

ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

Facility Name: LEONA B. WARREN HEAD START	Type of Facility : Center [X] Day [X] OST [] Night [] Family [] University [] Group []	Date of Visit: 3/12/2026
Facility Address: 310 MOBILE STREET, MOBILE, AL 36607, Mobile	Licensee: MOBILE COMMUNITY ACTION, INC.	Telephone #: (251) 471-6504
Ages: 6 Weeks to 5 Years	Director (if applicable): VELMA CRANDLE	Capacity: 233 / NA Day Night

SECTION B - DEFICIENCY INFORMATION

<u>Performance Standard Deficiency</u> HAZARDS MUST BE CORRECTED IMMEDIATELY*	Date Corrected by Licensee
Deficiency Summary	
Failed - Most recent fire inspection report within 5 years, Inspection Form Comments: Expired	Pending Correction
Failed - Suitability Determination (Every 5 years), Staff Checklist Comments: expired 2/19/21	Pending Correction
Failed - Suitability Determination (Every 5 years), Staff Checklist Comments: expired 2/19/21	Pending Correction
Failed - Suitability Determination (Every 5 years), Staff Checklist Comments: expired 2/19/21	Pending Correction
Failed - Suitability Determination (Every 5 years), Staff Checklist Comments: expired 2/19/21	Pending Correction
Failed - Suitability Determination (Every 5 years), Staff Checklist Comments: expired 2/19/21	Pending Correction
Failed - Suitability Determination (Every 5 years), Staff Checklist Comments: expired 3/11/21	Pending Correction
Failed - Suitability Determination (Every 5 years), Staff Checklist Comments: 2/19/21	Pending Correction
Failed - Suitability Determination (Every 5 years), Staff Checklist Comments: expired 3/8/21	Pending Correction
Failed - Suitability Determination (Every 5 years), Staff Checklist Comments: expired 2/19/21	Pending Correction
Failed - Suitability Determination (Every 5 years), Staff Checklist Comments: expired 2/17/21	Pending Correction
Failed - Suitability Determination (Every 5 years), Staff Checklist	Pending Correction

Comments: expired 2/22/21 Staff files are incomplete. , Ad Hoc	Pending Correction
Comments: NA One staff present/working in Classroom B at the center without a file., Ad Hoc	Pending Correction
Comments: NA Preschool Classroom F (3-5 yrs) is out of ratio due to one staff's expired suitability letter. , Ad Hoc	Pending Correction
Comments: NA Preschool Classroom G (3-5 yrs) is out of ratio due to one staff's expired suitability letter. , Ad Hoc	Pending Correction
Comments: NA Preschool Classroom H (4-5 yrs) is out of ratio due to one staff's expired suitability letter. , Ad Hoc	Pending Correction
Comments: NA One staff present/working at the center with an expired suitability letter., 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 _____, 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

Date

SHUNDR NEVELS

Signature of DHR Licensing Representative

Date

COPIES TO: _____