ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

Facility Name: EUFAULA HEAD START	Type of Facility : Center [X] Day [X] OST [ ] Night [ ] Family [ ] University [ ] Group [ ]	Date of Visit: 8/18/2025
Facility Address: 333 STATE DOCKS ROAD, EUFAULA, AL, 36027, Barbour	Licensee: SEARP & DC	Telephone #: (334) 687-2796
Ages: 3 Years to 5 Years	Director (if applicable): KENNETH FARMER	Capacity: 51 / NA Day Night

SECTION B - DEFICIENCY INFORMATION

Performance Standard Deficiency ***HAZARDS MUST BE CORRECTED IMMEDIATELY****	**Date Corrected by Licensee**
Deficiency Summary	
Failed - Two staff with infant-child CPR and first aid present during all hours of operation, Inspection Form Comments: There is only one staff member with CPR/First aide.	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: All staff are not enrolled in the Alabama Pathway registry.	Pending Correction
Failed - Written Verification of Standards Read, Staff Checklist Comments: Minimum standards is in the folder.	Pending Correction
Failed - Application, Staff Checklist Comments: not in file	Pending Correction
Failed - Medical, Staff Checklist Comments: not in file	Pending Correction
Failed - TB Test Date and Results, Staff Checklist Comments: not in file	Pending Correction

Failed - Written Verification of Standards Read, Staff Checklist Comments: the minimum standards is in the file.	Pending Correction
Failed - Ongoing Training, Staff Checklist Comments: There is not verification for all hours of ongoing training.	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 September 1, 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.

Latora Cody
Signature of Facility Representative

08/18/25
Date

Jay Dalton
Signature of DHR Licensing Representative

08/18/2025
Date

COPIES TO: Latora Cody