

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

**SECTION A - IDENTIFYING INFORMATION**

Facility Name: ARDENT PRESCHOOL REDSTONE	Type of Facility : Center <input checked="" type="checkbox"/> Day <input checked="" type="checkbox"/> OST <input type="checkbox"/> Night <input type="checkbox"/> Family <input type="checkbox"/> University <input type="checkbox"/> Group <input type="checkbox"/>	Date of Visit: 10/22/2025
Facility Address: 2400 RIDEOUT RD SW, HUNTSVILLE, AL 35808, Madison	Licensee: ARDENT PRESCHOOL REDSTONE, LLC	Telephone #: (256) 837-5437
Ages: 6 Weeks to 6 Years	Director (if applicable): JOHN LABRECHE	Capacity: 287 / NA Day Night

**SECTION B - DEFICIENCY INFORMATION**

<b>Performance Standard Deficiency</b> <i>HAZARDS MUST BE CORRECTED IMMEDIATELY*</i>	<b>Date Corrected by Licensee</b>
<b>Deficiency Summary</b>	
Failed - References, Staff Checklist Comments: need 2 references	9/29/2025
Failed - Hazardous substances locked, Classroom Checklist / Beginner 2 Comments: Disinfectant spray not locked up.	9/29/2025
Per staff written statement and video footage confirmed, on August 12, 2025, a staff person grabbed a four-year-old child by the arm, leaving a bruise on the upper part of the left arm, Ad Hoc Comments: NA	10/22/2025

**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           N/A          , 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.**

Ebony Meade  
*Signature of Facility Representative*

10/22/2025  
Date

LATONYA JAMES  
Latonya James  
*Signature of DHR Licensing Representative*

Oct. 22, 2025  
Date

COPIES TO: Ebony Meade