

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

SECTION A- IDENTIFYING INFORMATION

Facility Name: COLUMBIANA HEAD START/EARLY HS CENTER	Type of Facility : Center [X] Day [X] OST [] Night [] Family [] University [] Group []	Date of Visit: 1/28/2026
Facility Address: 201 WASHINGTON STREET, COLUMBIANA, AL, 35051, Shelby	Licensee: FAMILY GUIDANCE CENTER OF ALABAMA, INC.	Telephone #: (205) 558-8885
Ages: 6 Weeks to 5 Years	Director (if applicable): BRITTANY WILLIAMS	Capacity: 28 / 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	
Failed - Each child signed in and signed out with a written signature or bio-metric ID, Inspection Form Comments: The daily sign in/out sheets missing full parent signatures. One parent in classroom A did not sign out for the day on 1/27/26	Pending Correction
Failed - Center director meets qualifications, Inspection Form Comments: Center Director does not meet qualifications for Director	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 staff not registered in Alabama Pathways	Pending Correction
Failed - Interruption of the center's electrical, telephone or gas service, Inspection Form Comments: Facility did not notify the Department of interruption of heat within 24 hours	Pending Correction
Failed - Most recent license, permit, or approval, Inspection Form Comments: Current license not posted	Pending Correction
Failed - Most recent licensing evaluation, Inspection Form Comments: most recent licensing evaluation not posted	Pending Correction
Failed - Emergency Preparedness and Response Plan, Inspection Form Comments: Emergency Preparedness and Response plan not	Pending Correction

Comments: An unlocked cabinet containing various hazards (Lysol, toothpaste) not under lock and key. A closet containing various hazards not locked. In the EHS classroom ages 6 weeks - 3 years	
Failed - Containers labeled, Classroom Checklist / Classroom B	Pending Correction
Comments: An unlabeled spray bottle with clear substance not under lock and key	
Failed - Containers labeled, Classroom Checklist / Classroom B	Pending Correction
Comments: An unlabeled spray bottle with clear substance not under lock and key	
Failed - Containers labeled, Classroom Checklist / Classroom B	Pending Correction
Comments: An unlabeled spray bottle with clear substance not under lock and key	
Failed - Hazardous substances locked, Classroom Checklist / Classroom B	Pending Correction
Comments: An unlocked cabinet containing various hazards (Lysol, toothpaste) not under lock and key. A closet containing various hazards not locked. In the EHS classroom ages 6 weeks - 3 years	
Failed - Hazardous substances locked, Classroom Checklist / Classroom B	Pending Correction
Comments: An unlocked cabinet containing various hazards (Lysol, toothpaste) not under lock and key. A closet containing various hazards not locked. In the EHS classroom ages 6 weeks - 3 years	
9 children files not entered into the Arise system, Ad Hoc	Pending Correction
Comments: NA	
Two children files missing doctor's information, Ad Hoc	Pending Correction
Comments: NA	
One child file missing a parent/guardian signature, Ad Hoc	Pending Correction
Comments: NA	
One staff person missing a staff file, Ad Hoc	Pending Correction
Comments: NA	
Facility failed to report to the Department closure of facility on January 27, 2026 and January 28, 2026, Ad Hoc	Pending Correction
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 2/13/26, 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.



1-28-26