

ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

Facility Name: MINI ME'S	Type of Facility : Home [] Day [X] OST [] Night [] Family [X] University [] Group []	Date of Visit: 6/18/2026
Facility Address: 2641 CURRY HIGHWAY, JASPER, AL 35503, Walker	Licensee: COURTNEY MAELYNN WILSON	Telephone #: (205) 544-5810
Ages: 6 Weeks to 6 Years	Director (if applicable): N/A	Capacity: 5 / 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	
Failed - Outdoor play equipment not designed to be portable anchored, Inspection Form Comments: On 6/18/2026, the monkey bar climbing apparatus is not anchored.	Pending Correction
Failed - By August 1 2022 all home staff including licensee/substitutes/assistant caregivers must enroll in Alabama Pathways Professional Development Registry, Inspection Form Comments: On 6/18/2026, some staff trainings, education, and CPR/FA records are not on Alabama Pathways.	Pending Correction
Failed - Suitability Determination (Every 5 years), Staff Checklist Comments: On 6/18/2026, suitability has expired	Pending Correction
Failed - Verification of Education, Staff Checklist Comments: On 6/18/2026, there is no document for proof of education.	Pending Correction
Failed - Suitability Determination (Every 5 years), Staff Checklist Comments: On 6/18/2026, there is no record of background check being conducted.	Pending Correction
Failed - Preadmission Form, Child Checklist Comments: On 6/18/2026 child's form is missing complete addresses.	Pending Correction

Failed - Preadmission Form, Child Checklist

Pending Correction

Comments: On 6/18/2026 child's form is missing complete addresses.

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 07/02/2026, 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.

Courtney Wilson
Signature of Facility Representative

6/18/2026
Date

Rolanda Nelson
Signature of DHR Licensing Representative

6/18/2026
Date

COPIES TO: Courtney Wilson