ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

Facility Name: SAFE HAVEN CHRISTIAN CHILDCARE CENTER	Type of Facility : Center [X] Day [X] OST [ ] Night [ ] Family [ ] University [ ] Group [ ]	Date of Visit: 5/21/2026
Facility Address: 803 NORTH MLK JR DR, PRICHARD, AL 36610, Mobile	Licensee: SAFE HAVEN DEVELOPMENT OUTREACH, INC	Telephone #: (251) 457-6088
Ages: 6 Weeks to 18 Years	Director (if applicable):	Capacity: 75 / NA Day Night

SECTION B - DEFICIENCY INFORMATION

Performance Standard Deficiency ***HAZARDS MUST BE CORRECTED IMMEDIATELY****	Date Corrected by Licensee
Deficiency Summary	
Failed - Suitability Determination (Every 5 years), Staff Checklist Comments: A staff member has an expired Suitability Letter on file in the center.	Pending Correction
Failed - Medical, Staff Checklist Comments: A staff member has an expired medical on file in the center.	5/5/2026
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Failed - Preadmission Form, Child Checklist Comments: A child's preadmission is incomplete on file in the center.	5/5/2026
Failed - Preadmission Form, Child Checklist Comments: A child's preadmission form is incomplete on file in the center.	5/5/2026
Failed - Electrical outlets covered, Classroom Checklist / Classroom 1 Comments: In the infant room there are two exposed outlets without plug covers.	4/29/2026
Failed - Hazardous substances locked, Classroom Checklist /	4/29/2026

Classroom 2 Comments: In the Toddler classroom there are hazardous substances not under lock and key or combination lock.	
Failed - Diapering area, Classroom Checklist / Classroom 1 Comments: In the infant room the changing pad is ripped in several places.	5/21/2026
Failed - Waterproof mattress, sheets, Classroom Checklist / Classroom 1 Comments: In the infant room there is a mattress that is torn down to the foam.	5/21/2026
In the hallway of the center there are two cabinets with hazardous substances not under lock and key or combination lock., Ad Hoc Comments: NA	4/29/2026

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 06/04/2026, 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.

Venice James — 5-21-26

Signature of Facility Representative — Date

LESLIE WILLIAMS — **05/21/2026**

Signature of DHR Licensing Representative — Date

COPIES TO: Venice James