

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

**SECTION A- IDENTIFYING INFORMATION**

Facility Name: KINGDOM AUTHORITY MINISTRIES	Type of Facility: Center [X] Day [X]      OST [ ] Night [ ]      Family [ ] University [ ] Group [ ]	Date of Visit: 09/03/2024
Facility Address: 4610 DESOTO CAVERNS PKY, CHILDERSBURG, AL 35044, Talladega	Licensee: PAULA LITTLE KINGDOM AUTHORITY MINISTRIE	Telephone #: (256) 378-6700
Ages:	Director (if applicable): Paula Little	Capacity: 84      /      NA Day      Night

**SECTION B - DEFICIENCY INFORMATION**

<b><u>Performance Standard Deficiency</u></b> <b><i>HAZARDS MUST BE CORRECTED IMMEDIATELY*</i></b>	<b>Date Corrected by Licensee</b>
<b>Deficiency Summary</b>	
Failed - Center free of apparent hazards, Inspection Form Comments: There are rat feces under the sink in the bathroom and in the toddler classroom.	09/20/2024
Failed - Hazardous substances under lock and key or combination lock, Inspection Form Comments: Cleaning supplies not under lock and key in the infant room.	09/20/2024
Failed - Outdoor play area and equipment are free of apparent hazardous conditions, Inspection Form Comments: Grass on both playgrounds needs to be cut.	09/20/2024
Failed - Outdoor play area free of apparent hazardous conditions:, Inspection Form Comments: Grass needs to be cut on both playgrounds.	09/20/2024
Failed - Does the center's staff provide transportation?, Inspection Form Comments: Only in the summer months.	09/20/2024
Failed - Each child signed in and signed out with a written signature or bio-metric ID, Inspection Form Comments: Parents are using initials to sign their children in for the day.	09/20/2024
Failed - Child care workers/teachers/subs meet requirements for Health & Safety training, Inspection Form Comments: There are two staff missing CCDF training.	09/20/2024
Failed - Medical exam and TB test on file at time of employment,	09/20/2024

Inspection Form	
Comments: One staff is missing their TB skin test.	
Failed - Verification of Education, Staff Checklist	09/20/2024
Comments: missing	
Failed - Application, Staff Checklist	09/20/2024
Comments: Incomplete application	
Failed - Health and Safety Training, Staff Checklist	09/20/2024
Comments: Missing CCDF trainings	
Failed - TB Test Date and Results, Staff Checklist	09/20/2024
Comments: missing TB skin test	
Failed - Verification of Education, Staff Checklist	09/20/2024
Comments: missing verification of education	
Failed - Preadmission Form, Child Checklist	09/20/2024
Comments: incomplete	
Failed - Preadmission Form, Child Checklist	09/20/2024
Comments: incomplete	
Failed - Preadmission Form, Child Checklist	09/20/2024
Comments: incomplete	
Failed - Immunization Certificate, Child Checklist	09/20/2024
Comments: Expired	
Failed - Preadmission Form, Child Checklist	09/20/2024
Comments: incomplete	
Failed - Preadmission Form, Child Checklist	09/20/2024
Comments: incomplete	
Failed - Hazardous substances locked, Classroom Checklist / 6 wks - 18 mo	09/20/2024
Comments: Cleaning supplies not under lock and key.	
Failed - Furniture child size, clean, good condition, Classroom Checklist / 18 mo - 2 1/2	09/20/2024
Comments: Rat feces under the sink	
Failed - Hazardous substances locked, Classroom Checklist / 18 mo - 2 1/2	09/20/2024
Comments: Lysol spray not under lock and key.	
Failed - Furniture child size, clean, good condition, Classroom Checklist / 3 yr olds	09/20/2024
Comments: Rat feces under sink.	
Failed - Furniture child size, clean, good condition, Classroom Checklist / 3 yr olds	09/20/2024
Comments: Rat feces under the sink.	
Failed - Hazardous substances locked, Classroom Checklist / 3 yr olds	09/20/2024
Comments: Lysol spray can not under lock and key.	

**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**

*bridgette smith*

\_\_\_\_\_  
Date

\_\_\_\_\_  
**Signature of DHR Licensing  
Representative**

\_\_\_\_\_  
Date

COPIES TO: \_\_\_\_\_