

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

SECTION A- IDENTIFYING INFORMATION

Facility Name: ANOINTED ANGELS ACADEMY	Type of Facility : Center [] Day [X] OST [] Night [X] Family [X] University [] Group []	Date of Visit: 5/18/2026
Facility Address: 714 Johnson Avenue, Montgomery, AL, USA, Montgomery, AL 36110, Montgomery	Licensee: QUANISHIA MONTGOMERY	Telephone #: (334) 604-2002
Ages: 6 Weeks to 12 Years/6 Weeks to 12 Years	Director (if applicable):	Capacity: 5 / 5 Day Night

SECTION B - DEFICIENCY INFORMATION

<u>Performance Standard Deficiency</u> <i>HAZARDS MUST BE CORRECTED IMMEDIATELY*</i>	Date Corrected by Licensee
Deficiency Summary	
SUPERVISION AT ALL TIMES, Allegation Comments: Per witness statement	Pending Correction
On the outside playground, the fence has an open gap., Ad Hoc Comments: NA	Pending Correction
On the outside playground, the fence is not 4 feet in height., Ad Hoc Comments: NA	Pending Correction
The Public Notice form is not posted., Ad Hoc Comments: NA	Pending Correction
The most recent deficiency report is not posted., Ad Hoc Comments: NA	Pending Correction

<p>The most recent evaluation is not posted., Ad Hoc Comments: NA</p>	<p>Pending Correction</p>
<p>The provider is unable to locate the sign-in & sign-out sheets for the week of 05/04-08/2026. , Ad Hoc Comments: NA</p>	<p>Pending Correction</p>
<p>In the children's restroom, there are cleaning supplies. alcohol, hair product and toothpaste not under lock & key or combination lock., Ad Hoc Comments: NA</p>	<p>Pending Correction</p>
<p>In the kitchen there are several uncovered electrical outlets., Ad Hoc Comments: NA</p>	<p>Pending Correction</p>
<p>In the kitchen, there is a candle burning while children are present in the home., Ad Hoc Comments: NA</p>	<p>Pending Correction</p>
<p>Used diapers and gloves were not disposed in a covered, plastic-lined container, inaccessible to children., Ad Hoc Comments: NA</p>	<p>Pending Correction</p>
<p>A playpen/crib was not provided for an eight (8) month old infant to sleep., Ad Hoc Comments: NA</p>	<p>Pending Correction</p>
<p>The eight (8) month old infant was asleep with a pacifier holder attached to the clothing., Ad Hoc Comments: NA</p>	<p>Pending Correction</p>
<p>The four (4) month old infant was asleep with a bottle propped in the mouth., Ad Hoc Comments: NA</p>	<p>5/18/2026</p>
<p>The four (4) month old infant was restricted movement by swaddling in a blanket., Ad Hoc Comments: NA</p>	<p>5/18/2026</p>
<p>There are several plush items (blankets, tummy time mat and head rest) in the four (4) month old infant sleeping area., Ad Hoc</p>	<p>5/18/2026</p>

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 5/27/26, 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.



Signature of Facility Representative

AMY HORN

Signature of DHR Licensing Representative

05/27/26

Date

5/18/2026

Date

COPIES TO: _____