

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

SECTION A- IDENTIFYING INFORMATION

Facility Name: HAPPY TOTS	Type of Facility : Center [X] Day [X] OST [] Night [X] Family [] University [] Group []	Date of Visit: 7/28/2025
Facility Address: 421 AZALEA WAY, BIRMINGHAM, AL 35215, Jefferson	Licensee: LAQUITA WALKER	Telephone #: (205) 520-9814
Ages: 2 Weeks to 12 Years/2 Weeks to 12 Years	Director (if applicable): LAQUITA WALKER	Capacity: 61 / NA Day Night

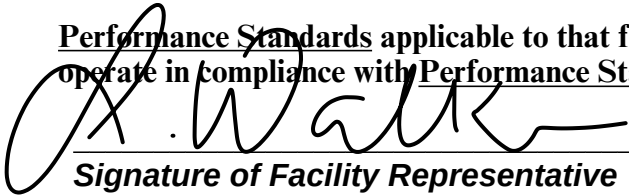
SECTION B - DEFICIENCY INFORMATION

Performance Standard Deficiency HAZARDS MUST BE CORRECTED IMMEDIATELY*	Date Corrected by Licensee
Deficiency Summary	
Failed - Transportation checklists, Inspection Form Comments: Not present at the center	Pending Correction
Failed - Vehicle safety check, Inspection Form Comments: Not present at the center	Pending Correction
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: None of the facility staff are enrolled in Alabama Pathway's Registry.	Pending Correction
Failed - Two staff with infant-child CPR and first aid present during all hours of operation, Inspection Form Comments: Missing updated CPR/First Aid Certificates	Pending Correction
Failed - Written Verification of Standards Read, Staff Checklist Comments: Missing from the file	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.

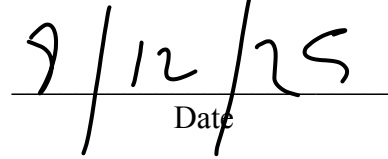
NOTICE: Any misleading or any false statements or reports made to the Department and/or failure to correct the listed deficiencies can be the basis for adverse action. None of these requirements are to be interpreted to allow anyone to operate in violation of Performance Standards. A facility licensed 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**.



Signature of Facility Representative

Shundr Nevels



Date

Signature of DHR Licensing Representative

Date

COPIES TO: _____