ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

Facility Name: EASTER SEALS C.D.C.	Type of Facility : Center [X] Day [X] OST [ ] Night [ ] Family [ ] University [ ] Group [ ]	Date of Visit: 4/16/2026
Facility Address: 2906 CITIZENS PKWY, SELMA, AL 36701, Dallas	Licensee: BLACK BELT COMMUNITY FOUNDATION HEAD STA	Telephone #: (334) 874-1126
Ages: 3 Years to 5 Years	Director (if applicable): SANDRA STEVENSON	Capacity: 153 / NA Day Night

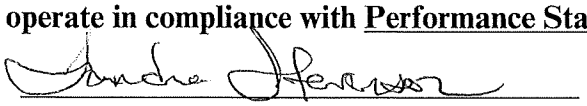
SECTION B - DEFICIENCY INFORMATION

Performance Standard Deficiency ***HAZARDS MUST BE CORRECTED IMMEDIATELY****	Date Corrected by Licensee
Deficiency Summary	
There no deficiency observed on today's visit.	
Failed - Center free of apparent hazards, Inspection Form Comments: There is paint peeling throughout the facility. (Hallways, Classroom C, H, E) 3yr-5yr There is brown water stain damage and disfigured ceiling tiles in classrooms (B, D, F)	2/6/2026
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: some staff are not in pathways	3/26/2026
Failed - Indoor thermometer (child safe), Classroom Checklist / Easter Seals B Comments: not working properly	1/15/2026
Failed - Hazardous substances locked, Classroom Checklist / Easter Seals C Comments: lavender fragrance room spray	1/15/2026
Failed - Electrical outlets covered, Classroom Checklist / Easter Seals F Comments: missing	1/15/2026
The driver does not have a complete file., Ad Hoc Comments: NA	2/6/2026
Some staff files are not complete. (Expired suitability), Ad Hoc Comments: NA	4/16/2026

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 N/A, 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.



4/14/2026

Signature of Facility Representative Date

KAMILA CROWELL

04-16-2026

Signature of DHR Licensing Representative Date

COPIES TO: _____ DIRECTOR _____