

ALABAMA DEPARTMENT OF HUMAN RESOURCES  
CHILD CARE PERFORMANCE STANDARDS  
DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

Facility Name: GRACE ACADEMY SCHOOL OF EXCELLENCE  
Type of Facility : Center [X] Date of Visit: 7/30/2025  
Day [X] OST [ ]  
Night [ ]  
Family [ ]  
University [ ]  
Group [ ]

Facility Address: 1945 CENTERPOINT PKWY, CENTERPOINT, AL, 35215, Jefferson  
Licensee: GREATER GRACE BAPTIST CHURCH  
Telephone #: (205) 853-1410  
Ages: 6 Weeks to 12 Years  
Director (if applicable): NATASHA JOHNSON-RILEY  
Capacity: 150 / NA  
Day Night

SECTION B - DEFICIENCY INFORMATION

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

Deficiency Summary

Failed - Ongoing Training, Staff Checklist 6/20/2025  
Comments: Staff doesn't have ongoing training.

Failed - Health and Safety Training, Staff Checklist 6/20/2025  
Comments: Staff member doesn't have current Health and Safety training.

Failed - CA/N Clearance Form (Every Five Years), Staff Checklist Pending Correction  
Comments: Staff person doesn't have a CA/N form.

Failed - Ongoing Training, Staff Checklist 6/20/2025  
Comments: Staff doesn't have ongoing training.

Failed - Health and Safety Training, Staff Checklist 6/20/2025  
Comments: The staff members Health and Safety has expired.

Failed - Medical, Staff Checklist Pending Correction  
Comments: Staff does not have a medical form

Failed - TB Test Date and Results, Staff Checklist Pending Correction  
Comments: Staff does not have a TB test.

Comments: The staff does not have documentation of Education. Pending Correction

Failed - CA/N Clearance Form (Every Five Years), Staff Checklist Pending Correction  
Comments: Staff person does not have a CA/N form.

Failed - Ongoing Training, Staff Checklist 6/20/2025  
Comments: Staff does not have ongoing training.

Failed - Health and Safety Training, Staff Checklist 6/20/2025  
Comments: Staff does not have Health and Safety training documentation.

Failed - CA/N Clearance Form (Every Five Years), Staff Checklist Pending Correction  
Comments: Staff does not have a CA/N form.

Failed - Suitability Determination (Every 5 years), Staff Checklist Pending Correction  
Comments: Staff does not have a current suitability letter.

Failed - Ongoing Training, Staff Checklist 6/20/2025  
Comments: The staff does not have ongoing training.

Failed - Health and Safety Training, Staff Checklist 6/20/2025  
Comments: Staff does not have Health and Safety training.

Failed - Photo ID Verification, Staff Checklist Pending Correction  
Comments: Staff does not have photo ID verification.

Failed - Medical, Staff Checklist Pending Correction  
Comments: Staff does not have a medical form.

Failed - TB Test Date and Results, Staff Checklist Pending Correction  
Comments: Staff does not have a TB form.

Failed - Verification of Education, Staff Checklist Pending Correction  
Comments: Staff does not have verification of Education.

Failed - References, Staff Checklist Pending Correction  
Comments: Staff does not have required references.

Failed - Suitability Determination (Every 5 years), Staff Checklist Pending Correction  
Comments: Staff does not have the correct CA/N form.

Failed - Written Verification of Standards Read, Staff Checklist 6/4/2025  
Comments: Staff does not have verification of Standards Read.

Failed - Ongoing Training, Staff Checklist 6/20/2025  
Comments: Staff does not have ongoing training.

Failed - Health and Safety Training, Staff Checklist 6/20/2025  
Comments: Staff does not have Health and Safety training.

Failed - Ongoing Training, Staff Checklist 6/20/2025  
Comments: Staff does not have ongoing training.

Failed - Health and Safety Training, Staff Checklist 6/20/2025  
Comments: Staff does have Health and Safety training.

Failed - Ongoing Training, Staff Checklist 6/20/2025  
Comments: Staff does not have ongoing training.

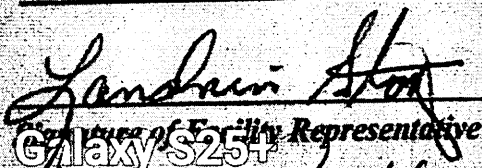
Failed - Health and Safety Training, Staff Checklist 6/20/2025  
Comments: Staff does not have Health and Safety training.

Staff files are incomplete., Ad Hoc Pending Correction  
Comments: NA

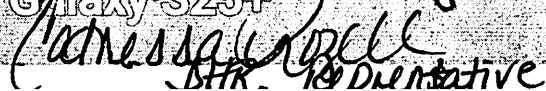
The staff files are incomplete., Ad Hoc Pending Correction  
Comments: NA

**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 08/13/2025, 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  
Galaxy S25T

07/30/25  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
BHR - ID Representative

7/30/2025