

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

SECTION A- IDENTIFYING INFORMATION

Facility Name: HEADLAND CHRISTIAN PRESCHOOL	Type of Facility : Center <input checked="" type="checkbox"/> Day <input checked="" type="checkbox"/> OST <input type="checkbox"/> Night <input type="checkbox"/> Family <input type="checkbox"/> University <input type="checkbox"/> Group <input type="checkbox"/>	Date of Visit: 8/29/2025
Facility Address: 700 S. MAIN ST, HEADLAND, AL, 36345, Henry	Licensee: HEADLAND CHRISTIAN PRESCHOOL, LLC	Telephone #: (334) 693-3500
Ages: 6 Weeks to 12 Years	Director (if applicable): LAURA NANCE	Capacity: 40 / NA Day Night

SECTION B - DEFICIENCY INFORMATION

Performance Standard Deficiency <i>HAZARDS MUST BE CORRECTED IMMEDIATELY*</i>	Date Corrected by Licensee
Deficiency Summary	
Failed - Hazardous substances under lock and key or combination lock, Inspection Form Comments: In the kitchen area of the 6wks to 18mth room Clorox, comet toilet wand and fabulous was not locked up.	8/29/2025
Failed - Required ratios maintained at all times, Inspection Form Comments: The 6week to 18 month room had 6 children with 1 teacher.	8/22/2025
Failed - 18 up to 2½ years 1 to 7, Inspection Form Comments: Class ut of ratio due to staff not meeting ccdf requirements. (CA/N, Suitability)	8/29/2025
Failed - 24 months to 36 months 1 to 8, Inspection Form Comments: Class out of ratio due to staff not meeting ccdf requirements. (CA/N, Suitability)	8/29/2025
Failed - Formula provided by parent, must be labeled, ready to feed, and refrigerated, Inspection Form Comments: Staff mixing formula.	8/22/2025

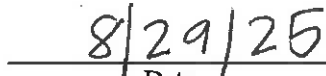
Failed - By August 1, 2022, director/all teachers/substitutes/all service staff must be enrolled in the Alabama Pathway's Professional Development Registry, Inspection Form Comments: All staff is not enrolled in Alabama Pathways.	8/22/2025
Failed - Records on file at time of employment, Inspection Form Comments: Staff are missing items in their folder.	8/29/2025
Failed - Furniture child size, clean, good condition, Classroom Checklist / K1 Comments: broken plastic container.	8/22/2025
Failed - Indoor thermometer (child safe), Classroom Checklist / K4 Comments: No thermometer.	8/22/2025

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.


Signature of Facility Representative

Jay Dalton


Date

8/29/2025

Signature of DHR Licensing Representative

Date

COPIES TO: Hannah William