

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

**SECTION A- IDENTIFYING INFORMATION**

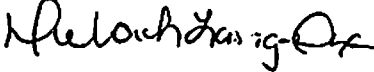
Facility Name: LITTLE SUNSHINE HOME DAYCARE	Type of Facility : Center [ ] Day [X]            OST [ ] Night [X]        Family [X] University [ ] Group [ ]	Date of Visit: 3/13/2026
Facility Address: 3123 LOUISE DRIVE SOUTH, MOBILE, AL 36606, Mobile	Licensee: CARLOTTA EVANS	Telephone #: (251) 348-4057
Ages: 2 Years to 5 Years/2 Years to 5 Years	Director (if applicable):	Capacity: 5            /    5 Day            Night

**SECTION B - DEFICIENCY INFORMATION**

<u>Performance Standard Deficiency</u> <b>HAZARDS MUST BE CORRECTED IMMEDIATELY*</b>	Date Corrected by Licensee
<b>Deficiency Summary</b>	
Failed - Electrical outlets covered, Inspection Form Comments: On 2/24/26, there is one exposed electrical outlet with no protective cover, next to the air conditioner.	2/24/2026
Failed - Fence at least 4 feet in height free from sharp protruding edges (except where prohibited by federal law), Inspection Form Comments: On 2/24/26, there are dried vines with sharp thorns on the fence covering the north side of the property.	3/16/2026
Failed - By August 1 2022 all home staff including licensee/substitutes/assistant caregivers must enroll in Alabama Pathways Professional Development Registry, Inspection Form Comments: On 2/24/26, some staff members have not uploaded required education certificate nor required training certificates for Health & Safety and Ongoing trainings in Alabama Pathways Professional Development Registry.	3/13/2026
On 2/24/26, facility's Fire Inspection Report is expired., Ad Hoc Comments: NA	3/13/2026

**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 3/27/26, 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.

_____	_____ <u>3/13/26</u>
<i>Signature of Facility Representative</i>	Date
<u>DEBORAH LANG-DIXON</u> 	<u>3/13/26</u>
<i>Signature of DHR Licensing Representative</i>	Date

COPIES TO: Carlotta Evans