

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

SECTION A - IDENTIFYING INFORMATION

Facility Name: WORD OF LIFE CHURCH	Type of Facility : Center <input checked="" type="checkbox"/> [X] Day <input checked="" type="checkbox"/> [X] Night <input type="checkbox"/> [] Family <input type="checkbox"/> [] University <input type="checkbox"/> [] Group <input type="checkbox"/> []	Facility Address: 3325 WOODLEY ROAD, MONTGOMERY, AL 36116, Montgomery	Director (if applicable): SHERRY Lynn JORDAN	Ages: 6 Weeks to 14 Years
Date of Visit: 7/24/2025	License: WORD OF LIFE CHURCH	Telephone #: (334) 356-2765	Capacity: 62 / NA Day / Night	

SECTION B - DEFICIENCY INFORMATION

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

Failed - Transportation checklists used as required, Inspection Form Comments: The facility did not have transportation checklist filed trip form for their field trip on 7/9/2025.	7/9/2025
Failed - Outdoor play area and equipment are free of apparent hazardous conditions, Inspection Form Comments: On the playground there was two broken riding toys- one with a missing pedal and one with a cracked steering wheel with sharp edges.	7/24/2025
Failed - Fence or wall free of sharp edges, Inspection Form Comments: The wall that the outdoor faucet is on has broken metal siding with sharp edges.	7/24/2025
Failed - Outdoor play area free of apparent hazardous conditions; Inspection Form Comments: On the playground there were mounds of mud mixed with rock and large pieces of broken concrete that all pose tripping hazards.	7/24/2025
Failed - 24 months to 36 months 1 to 8, Inspection Form	7/9/2025

		<p>Comments: In the Toddler 2 exception room there was one staff with ten children ages 24-36 months.</p>
7/9/2025	Pending Correction	<p>Failed - All children supervised at all times, Inspection Form Comments: In the toddler 1 room the staff left the classroom leaving six children ages 18-24 months unsupervised.</p>
7/24/2025	Pending Correction	<p>Failed - By August 1, 2022, director/all teachers/substitutes/all service staff must be enrolled in the Alabama Pathway's Professional Development Registry, Inspection Form Comments: Not all staff are enrolled in Alabama Pathway's Professional Development Registry.</p>
	Pending Correction	<p>Failed - Medical, Staff Checklist Comments: The staff's medical form expired 10/1/2024.</p>
	Pending Correction	<p>Failed - Medical, Staff Checklist Comments: The staff's medical form expired 7/6/2025.</p>
7/24/2025	Pending Correction	<p>Failed - Health and Safety Training, Staff Checklist Comments: The staff does not have Health and Safety Training CCDF #7.</p>
	Pending Correction	<p>Failed - Health and Safety Training, Staff Checklist Comments: The staff does not have Health and Safety Training CCDF #11.</p>
7/24/2025	Pending Correction	<p>Failed - Health and Safety Training, Staff Checklist Comments: The staff does not have Health and Safety Training CCDF #9.</p>
	Pending Correction	<p>Failed - Health and Safety Training, Staff Checklist Comments: The staff does not have any current Health and Safety Training.</p>
	Pending Correction	<p>Failed - Ongoing Training, Staff Checklist Comments: The staff does not have any ongoing training.</p>
	Pending Correction	<p>Failed - Health and Safety Training, Staff Checklist Comments: The staff does not have any Health and Safety training.</p>
	Pending Correction	<p>Failed - Ongoing Training, Staff Checklist Comments: The staff does not have 4 hours of Ongoing Training.</p>

Failed - Health and Safety Training, Staff Checklist
 Comments: The staff does not have Health and Safety Training CCDF #11.
 Pending Correction

7/9/2025 Failed - Electrical outlets covered, Classroom Checklist / Nursery
 Comments: In the infant room there were 2 electrical outlets not covered.

7/9/2025 Failed - Hazardous substances locked, Classroom Checklist / Nursery
 Comments: In the infant room there were 2 Lysol wipes and 1 Lysol spray not under lock and key.

7/9/2025 Failed - Waterproof mattress, sheets, Classroom Checklist / Nursery
 Comments: In the infant room there were 2 ripped mattresses with exposed foam and 1 ripped sheet.

7/21/2025 Failed - *Non-wooden building blocks (approximately 20 non-interlocking), Classroom Checklist / Toddler 1
 Comments: In the toddler 1 classroom there were not approximately 20 non-interlocking non-wooden building blocks.

7/9/2025 Failed - Electrical outlets covered, Classroom Checklist / Toddler 1
 Comments: In the toddler 1 room there was one electrical outlet not covered.

7/9/2025 Failed - Hazardous substances locked, Classroom Checklist / Toddler 1
 Comments: In the toddler 1 room there was a first aid kit with Tylenol and alcohol wipes not under lock and key.

7/21/2025 Failed - *Building blocks – approximately 50 non-interlocking, Classroom Checklist / Toddler 2
 Comments: In the toddler 2 room there are not approximately 50 non-interlocking building blocks.

7/9/2025 Failed - Hazardous substances locked, Classroom Checklist / Toddler 2
 Comments: In the Toddler 2 room there were Lysol wipes not under lock and key.

7/9/2025 Failed - Electrical outlets covered, Classroom Checklist / School Aged
 Comments: In the school aged room there were 2 electrical outlets not covered.

7/9/2025 Failed - Hazardous substances locked, Classroom Checklist / School Aged
 Comments: In the school aged room there were 2 first aid kits with

Tylenol and alcohol wipes and Lysol wipes not under lock and key.

In the girls bathroom by the front of the facility there was Lysol spray 7/9/2025
 and Scrubby Bubbles bathroom cleaner not under lock and key, Ad Hoc
 Comments: NA

In the boys bathroom by the preschool 3 room there was Lysol spray not 7/9/2025
 under lock and key, Ad Hoc
 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 August 7, 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.

Signature of Facility Representative
Emily Parker

 Date 7/24/25

Leanna Towery

Signature of DHR Licensing Representative

 Date 7/24/2025

COPIES TO: director