

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

SECTION A - IDENTIFYING INFORMATION

Facility Name: TAMMY TUCKER	Type of Facility : Center [] Day [X] OST [] Night [] Family [] University [] Group [X]	Date of Visit: 12/3/2025
Facility Address: 5945 CO RD 6, SWEETWATER, AL, 36782, Marengo	Licensee: TAMMY TUCKER	Telephone #: (334) 992-2218
Ages: 6 Weeks to 12 Years	Director (if applicable):	Capacity: 12 / NA Day Night

SECTION B - DEFICIENCY INFORMATION

<u>Performance Standard Deficiency</u> <i>HAZARDS MUST BE CORRECTED IMMEDIATELY*</i>	Date Corrected by Licensee
Deficiency Summary	
All deficiencies corrected as of 12/08/25.	
Failed - By August 1 2022 all home staff including licensee/substitutes/assistant caregivers must enroll in Alabama Pathways Professional Development Registry; Inspection Form Comments: SOME STAFF ID NOT REGISTERED IN ALABAMA PATHWAYS	8/20/2025
Failed - Ongoing Training, Staff Checklist Comments: LICENSEE REQUIRES 20 HOURS OF PERFORMANCE STANDARD TRAINING.	8/28/2025
Failed - Health and Safety Training, Staff Checklist Comments: LICENSEE REQUIRES 11 HOURS OF HEALTH & SAFETY TRAINING	8/20/2025
Failed - Infant -Child CPR Certification, Staff Checklist Comments: EXPIRED	8/6/2025
Failed - Infant -Child First Aid Certificate, Staff Checklist Comments: EXPIRED	8/6/2025
Failed - Ongoing Training, Staff Checklist Comments: REQUIRES 6 HOURS OF PERFORMANCE STANDARD TRAINING	9/29/2025
Failed - Health and Safety Training, Staff Checklist	9/29/2025

Comments: REQUIRES 11 HOURS OF HEALTH & SAFETY TRAINING

Failed - CA/N Clearance Form (Every Five Years), Staff Checklist 8/20/2025
Comments: NOT FOUND IN FILE

Failed - Ongoing Training, Staff Checklist 9/29/2025
Comments: REQUIRES 6 HOURS OF PERFORMANCE STANDARD TRAINING

Failed - Health and Safety Training, Staff Checklist 9/9/2025
Comments: REQUIRES 11 HOURS OF HEALTH & SAFETY TRAINING

Failed - Photo ID Verification, Staff Checklist 8/6/2025
Comments: FILE INCOMPLETE/PHOTO ID

Failed - Medical, Staff Checklist 8/12/2025
Comments: FILE INCOMPLETE/MEDICAL

Failed - TB Test Date and Results, Staff Checklist 9/1/2025
Comments: FILE INCOMPLETE/TB

Failed - Verification of Education, Staff Checklist 9/29/2025
Comments: NOT IN FILE

Failed - References, Staff Checklist 9/9/2025
Comments: NOT IN FILE/ 3 REFERENCES

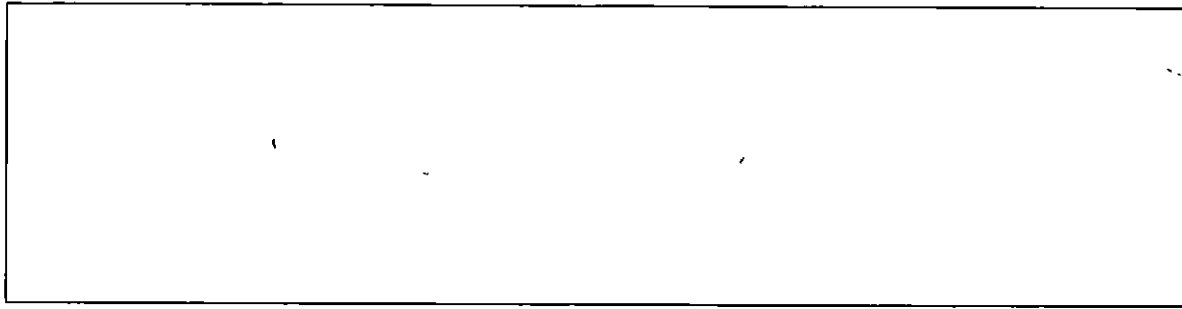
Failed - Current Driver's License, Staff Checklist 8/6/2025
Comments: NOT IN FILE

Failed - Written verification of Emergency Procedures, Staff Checklist 9/1/2025
Comments: NOT IN FILE

Failed - Written Verification of Standards Read, Staff Checklist 8/1/2025
Comments: NOT IN FILE

Failed - Ongoing Training, Staff Checklist 9/10/2025
Comments: REQUIRES 6 HOURS OF PERFORMANCE STANDARD TRAINING

Failed - Health and Safety Training, Staff Checklist 9/10/2025
Comments: REQUIRES 11 HEALTH AND SAFETY TRAINING TOPICS



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.

Jimmy Tucker
Signature of Facility Representative

12/03/25
Date

OLIVIA JACKSON
Signature of DHR Licensing Representative

12/03/25
Date

COPIES TO: ARISE/LICENSEE