

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

SECTION A - IDENTIFYING INFORMATION

Facility Name: WOODLEY ROAD HEAD START	Type of Facility : Center [X] Day [X] OST [] Night [] Family [] University [] Group []	Date of Visit: 12/2/2025
Facility Address: 3065 WOODLEY ROAD, MONTGOMERY, AL 36108, Montgomery	Licensee: MONTGOMERY COMMUNITY ACTION CCD	Telephone #: (334) 288-6535
Ages: 3 Years to 5 Years	Director (if applicable): LATASHA YOUNG	Capacity: 100 , NA Day Night

SECTION B - DEFICIENCY INFORMATION

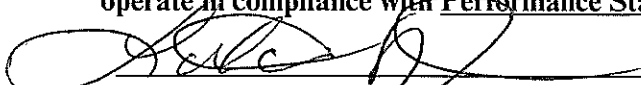
<u>Performance Standard Deficiency</u> HAZARDS MUST BE CORRECTED IMMEDIATELY*	Date Corrected by Licensee
Deficiency Summary	
Failed - Required ratios maintained at all times, Inspection Form Comments: Classroom A ratios not maintained as the teacher was in/out of the classroom	12/2/2025
Failed - 2 ½ years up to 4 years 1 to 11, Inspection Form Comments: Classroom A was out of ratio as the teacher was in/out of the classroom 14 children ages 3 years - 4 years	12/2/2025
Failed - Each child signed in and signed out with a written signature or bio-metric ID, Inspection Form Comments: First initials and last name observed on the sign in/out sheets in the following classrooms: A, B, D and PreK	Pending Correction
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: Some of the staff is not enrolled in the Alabama Pathway's Professional Development registry	Pending Correction
Failed - Photo ID Verification, Staff Checklist Comments: missing	Pending Correction
Failed - References, Staff Checklist Comments: missing 1	Pending Correction
Failed - Photo ID Verification, Staff Checklist Comments: missing	Pending Correction
Failed - References, Staff Checklist Comments: missing	Pending Correction

Failed - Photo ID Verification, Staff Checklist Comments: missing	Pending Correction
Failed - Ongoing Training, Staff Checklist Comments: missing	Pending Correction
Failed - Health and Safety Training, Staff Checklist Comments: missing	Pending Correction
Failed - References, Staff Checklist Comments: missing one complete reference	Pending Correction
Failed - Photo ID Verification, Staff Checklist Comments: missing	Pending Correction
Failed - Ongoing Training, Staff Checklist Comments: missing	Pending Correction
Failed - Photo ID Verification, Staff Checklist Comments: missing	Pending Correction
Failed - Ongoing Training, Staff Checklist Comments: missing	Pending Correction
Failed - Health and Safety Training, Staff Checklist Comments: missing	Pending Correction
Failed - Photo ID Verification, Staff Checklist Comments: missing	Pending Correction
Failed - Ongoing Training, Staff Checklist Comments: missing	Pending Correction
Failed - Ongoing Training, Staff Checklist Comments: missing	Pending Correction
Failed - Health and Safety Training, Staff Checklist Comments: missing	Pending Correction
Failed - Ongoing Training, Staff Checklist Comments: missing	Pending Correction
Failed - Health and Safety Training, Staff Checklist Comments: missing	Pending Correction
Failed - References, Staff Checklist Comments: missing	Pending Correction
Failed - References, Staff Checklist Comments: missing	Pending Correction
Failed - Health and Safety Training, Staff Checklist Comments: missing #11	Pending Correction
8 children files not enrolled in the Arise system, Ad Hoc Comments: NA	12/2/2025
One staff members counted in ratio without a staff file, Ad Hoc Comments: NA	12/2/2025

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 12/16/25, as verification that deficiencies have been corrected.

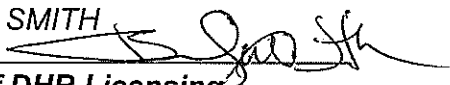
NOTICE: Any misleading or any false statements or reports made to the Department and/or failure to correct the listed deficiencies can be the basis for adverse action. None of these requirements are to be interpreted to allow anyone to operate in violation of

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.


Signature of Facility Representative

12/02/2025
Date

BRIDGETTE SMITH


Signature of DHR Licensing Representative

12/2/2025
Date

COPIES TO: Director