

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

SECTION A- IDENTIFYING INFORMATION

Facility Name: SOUTHEAST HEALTH CHILD DEV. CENTER	Type of Facility : Center [X] Day [X] OST [] Night [X] Family [] University [] Group []	Date of Visit: 2/5/2026
Facility Address: 302 HAVEN DRIVE, HUMAN RESOURCES DOTHAN, AL 36301, Houston	Licensee: HOUSTON COUNTY HEALTHCARE AUTHORITY	Telephone #: (334) 793-8888
Ages: 6 Weeks to 12 Years/6 Weeks to 12 Years	Director (if applicable): CYNTHIA HICKS	Capacity: 260 / 16 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 - Electrical outlets covered, Classroom Checklist / School Age 1 Comments: The plug at the desk had a power block that did not have outlet covers.	Pending Correction
Failed - Containers labeled, Classroom Checklist / School Age 1 Comments: There was a spray bottle that did not have a label on it.	Pending Correction
Failed - Hazardous substances locked, Classroom Checklist / School Age 2 Comments: Oxi clean, end bac and bleach cleaner was not under lock and key.	Pending Correction
Failed - Medication locked, Classroom Checklist / School Age 2 Comments: There was medication that was not locked up.	Pending Correction
On 12/5/26 DHR Representative observed on video dated December 1, 2025, 3 children ages 6 weeks to 1 year unsupervised in the commons middle area of the infant classrooms., Ad Hoc Comments: NA	Pending Correction

On 12/5/26 DHR Representative observed on video dated December 1, 2025, a 1 yr old leave the building unsupervised and by herself. The child was unsupervised outside about 4 min., Ad Hoc
Comments: NA

Pending Correction

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 2/19/26, 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.

Signature of Facility Representative

JAY DALTON

Date

2/5/26

Signature of DHR Licensing Representative

Date

COPIES TO: Cindy Hicks