ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

Facility Name: LIL' ANGELS DAYCARE	Type of Facility : Center [X] Day [X] OST [ ] Night [ ] Family [ ] University [ ] Group [ ]	Date of Visit: 11/5/2025
Facility Address: 111 OZARK ROAD, ABBEVILLE, AL 36310, Henry	Licensee: LIL' ANGELS DAYCARE, INC.	Telephone #: (334) 585-2440
Ages: 6 Weeks to 5 Years	Director (if applicable): KENDRA GRIMSLEY	Capacity: 40 / 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 all staff are enrolled in Alabama Pathway registry.	Pending Correction
Failed - Records on file at time of employment, Inspection Form Comments: Not all staff have complete files.	Pending Correction
Failed - Written Verification of Standards Read, Staff Checklist Comments: not in file	Pending Correction
Failed - Medical, Staff Checklist Comments: expired	Pending Correction
Failed - Medical, Staff Checklist Comments: not dated	Pending Correction
Failed - TB Test Date and Results, Staff Checklist Comments: not in file	Pending Correction

Failed - References, Staff Checklist Comments: 2 in file	Pending Correction
Failed - CA/N Clearance Form (Every Five Years), Staff Checklist Comments: not in file	Pending Correction
Failed - Written Verification of Standards Read, Staff Checklist Comments: not in file	Pending Correction
Failed - Ongoing Training, Staff Checklist Comments: There is only 6 hours in the file.	Pending Correction
Failed - Health and Safety Training, Staff Checklist Comments: Class 11 is missing	Pending Correction
Failed - Medical, Staff Checklist Comments: Not in file.	Pending Correction
Failed - TB Test Date and Results, Staff Checklist Comments: Not in file.	Pending Correction
Failed - References, Staff Checklist Comments: There is only 1 in the file.	Pending Correction
Failed - Suitability Determination (Every 5 years), Staff Checklist Comments: Notin file.	Pending Correction
Failed - Ongoing Training, Staff Checklist Comments: There is no verification of ongoing training in the file.	Pending Correction
Failed - Health and Safety Training, Staff Checklist Comments: There is not verification for all health and safety training in file.	Pending Correction
Failed - Medical, Staff Checklist Comments: expired	Pending Correction
Failed - Written Verification of Standards Read, Staff Checklist Comments: Not in file.	Pending Correction
Failed - Ongoing Training, Staff Checklist	Pending Correction

Comments: There is not verification of all ongoing training in the file.

Failed - Medical, Staff Checklist — Pending Correction
Comments: There is no date on the form.

Failed - TB Test Date and Results, Staff Checklist — Pending Correction
Comments: There are no results on the form.

Failed - Written Verification of Standards Read, Staff Checklist — Pending Correction
Comments: Not in file.

Failed - Ongoing Training, Staff Checklist — Pending Correction
Comments: There is not verification for all ongoing training in the file.

Failed - Health and Safety Training, Staff Checklist — Pending Correction
Comments: Class 1 is missing.

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 11/19/2025**, 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.

Twyla Morgan

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Signature of Facility Representative Date

JAY DALTON **11/5/25**

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Signature of DHR Licensing Representative Date

COPIES TO: Twyla Morgan____

90 days 2/3/26