

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

**SECTION A- IDENTIFYING INFORMATION**

|                                                                              |                                                                                                                                               |                                                           |
|------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| Facility Name:<br>HUNTSVILLE HOSPITAL CDC                                    | Type of Facility : Center [X]<br>Day [X]                      OST [ ]<br>Night [ ]                  Family [ ]<br>University [ ]<br>Group [ ] | Date of Visit:<br>2/24/2026                               |
| Facility Address:<br>699-C GALLATIN STREET,<br>HUNTSVILLE, AL 35801, Madison | Licensee:<br>HEALTH CARE AUTHORITY<br>OF CITY OF HSV.                                                                                         | Telephone #:<br>(256) 532-2760                            |
| Ages:<br>6 Weeks to 10 Years                                                 | Director (if applicable):<br>KATIE SCRUGGS                                                                                                    | Capacity:<br>179       /    NA<br>Day               Night |

**SECTION B - DEFICIENCY INFORMATION**

| <u>Performance Standard Deficiency</u><br><b>HAZARDS MUST BE CORRECTED IMMEDIATELY*</b>                                                                                                | <b>Date Corrected by<br/>Licensee</b> |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|
| <b>Deficiency Summary</b>                                                                                                                                                              |                                       |
| Failed - Staff use clean disposable gloves for diapering each child/for each diaper change, Inspection Form<br>Comments: Staff did not use gloves during diapering in toddler room 11. | 2/24/2026                             |
| Failed - Preadmission Form, Child Checklist<br>Comments: Missing                                                                                                                       | Pending Correction                    |
| Failed - Preadmission Form, Child Checklist<br>Comments: Missing                                                                                                                       | Pending Correction                    |
| Failed - Immunization Certificate, Child Checklist<br>Comments: Expired                                                                                                                | Pending Correction                    |
| Failed - Preadmission Form, Child Checklist<br>Comments: Missing                                                                                                                       | 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 03/10/26, 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.

Kati Scudder  
Signature of Facility Representative

2/25/26  
Date

AJOIA MCGHEE

\_\_\_\_\_  
Signature of DHR Licensing Representative

02/24/26  
Date

COPIES TO: Center