

ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

Facility Name: GRACE CHILDCARE PRESCHOOL CTR OF EXCELLE	Type of Facility : Center [X] Day [X] OST [] Night [] Family [] University [] Group []	Date of Visit: 7/18/2025
Facility Address: 154 HEMLEY AVENUE, MOBILE, AL 36607, Mobile	Licensee: GRACE COMMUNITY ACTION ALLIANCE, INC.	Telephone #: (251) 478-9200
Ages: 5 Years to 12 Years	Director (if applicable): SOLOMON L CURRY	Capacity: 28 / 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	
Failed - Outdoor play area and equipment are free of apparent hazardous conditions, Inspection Form Comments: There is an overgrowth of vines and weeds along the fence	Pending Correction
Failed - Hazardous substances under lock and key or combination lock, Inspection Form Comments: Cleaning supplies not under lock and key or combination lock	Pending Correction
Failed - Exposed electrical outlets have protective covers, Inspection Form Comments: Missing plug covers	Pending Correction
Failed - Medical, Staff Checklist Comments: Missing Medical form	Pending Correction
Failed - Ongoing Training, Staff Checklist Comments: Missing 12 hrs	Pending Correction
Failed - Health and Safety Training, Staff Checklist Comments: Missing 1-10 areas	Pending Correction
There are hazards not under lock and key/ combination lock on the vans (Microban, Lysol, and Jumper Cables). , Ad Hoc Comments: NA	Pending Correction
Staff files are incomplete., Ad Hoc Comments: NA	Pending Correction

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.

Mabis Curry

Signature of Facility Representative

07/18/2025

Date

Shundr Nevels

Signature of DHR Licensing Representative

Date

COPIES TO: _____