ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

Facility Name: BY HIS GRACE DAYCARE & LEARNING CENTER V	Type of Facility : Center [X] Day [X] OST [ ] Night [X] Family [ ] University [Group [ ]	Date of Visit: 9/3/2025
Facility Address: 1767 HALCYON BOULEVARD, MONTGOMERY, AL 36117, Montgomery	Licensee: TKJ BY HIS GRACE MINISTRIES	Telephone #: (334) 593-9439
Ages: 6 Weeks to 12 Years/6 Weeks to 12 Years	Director (if applicable):	Capacity: 116 / 30 Day Night

SECTION B - DEFICIENCY INFORMATION

Performance Standard Deficiency ***HAZARDS MUST BE CORRECTED IMMEDIATELY****	**Date Corrected by Licensee**
Deficiency Summary	
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: Some of the facility staff are not enrolled in Alabama Pathways Registry.	Pending Correction
Failed - Hazardous substances under lock and key or combination lock, Inspection Form Comments: Storage closet which contains bleach and cleaning supplies not under lock & key or combination lock.	9/3/2025
Failed - Outdoor play area and equipment are free of apparent hazardous conditions, Inspection Form Comments: Thick tall grass	Pending Correction
Failed - Preadmission Form, Child Checklist Comments: Missing documentation	Pending Correction
Failed - Preadmission Form, Child Checklist Comments: Missing documentation	Pending Correction
Failed - Preadmission Form, Child Checklist Comments: Missing documentation	Pending Correction
Failed - Preadmission Form, Child Checklist Comments: Missing documentation	Pending Correction
Failed - Preadmission Form, Child Checklist Comments: Missing documentation	Pending Correction
Failed - Preadmission Form, Child Checklist Comments: Missing documentation	Pending Correction

Failed - Preadmission Form, Child Checklist Comments: Missing documentation	Pending Correction
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Failed - Preadmission Form, Child Checklist Comments: Missing documentation	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 _____, 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.

_____ 09/03/2025

Signature of Facility Representative Date

Amy Horn

_____ _____

Signature of DHR Licensing Representative Date

COPIES TO: _____