

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

**SECTION A- IDENTIFYING INFORMATION**

Facility Name: THE LEARNING LODGE CHILD DEV CTR	Type of Facility : Center [X] Day [X]            OST [ ] Night [ ]        Family [ ] University [ ] Group [ ]	Date of Visit: 4/24/2026
Facility Address: 618 HUDSON PLACE, TALLASSEE, AL 36078, Elmore	Licensee: THE LEARNING LODGE CHILD DEV CTR, INC.	Telephone #: (334) 283-6272
Ages: 6 Weeks to 12 Years	Director (if applicable): LEAH PUGH	Capacity: 81        /        NA Day        Night

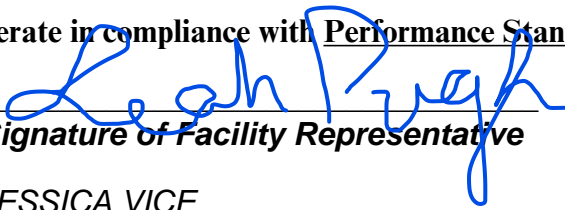
**SECTION B - DEFICIENCY INFORMATION**

<b>Performance Standard Deficiency</b> <b>HAZARDS MUST BE CORRECTED IMMEDIATELY*</b>	<b>Date Corrected by</b> <b>Licensee</b>
<b>Deficiency Summary</b>	
Failed - Meals and snacks comply with USDA guidelines, Inspection Form Comments: Snacks do not meet USDA guidelines.	4/24/2026
Failed - Electrical outlets covered, Classroom Checklist / 2 1/2 up/ Preschool Comments: Plug missing protective cover.	4/24/2026
Failed - Medication locked, Classroom Checklist / 24-36 month Comments: Sunscreen	4/24/2026
Failed - Sink, warm water, soap, paper towels, Classroom Checklist / 18month- 2 1/2 yrs Comments: Sink not in the classroom	Pending Correction

**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**  
05/06/2026, as verification that deficiencies have been corrected.

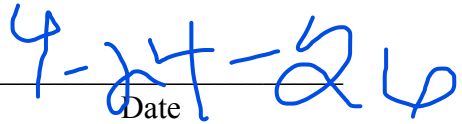
**NOTICE: Any misleading or any false statements or reports made to the Department and/or failure to correct the listed deficiencies can be the basis for adverse action. None of these requirements are to be interpreted to allow anyone to operate in violation of Performance Standards. A facility licensed 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**

JESSICA VICE

\_\_\_\_\_  
**Signature of DHR Licensing Representative**

  
\_\_\_\_\_  
Date

4/24/2026

\_\_\_\_\_  
Date

COPIES TO: \_\_\_\_\_ Center \_\_\_\_\_