

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

SECTION A- IDENTIFYING INFORMATION

Facility Name: BRIGHT FUTURES CHILDREN'S CENTER, TOO	Type of Facility : Center [X] Day [X] OST [] Night [] Family [] University [] Group []	Date of Visit: 2/13/2026
Facility Address: 1962 SKIPPERVILLE ROAD, OZARK, AL 36360, Dale	Licensee: BRIGHT FUTURES CHILDREN CENTER,LLC	Telephone #: (334) 443-0497
Ages: 6 Weeks to 12 Years	Director (if applicable): TOMEKIA CREWS	Capacity: 119 / 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 - 18 up to 2½ years 1 to 7, Inspection Form Comments: Ratio was not meet due to staff not meeting ccdf requirements. (CA/N, suitability & training).	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: All staff are not enrolled in the Alabama pathway registry.	Pending Correction
Failed - Records on file at time of employment, Inspection Form Comments: There are employees without a complete file.	Pending Correction
Failed - Ongoing Training, Staff Checklist Comments: There's no verification of ongoing hours.	2/13/2026
Failed - Ongoing Training, Staff Checklist Comments: There is no verification of training.	2/13/2026
Failed - Ongoing Training, Staff Checklist Comments: There is no verification of training.	2/13/2026

Failed - Health and Safety Training, Staff Checklist Comments: There is no verification of training.	2/13/2026
Failed - Suitability Determination (Every 5 years), Staff Checklist Comments: expired	Pending Correction
Failed - Immunization Certificate, Child Checklist Comments: Not in file	2/13/2026
Failed - Preadmission Form, Child Checklist Comments: Adress are not complete and there are empty spaces on the form.	2/13/2026
Failed - Preadmission Form, Child Checklist Comments: The addresses are not correct, and the parent signatures are missing.	2/13/2026
Failed - Preadmission Form, Child Checklist Comments: The addresses are not complete and there are blanks on the form.	2/13/2026
Failed - Immunization Certificate, Child Checklist Comments: Not in the fie.	2/13/2026
Failed - Preadmission Form, Child Checklist Comments: There are blanks and no addresses.	2/13/2026

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 2/27/26, 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.

Tomekia Crews

Signature of Facility Representative

2/13/26

Date

JAY DALTON

2/13/26

Signature of DHR Licensing Representative

Date

COPIES TO: Tomekia Crews

90 – days – May 3, 2026