

ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

Facility Name: CITY OF LIGHTS	Type of Facility : Center [X] Day [X] OST [] Night [] Family [] University [] Group []	Date of Visit: 9/18/2025
Facility Address: 23 AUSTIN CIRCLE, DORA, AL 35062, Walker	Licensee: CITY OF LIGHTS	Telephone #: (205) 255-6688
Ages: 0 Weeks to 14 Years	Director (if applicable): ANGELA ALEXANDER	Capacity: 94 / NA Day Night

SECTION B - DEFICIENCY INFORMATION

<u>Performance Standard Deficiency</u> HAZARDS MUST BE CORRECTED IMMEDIATELY*	Date Corrected by Licensee
Deficiency Summary	
Failed - Bio-contaminants shall be stored in a labeled container and disposed of properly, Inspection Form Comments: Nothing present at the center	9/23/2025
Failed - Feeding schedule according to child's needs, Inspection Form Comments: Written instructions for tube fed child	9/18/2025
Failed - Transportation checklists used as required, Inspection Form Comments: Center has not done them	9/19/2025
Failed - Vehicle safety check done annually, signed by certified mechanic, dated, and filed in center, Inspection Form Comments: Hasn't been done	9/26/2025
Failed - Medication administered only with written authorization from parent and child's health professional, Inspection Form Comments: No written authorization form from the parents regarding medication for 2 children in the Infant's classroom	9/18/2025
Failed - Transportation checklists, Inspection Form Comments: is not complete	9/19/2025
Failed - Vehicle safety check, Inspection Form Comments: Is not complete	9/19/2025
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: None of the facility staff members are enrolled in	9/22/2025

Alabama Pathway's registry.	
Failed - Ongoing Training, Staff Checklist	9/26/2025
Comments: Missing	
Failed - Health and Safety Training, Staff Checklist	9/26/2025
Comments: Missing	
Failed - Health and Safety Training, Staff Checklist	9/26/2025
Comments: 1-10 missing	
Failed - Ongoing Training, Staff Checklist	9/25/2025
Comments: Missing from the file	
Failed - Health and Safety Training, Staff Checklist	9/26/2025
Comments: Missing from the file	
Failed - Ongoing Training, Staff Checklist	9/25/2025
Comments: Missing from the file	
Failed - Health and Safety Training, Staff Checklist	9/26/2025
Comments: Missing	
Failed - Ongoing Training, Staff Checklist	9/26/2025
Comments: Expired	
Failed - Health and Safety Training, Staff Checklist	9/26/2025
Comments: Expired	
Failed - Ongoing Training, Staff Checklist	9/26/2025
Comments: Missing 9 hrs	
Failed - Infant -Child CPR Certification, Staff Checklist	9/26/2025
Comments: Expired	
Failed - Infant -Child First Aid Certificate, Staff Checklist	9/26/2025
Comments: Expired	
Failed - Ongoing Training, Staff Checklist	9/26/2025
Comments: Expired	
Failed - Ongoing Training, Staff Checklist	9/26/2025
Comments: Missing	
Failed - Health and Safety Training, Staff Checklist	9/26/2025
Comments: Missing	
Failed - Ongoing Training, Staff Checklist	9/26/2025
Comments: Expired	
Failed - Health and Safety Training, Staff Checklist	9/26/2025
Comments: Expired	
Failed - Hazardous substances locked, Classroom Checklist / Nursery	9/18/2025
Comments: Hot shot roach spray, glass cleaner, hand sanitizer, and hand lotion not under lock and key/ combination lock	
Failed - Medication locked, Classroom Checklist / Nursery	9/18/2025
Comments: Seizure medication, nasal spray, and Vaseline not under lock and key/ combination lock	
Failed - Hazardous substances locked, Classroom Checklist / Headstart	9/18/2025
Comments: cleaning supplies and teacher's purse in the cabinet with missing key and cleaning supplies under the changing table with missing key	
Failed - Medication locked, Classroom Checklist / Pre-K	9/18/2025
Comments: Medication (ibuprofen) sitting on the teacher's desk	
Center did not notify the Department that they are transporting	9/19/2025

children., Ad Hoc

Comments: NA

There are 4 seats on the bus/van that are not secure., Ad Hoc

9/26/2025

Comments: NA

(2) Staff files are incomplete. , Ad Hoc

10/3/2025

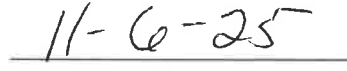
Comments: NA

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.


Signature of Facility Representative

SHUNDR NEVELS


Date

Signature of DHR Licensing Representative

Date

COPIES TO: _____