

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

**SECTION A- IDENTIFYING INFORMATION**

Facility Name: MUNFORD HEAD START	Type of Facility : Center [X] Day [X]      OST [ ] Night [ ]     Family [ ] University [ ] Group [ ]	Date of Visit: 9/15/2025
Facility Address: 90 MAIN STREET, MUNFORD, AL 36268, Talladega	Licensee: TALLADEGA CLAY RANDOLPH CHILD CARE CORP	Telephone #: (256) 854-2174
Ages: 6 Weeks to 5 Years	Director (if applicable): Cotia Bolton	Capacity: 26      /      NA Day      Night

**SECTION B - DEFICIENCY INFORMATION**

<u>Performance Standard Deficiency</u> <b>HAZARDS MUST BE CORRECTED IMMEDIATELY*</b>	<b>Date Corrected by Licensee</b>
<b>Deficiency Summary</b>	
Failed - Center free of apparent hazards, Inspection Form Comments: mold present throughout facility	9/15/2025
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: Some of the staff not registered in Alabama Pathways	Pending Correction
Failed - Hazardous substances locked, Classroom Checklist / Classroom B Comments: Heavy presence of mold on changing table, carpet, chairs, walls and throughout classroom	9/15/2025
The most recent licensing evaluation not posted in the facility, Ad Hoc Comments: NA	9/15/2025
Public Notice Form not posted in the facility, Ad Hoc Comments: NA	9/15/2025
One staff present in the facility without a staff file, Ad Hoc Comments: NA	Pending Correction
One staff is missing the date in which the doctor signed the Medical Report, Ad Hoc Comments: NA	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 10.14.2025, 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.

Cotia Bolton  
Signature of Facility Representative

10/11/2025  
Date

bridgette-smith  
[Signature]  
Signature of DHR Licensing Representative

10/11/2025  
Date

COPIES TO: Director

\* deficiency report provided 9.15.2025.  
Report not submitted to Department