ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

Facility Name: HOOPER CHILD CARE & EARLY LEARNING CTR	Type of Facility : Center [X] Day [X] OST [ ] Night [ ] Family [ ] University [ ] Group [ ]	Date of Visit: 8/7/2025
Facility Address: 360 FISCHER ROAD, HOPE HULL, AL 36043, Montgomery	Licensee: WEST MONTGOMERY EDUCATIONAL FOUNDATION	Telephone #: (334) 288-2770
Ages: 6 Weeks to 14 Years	Director (if applicable): Salina Guest	Capacity: 210 / NA Day Night

SECTION B - DEFICIENCY INFORMATION

Performance Standard Deficiency ***HAZARDS MUST BE CORRECTED IMMEDIATELY****	**Date Corrected by Licensee**
Deficiency Summary	
Failed - Outdoor play area and equipment are free of apparent hazardous conditions, Inspection Form Comments: On the K4/afterschool playground there is a rubber swing that split into two pieces.	8/7/2025
Failed - Outdoor play area free of apparent hazardous conditions:, Inspection Form Comments: On the K4/after school playground there is peeling rubber on the sides of the steps to the small tan slide.	8/3/2025
Failed - Medication returned to parent or disposed of when no longer needed, Inspection Form Comments: The crawlers and young toddler had medication that had not been returned to parents or disposed of when no longer needed.	7/23/2025
Failed - Lockdown, Inspection Form Comments: There was not documentation of a lockdown drill.	7/23/2025
Failed - Ongoing Training, Staff Checklist Comments: The staff does not have 12 hours of ongoing training.	8/7/2025

Failed - Health and Safety Training, Staff Checklist Comments: The staff does not have CCDF #11 health and safety training.	8/3/2025
Failed - Health and Safety Training, Staff Checklist Comments: The staff needs CCDF #11 health and safety training.	8/3/2025
Failed - References, Staff Checklist Comments: Needs one more reference.	8/3/2025
Failed - References, Staff Checklist Comments:	8/3/2025
Failed - Verification of Education, Staff Checklist Comments: The staff file does not have verification of education.	8/3/2025
Failed - Ongoing Training, Staff Checklist Comments: The staff needs 12 hours of ongoing training.	8/5/2025
Failed - Ongoing Training, Staff Checklist Comments: The staff needs 12 hours of ongoing training.	8/3/2025
Failed - Ongoing Training, Staff Checklist Comments: The staff needs ongoing training (1 HSUP, 1 QCCL, 2 LD, 2 PDG).	8/6/2025
Failed - Ongoing Training, Staff Checklist Comments: The staff is missing ongoing training (needs 2 CD, 2 LD, 2 PDG).	8/5/2025
Failed - Medical, Staff Checklist Comments: The staff file is missing medical form.	8/5/2025
Failed - TB Test Date and Results, Staff Checklist Comments: The staff file is missing TB test.	8/5/2025
Failed - Ongoing Training, Staff Checklist Comments: The staff needs 12 hours of ongoing training.	8/6/2025
Failed - Health and Safety Training, Staff Checklist Comments: The staff needs health and safety training CCDF #7, 8, 11, and 10 (or CPR certification in place of 10).	8/5/2025

Failed - Ongoing Training, Staff Checklist Comments: The staff is missing ongoing training (needs 2 hrs CD, 2hrs QCCL, 2 hrs LD, 2 hrs PDG).	8/6/2025
Failed - References, Staff Checklist Comments: The staff needs one more reference.	8/5/2025
Failed - Health and Safety Training, Staff Checklist Comments: The staff needs health and safety training CCDF #7.	8/7/2025
Failed - References, Staff Checklist Comments: Two of the staff's references are missing the second page.	8/6/2025
Failed - Ongoing Training, Staff Checklist Comments: The staff is missing ongoing training (needs 2 hours HSUP, 2 hours LD, 2 hours PDG).	8/6/2025
Failed - TB Test Date and Results, Staff Checklist Comments: The staff does not have a TB test.	8/5/2025
Failed - Medical, Staff Checklist Comments: The staff does not have a medical form.	8/5/2025
Failed - References, Staff Checklist Comments: The staff needs three complete reference forms.	8/7/2025
Failed - Health and Safety Training, Staff Checklist Comments: The staff is missing health and safety training CCDF #11 and 10 (or CPR certification for 10).	8/5/2025
Failed - Ongoing Training, Staff Checklist Comments: The staff needs 12 hours of ongoing training.	8/5/2025
Failed - Ongoing Training, Staff Checklist Comments: The staff is missing ongoing training (needs 1 hour CD, 1 hour CCPF, 2 hours LD, 2 hours PDG).	8/5/2025
Failed - References, Staff Checklist Comments: The staff needs three complete references.	8/5/2025
Failed - Ongoing Training, Staff Checklist	8/7/2025

Comments: The staff is missing ongoing training hours (needs 1 hour HSUP, 2 hours QCCL, 2 hours LD, 2 hours PDG).	
Failed - Ongoing Training, Staff Checklist Comments: The staff is missing ongoing training hours (needs 1 hour HSUP, 2 hours LD, 2 hours PDG).	8/7/2025
Failed - Medical, Staff Checklist Comments: The staff does not have a medial form.	8/5/2025
Failed - TB Test Date and Results, Staff Checklist Comments: The staff doe not have a TB test.	8/5/2025
Failed - References, Staff Checklist Comments: The staff needs one more reference.	8/6/2025
Failed - Ongoing Training, Staff Checklist Comments: The staff is missing ongoing training hours (needs 1 hour LD, 2 hours CCPF, 2 hours PDG).	8/5/2025
Failed - Health and Safety Training, Staff Checklist Comments: The staff needs health and safety training CCDF #7.	8/5/2025
Failed - Ongoing Training, Staff Checklist Comments: The staff needs 12 hours of ongoing training.	8/5/2025
Failed - Health and Safety Training, Staff Checklist Comments: The staff is missing health and safety training CCDF#7, 8, and 11.	8/5/2025
Failed - Preadmission Form, Child Checklist Comments: The preadmission form has missing and incomplete addresses, and is missing three parent signatures.	8/3/2025
Failed - Preadmission Form, Child Checklist Comments: The preadmission form is missing addresses; name, address, and phone number of doctor; and three parent signatures.	8/3/2025
Failed - Preadmission Form, Child Checklist Comments: The preadmission form has incomplete addresses.	8/3/2025
Failed - Preadmission Form, Child Checklist Comments: The preadmission form has one missing address.	8/3/2025

Failed - Preadmission Form, Child Checklist Comments: The preadmission form has one parents signature missing.	8/3/2025
Failed - Hazardous substances locked, Classroom Checklist / Toddlers Comments: In the toddlers room there were sanitizing wipes that stated keep out of reach of children not under lock and key.	7/23/2025
In the toddler classroom there was a power strip hanging down and touching the faucet handles., Ad Hoc Comments: NA	7/23/2025
The staff in K4 A does not have a current Child Abuse and Neglect form., Ad Hoc Comments: NA	8/3/2025
The staff in K4 A is missing ongoing training (needs 2 HSUP and 2 CCPF)., Ad Hoc Comments: NA	8/7/2025
On the K4/after school playground there is one missing triangle piece to hang on to go across the bar., Ad Hoc Comments: NA	8/3/2025
The older two room, 3 B room, and K4A & K4B rooms had missing signatures on sign in sheets., Ad Hoc Comments: NA	8/7/2025
There is a new child with an incomplete preadmission form., Ad Hoc Comments: NA	8/7/2025

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 _____, 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.

tara Wood

_____ 8/7/2025

Signature of Facility Representative Date

Leanna Towery

_____ _____**8/7/2025**_____

Signature of DHR Licensing Representative Date

COPIES TO: director