

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

SECTION A- IDENTIFYING INFORMATION

Facility Name: LAKEVIEW BAPTIST CHILD DEVELOPMENT CTR.	Type of Facility : Center [X] Day [X] OST [] Night [] Family [] University [] Group []	Date of Visit: 8/15/2024
Facility Address: 132 CENTRAL AVENUE, OXFORD, AL 36203, Calhoun	Licensee: LAKEVIEW BAPTIST CHILD DEVELOPMENT CTR	Telephone #: (256) 741-0002
Ages: 6 Weeks to 12 Years	Director (if applicable): DONNA WELLS	Capacity: 102 NA Day Night

SECTION B - DEFICIENCY INFORMATION

<u>Performance Standard Deficiency</u> <i>HAZARDS MUST BE CORRECTED IMMEDIATELY*</i>	Date Corrected by Licensee
Deficiency Summary	
Failed - Child care workers/teachers/subs meet qualification and have 12 hours of training within 30 days of employment, Inspection Form Comments: Some staff do not have 12 hours of training within the first 30 days of employment.	9/24/2025
Failed - Child care workers/teachers/subs meet requirements for Health & Safety training, Inspection Form Comments: Some staff do not meet requirements for health and safety training.	9/24/2025
Failed - Medical exam and TB test on file at time of employment, Inspection Form Comments: Some staff did not have a medical or tb skin test at the time of employment.	9/24/2025

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**.

Donna Wells

Signature of Facility Representative

8/15/24

Date

Jaime Bowman

08/15/24

**Signature of DHR Licensing
Representative**

Date

COPIES TO: Donna Wells