

ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

Facility Name: NORTHWEST YMCA EARLY CHILDHOOD ED CENTER	Type of Facility : Center [X] Day [X] OST [] Night [] Family [] University [] Group []	Date of Visit: 4/22/2026
Facility Address: 4600-A BLUESPRING ROAD, HUNTSVILLE, AL 35810, Madison	Licensee: YMCA OF METROPOLITAN HUNTSVILLE INC	Telephone #: (256) 852-6700
Ages: 0 Weeks to 10 Years	Director (if applicable): ADRIANNA NICHOLS	Capacity: 120 / NA Day Night

SECTION B - DEFICIENCY INFORMATION

<u>Performance Standard Deficiency</u> <i>HAZARDS MUST BE CORRECTED IMMEDIATELY*</i>	Date Corrected by Licensee
Deficiency Summary	
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: On 4/22/26, some staff were missing current ongoing and/or health and safety trainings uploaded into Alabama Pathways.	Pending Correction
Failed - Medical, Staff Checklist Comments: On 4/22/26, the medical was expired.	Pending Correction
Failed - Hazardous substances locked, Classroom Checklist / Early Head Start A Comments: On 4/22/26, sanitizing wipes were not under lock and key.	4/22/2026
Failed - Hazardous substances locked, Classroom Checklist / Early Head Start B Comments: On 4/22/26, cleaning items were not under lock and key.	4/22/2026
Failed - Hazardous substances locked, Classroom Checklist / OSR Pre-K 1 Comments: On 4/22/26, a staff's personal bag with medication was on the floor in the classroom.	Pending Correction

Failed - Hazardous substances locked, Classroom Checklist / OSR Pre-K 4/22/2026
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Comments: On 4/22/26, the cabinet with cleaning supplies was not locked.

On 4/22/26, there was a pill/ medication on the table in the Preschool 4/22/2026
classroom. , Ad Hoc
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 05/06/26, 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.



Signature of Facility Representative

4/22/2026

Date

AJOIA MCGHEE

Signature of DHR Licensing Representative

04/22/26

Date

COPIES TO: _____ Center _____