

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

**SECTION A - IDENTIFYING INFORMATION**

Facility Name: KIDDIE CARE LEARNING CENTER, LLC.	Type of Facility : Center [X] Day [X]            OST [ ] Night [X]        Family [ ] University [ ] Group [ ]	Date of Visit: 6/4/2026
Facility Address: 218 GRACELAND DRIVE, DOTHAN, AL 36305, Houston	Licensee: KIDDIE CARE LEARNING CENTER, LLC.	Telephone #: (334) 678-2339
Ages: 4 Weeks to 12 Years/4 Weeks to 12 Years	Director (if applicable): KISHIA SAFFOLD	Capacity: 107     /    NA Day        Night

**SECTION B - DEFICIENCY INFORMATION**

<u>Performance Standard Deficiency</u> <i>HAZARDS MUST BE CORRECTED IMMEDIATELY*</i>	Date Corrected by Licensee
<b>Deficiency Summary</b>	
Failed - 0 up to 18 months 1 to 5, Inspection Form Comments: There is staff that does not meet cdbg requirements (CA/N & all health and safety training).	6/4/2026
Failed - Child care workers/teachers/subs meet requirements for Health & Safety training, Inspection Form Comments: All staff does not have all health and safety training.	6/4/2026
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: Not all staff is enrolled in Alabama pathway registry.	Pending Correction
Failed - Records on file at time of employment, Inspection Form Comments: Not all staff has complete files at the time of employment.	Pending Correction
Failed - Medical exam and TB test on file at time of employment, Inspection Form Comments: Not all staff have medical/TB.	Pending Correction

Failed - Suitability Determination (Every 5 years), Staff Checklist Comments: expired 3/31/26	6/4/2026
Failed - Suitability Determination (Every 5 years), Staff Checklist Comments: Expired 3/19/26	Pending Correction
Failed - Ongoing Training, Staff Checklist Comments: There is no verification of training in the file.	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 June, 18,2026, 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*

JAY DALTON

\_\_\_\_\_  
Date

6/4/26

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

Date

COPIES TO: Kishia Saffold