

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

SECTION A- IDENTIFYING INFORMATION

Facility Name: ABC DAYCARE & KINDERGARTEN INC.	Type of Facility : Center <input checked="" type="checkbox"/> Day <input checked="" type="checkbox"/> OST <input type="checkbox"/> Night <input type="checkbox"/> Family <input type="checkbox"/> University <input type="checkbox"/> Group <input type="checkbox"/>	Date of Visit: 7/22/2025
Facility Address: 610 COLUMBIANA ROAD, HOMEWOOD, AL. 35209, Jefferson	Licensee: ABC DAYCARE & KINDERGARTEN	Telephone #: (205) 942-7526
Ages: 6 Weeks to 12 Years	Director (if applicable): JUANITA WALLACE	Capacity: 179 / NA Day Night

SECTION B - DEFICIENCY INFORMATION

<u>Performance Standard Deficiency</u> <i>HAZARDS MUST BE CORRECTED IMMEDIATELY*</i>	Date Corrected by Licensee
<p>Deficiency Summary</p> <p>On July 21, 2025, a physical altercation between a staff member and parent occurred in front of ten(10) four year old children in which the health, welfare and safety of the children were at risk. , Ad Hoc Comments: NA</p>	7/22/2025

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.

Juanita Wallace
Signature of Facility Representative

July 22, 2025
Date

Amessa Cozelle
Signature of DNR Licensing Representative

7/22/25

Date

COPIES TO: Director