

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

SECTION A - IDENTIFYING INFORMATION

Facility Name: TAMMY TUCKER	Type of Facility : Center [] Day [X] OST [] Night [] Family [] University [] Group [X]	Date of Visit: 10/01/25
Facility Address: 5945 CO RD 6, SWEETWATER, AL, 36782, Marengo	Licensee: TAMMY TUCKER	Telephone #: (334) 992-2218
Ages: 6 Weeks to 12 Years	Director (if applicable):	Capacity: 12 / 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 all home staff including licensee/substitutes/assistant caregivers must enroll in Alabama Pathways Professional Development Registry, Inspection Form Comments: SOME STAFF ID NOT REGISTERED IN ALABAMA PATHWAYS	Pending Correction
Failed - Ongoing Training, Staff Checklist Comments: LICENSEE REQUIRES 20 HOURS OF PERFORMANCE STANDARD TRAINING.	9/4/2025
Failed - Health and Safety Training, Staff Checklist Comments: LICENSEE REQUIRES 11 HOURS OF HEALTH & SAFETY TRAINING	9/4/2025
Failed - Infant -Child CPR Certification, Staff Checklist Comments: EXPIRED	8/6/2025
Failed - Infant -Child First Aid Certificate, Staff Checklist Comments: EXPIRED	8/6/2025

Failed - Ongoing Training, Staff Checklist Comments: REQUIRES 6 HOURS OF PERFORMANCE STANDARD TRAINING	Pending Correction
Failed - Health and Safety Training, Staff Checklist Comments: REQUIRES 11 HOURS OF HEALTH & SAFETY TRAINING	Pending Correction
Failed - CA/N Clearance Form (Every Five Years), Staff Checklist Comments: NOT FOUND IN FILE	9/4/2025
Failed - Ongoing Training, Staff Checklist Comments: REQUIRES 6 HOURS OF PERFORMANCE STANDARD TRAINING	Pending Correction
Failed - Health and Safety Training, Staff Checklist Comments: REQUIRES 11 HOURS OF HEALTH & SAFETY TRAINING	10/1/2025
Failed - Photo ID Verification, Staff Checklist Comments: FILE INCOMPLETE/PHOTO ID	8/6/2025
Failed - Medical, Staff Checklist Comments: FILE INCOMPLETE/MEDICAL	9/4/2025
Failed - TB Test Date and Results, Staff Checklist Comments: FILE INCOMPLETE/TB	9/4/2025
Failed - Verification of Education, Staff Checklist Comments: NOT IN FILE	Pending Correction
Failed - References, Staff Checklist Comments: NOT IN FILE/ 3 REFERENCES	10/1/2025
Failed - Current Driver's License, Staff Checklist Comments: NOT IN FILE	8/6/2025
Failed - Written verification of Emergency Procedures, Staff Checklist Comments: NOT IN FILE	9/4/2025
Failed - Written Verification of Standards Read, Staff Checklist Comments: NOT IN FILE	9/4/2025

Failed - Ongoing Training, Staff Checklist Comments: REQUIRES 6 HOURS OF PERFORMANCE STANDARD TRAINING	10/1/2025
Failed - Health and Safety Training, Staff Checklist Comments: REQUIRES 11 HEALTH AND SAFETY TRAINING TOPICS	10/1/2025

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 10/15/25, 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.

<u>Tammy Tucker</u> <i>Signature of Facility Representative</i>	<u>10/01/25</u> Date
<u>Olivia Jackson</u> <i>Signature of DHR Licensing Representative</i>	<u>10/01/25</u> Date

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