ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

Facility Name:	Type of Facility : Center [X]	Date of Visit:
SOUTH HIGHLAND CHILD DEV CTR	Day [X] OST [ ] Night [ ] Family [ ] University [ ] Group [ ]	3/2/2026
Facility Address:	Licensee:	Telephone #:
2035 HIGHLAND AVENUE, BIRMIMGHAM, AL 35205, Jefferson	SOUTH HIGHLAND CHILD DEV.CENTER, INC.	(205) 939-1210
Ages:	Director (if applicable):	Capacity:
6 Weeks to 7 Years	ALLISON WILLIAMS	235 , NA Day Night

SECTION B - DEFICIENCY INFORMATION

Performance Standard Deficiency ***HAZARDS MUST BE CORRECTED IMMEDIATELY****	Date Corrected by Licensee
Deficiency Summary	
Failed - Outdoor play area free of apparent hazardous conditions:, Inspection Form Comments: There was a wobbly sign structure on the preschool playground.	11/14/2025
Failed - Suitability Determination (Every 5 years), Staff Checklist Comments: Wrong form.	1/30/2026
Failed - TB Test Date and Results, Staff Checklist Comments: No results listed.	11/21/2025
Failed - Medical, Staff Checklist Comments: Expired.	12/12/2025
Failed - Verification of Education, Staff Checklist Comments: Missing.	1/16/2026
Failed - References, Staff Checklist Comments: Missing.	11/21/2025
Failed - Health and Safety Training, Staff Checklist Comments: Missing all 11 trainings.	1/7/2026
Failed - Health and Safety Training, Staff Checklist Comments: Missing topics 2, 5, 6, 7, 8, 9, 10, and 11.	12/15/2025
Failed - Medical, Staff Checklist Comments: Expired.	12/8/2025
Failed - Photo ID Verification, Staff Checklist Comments: Missing.	11/19/2025
Failed - Medical, Staff Checklist Comments: Missing.	1/13/2026

Failed - References, Staff Checklist Comments: 1 reference is missing a signature.	11/18/2025
Failed - Written Verification of Standards Read, Staff Checklist Comments: Missing.	11/18/2025
Failed - References, Staff Checklist Comments: missing 1 reference	11/21/2025
Failed - Suitability Determination (Every 5 years), Staff Checklist Comments: expired	12/16/2025
Failed - Photo ID Verification, Staff Checklist Comments: missing	11/21/2025
Failed - Medical, Staff Checklist Comments: missing	12/11/2025
Failed - TB Test Date and Results, Staff Checklist Comments: missing	12/11/2025
Failed - Written Verification of Standards Read, Staff Checklist Comments: missing	11/25/2025
Failed - Health and Safety Training, Staff Checklist Comments: missing 1, 2, 10, 11	12/11/2025
Failed - Suitability Determination (Every 5 years), Staff Checklist Comments: Wrong form.	1/9/2026
Failed - Written Verification of Standards Read, Staff Checklist Comments: Missing.	11/18/2025
Failed - Suitability Determination (Every 5 years), Staff Checklist Comments: incorrect suitability letter.	3/3/2026
Failed - Health and Safety Training, Staff Checklist Comments: Needs all 11 topics of Health and Safety training.	1/30/2026
Failed - Health and Safety Training, Staff Checklist Comments: Needs health & safety topics 2-11.	3/3/2026
Failed - Medical, Staff Checklist Comments: Expired.	1/8/2026
Failed - Preadmission Form, Child Checklist Comments: missing signatures.	11/17/2025
Failed - Preadmission Form, Child Checklist Comments: Missing information.	12/15/2025

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 NA, 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.

Gillian Williams
Signature of Facility Representative

3/2/26
Date

JAIME BOWMAN

03/02/26

Signature of DHR Licensing Representative

Date

COPIES TO: _____