

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

SECTION A- IDENTIFYING INFORMATION

Facility Name: LA PETITE ACADEMY	Type of Facility : Center [X] Day [X] OST [] Night [] Family [] University [] Group []	Date of Visit: 5/5/2026
Facility Address: 103 W DUBLIN DR, MADISON, AL 35758, Madison	Licensee: LA PETITE ACADEMY, INC.	Telephone #: (256) 461-8916
Ages: 6 Weeks to 12 Years	Director (if applicable): CANDACE ALLEN	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	
On 5/5/26, there were no deficiencies observed or noted during the visit.	
FREEDOM OF MOVEMENT, Allegation Comments: Per staff's statements, there are multiple times infants are left in bouncers for over 30 minutes.	5/5/2026
On 4/15/26, electrical outlets were uncovered in multiple classrooms. (infant, toddler, and preschool), Ad Hoc Comments: NA	5/5/2026
On 4/15/26, there were fifty (50) children present in the center with only thirty-one (31) children signed in on the sign in/out sheet. , Ad Hoc Comments: NA	5/5/2026
On 4/15/26, the toilet and floor in the three (3) year old classroom was covered in feces/ bowel movement. , Ad Hoc Comments: NA	4/15/2026
On 4/15/26, children younger than two and a half (2 1/2) were combined with children over two and a half (2 1/2) during naptime. , Ad Hoc Comments: NA	5/5/2026

On 4/15/26, a hazardous item (lysol spray) was not under lock and key in the infant classroom. , Ad Hoc 5/5/2026
Comments: NA

On 4/15/26, some children were signed in with initials on the sign in/out sheet. , Ad Hoc 5/5/2026
Comments: NA

On 4/15/26, a five (5)- month old infant was placed on his stomach to sleep. , Ad Hoc 5/5/2026
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 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.


Signature of Facility Representative

5/5/26
Date

AJOIA MCGHEE

5/5/26

Signature of DHR Licensing Representative

Date

COPIES TO: ___ Center _____