2025
Failed - Records for caregivers/substitutes, Inspection Form Comments: Expired & Missing documentation	6/17/2025
Failed - Children's records complete, Inspection Form Comments: Missing documentation	6/17/2025
Failed - Medical, Staff Checklist Comments: Expired	6/17/2025
Failed - Application, Staff Checklist Comments: Missing documentation	6/17/2025
Failed - Medical, Staff Checklist Comments: Expired	6/17/2025
Failed - Infant -Child CPR Certification, Staff Checklist Comments: Missing documentation	6/17/2025
Failed - Infant -Child First Aid Certificate, Staff Checklist Comments: Missing Documentation	6/17/2025
Failed - Ongoing Training, Staff Checklist Comments: missing 6 hrs of ongoing training	6/17/2025
Failed - Health and Safety Training, Staff Checklist Comments: missing all Health & Safety trainings	6/17/2025
Failed - Ongoing Training, Staff Checklist Comments: Missing 20 hours of ongoing trainings	6/17/2025

Failed - Health and Safety Training, Staff Checklist Comments: Missing all Health & Safety trainings	6/17/2025
Failed - Preadmission Form, Child Checklist Comments: Missing Documentation	6/17/2025
Failed - Preadmission Form, Child Checklist Comments: Missing 2ng page and documentation	6/17/2025
Failed - Immunization Certificate, Child Checklist Comments: Expired	6/17/2025

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 N/A, 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]
Signature of Facility Representative

7/15/25
Date

Amy Horn *[Signature]*
Signature of DHR Licensing Representative

7/15/25
Date

COPIES TO: Emailed to licensee