

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

SECTION A- IDENTIFYING INFORMATION

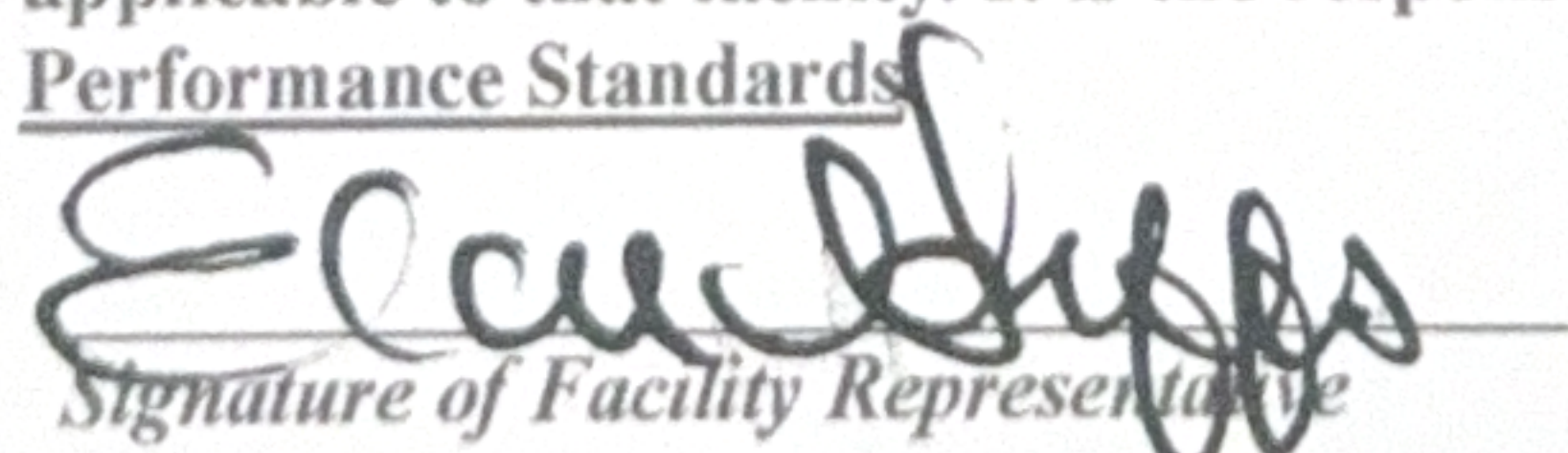
Facility Name: ELAINE GRIFFITHS	Type of Facility : Center [] Day [X] OST [] Night [] Family [X] University [] Group []	Date of Visit: 11/24/2025
Facility Address: 102 GRASMERE COURT, PRATTVILLE, AL, 36066, Autauga	Licensee: ELAINE GRIFFITHS	Telephone #: (334) 462-1950
Ages: 6 Weeks to 8 Years	Director (if applicable): N/A	Capacity: 6 / NA Day Night

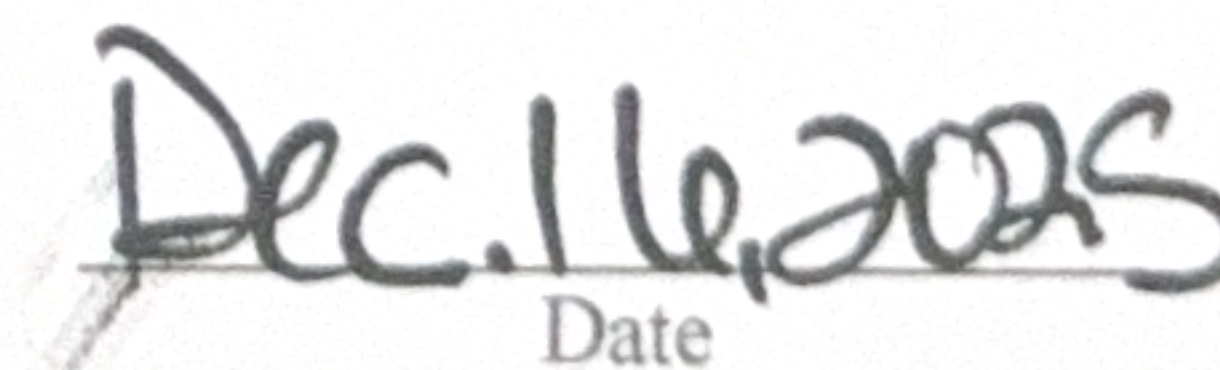
SECTION B - DEFICIENCY INFORMATION

<u>Performance Standard Deficiency</u> <i>HAZARDS MUST BE CORRECTED IMMEDIATELY*</i>	<u>Date Corrected by</u> <u>Licensee</u>
Deficiency Summary	
All deficiencies corrected effective 12/16/2025.	
Failed - Suitability Determination (Every 5 years), Staff Checklist Comments: Staff does not have the required suitability letter.	12/16/2025
Failed - Preadmission Form, Child Checklist Comments: The preadmission form is not signed.	12/1/2025

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 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.


Signature of Facility Representative


Date

ROBIN BUSSIE

12/16/2025

Signature of DHR Licensing Representative

Date

COPIES TO: Licensee