

**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: 9/24/2025
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

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: Not registered on website.	Pending Correction 10/6/2025 - 10W
Failed - Character and suitability review conducted on required person (every 5 years), Inspection Form Comments: one staff working with an expired CA/N.	Pending Correction 10/6/2025 - 10W
Failed - Ongoing Training, Staff Checklist Comments: missing 6 hours.	Pending Correction 10/6/2025 - 10W
Failed - Ongoing Training, Staff Checklist Comments: missing 2 hours.	Pending Correction 10/6/2025 - 10W
Failed - Immunization Certificate, Child Checklist Comments: missing	Pending Correction 10/6/2025 - 10W
Failed - Hazardous substances locked, Classroom Checklist / 2's Comments: Vaseline Lotion and unknown spray substance	9/24/2025
Failed - Containers labeled, Classroom Checklist / 2's Comments: Unlabeled spray bottle.	Pending Correction 10/6/2025 - 10W

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

10/08/25, 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

9/24/25
Date

Jaime Bowman

09/24/25

Signature of DHR Licensing Representative

Date _____

COPIES TO: Donna Wells