

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

SECTION A- IDENTIFYING INFORMATION

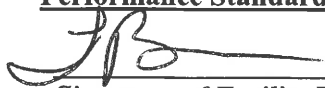
Facility Name: KARE BEAR CHRISTIAN DAYCARE	Type of Facility : Center [X] Day [X] OST [] Night [X] Family [] University [] Group []	Date of Visit: 7/31/2025
Facility Address: 175 N DALEVILLE AVE, SUITE G DALEVILLE, AL 36322, Dale	Licensee: KARE BEAR CHRISTIAN DAYCARE LLC	Telephone #: (334) 599-1008
Ages: 6 Weeks to 12 Years/6 Weeks to 12 Years	Director (if applicable): LATASHA marie BRADY	Capacity: 56 / 20 Day Night

SECTION B - DEFICIENCY INFORMATION

Performance Standard Deficiency HAZARDS MUST BE CORRECTED IMMEDIATELY*	Date Corrected by Licensee
Deficiency Summary No deficiencies observed at this visit.	

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 8/14/2025, 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

Jay Dalton

 Signature of DHR Licensing Representative

7-31-2025

 Date

7/31/25

 Date

COPIES TO: Latasha Brady

35	Indoor thermometer (child safe)	Observed	
36	Written daily schedule posted with 60-90 minutes of active play	Observed	
37	Labeled storage space at child level	Observed	
38	Shelving for equipment and supplies/anchored	Observed	
39	Designated activity areas	Observed	
40	Electrical outlets covered	Observed	
41	Barriers around heaters, fans	Not applicable	
42	Hazardous substances locked	Not applicable	
43	Containers labeled	Not applicable	
44	Medication locked	Not applicable	
45	Screens on windows which are opened	Not applicable	
46	Lighting adequate	Observed	

4. Ad Hoc Deficiency

S No.	Deficiency
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 7-31-2028
 Provider's Signature