

ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

Facility Name: KIDS CONNECT LEARNING CENTER	Type of Facility : Center [X] Day [X] OST [] Night [] Family [] University [] Group []	Date of Visit: 5/27/2026
Facility Address: 937 ALLISON BONNETT PKWY, HUEYTOWN, AL 35023, Jefferson	Licensee: STEPHANIE SIMPSON	Telephone #: (205) 744-9911
Ages: 4 Weeks to 15 Years	Director (if applicable): STEPHANIE SIMPSON	Capacity: 72 / NA Day Night

SECTION B - DEFICIENCY INFORMATION

<u>Performance Standard Deficiency</u> HAZARDS MUST BE CORRECTED IMMEDIATELY*	Date Corrected by Licensee
Deficiency Summary	
Failed - 0 up to 18 months 1 to 5, Inspection Form Comments: 1 teacher tom 6 babies	5/27/2026
Failed - Medication administered only with written authorization from parent and child's health professional, Inspection Form Comments: Missing written authorization forms from health professionals	5/27/2026
Failed - Medication returned to parent or disposed of when no longer needed, Inspection Form Comments: Medication present for children no longer attending	5/27/2026
Failed - Age range of children in care conforms to ages specified, Inspection Form Comments: There is a 15-yr old child present at the center.	5/27/2026
Failed - Individual records on each child on file on first day of attendance, Inspection Form Comments: One child present without a file	5/27/2026
Failed - Preadmission Form, Child Checklist Comments: missing sgnatures	5/27/2026
Failed - Preadmission Form, Child Checklist Comments: Missing signature and date	5/27/2026
Failed - Hazardous substances locked, Classroom Checklist / Nursery Comments: Disinfectant spray not under lock and key	5/27/2026
Failed - Medication locked, Classroom Checklist / Nursery Comments: Medication not locked	5/27/2026

Failed - *Nesting and stacking toys – 2 sets, Classroom Checklist / Toddlers 1 (18-24 Months) Comments: Missing	5/27/2026
Failed - Medication locked, Classroom Checklist / Toddlers 1 (18-24 Months) Comments: Tylenol, Vaseline, hand cream, coconut oil	5/27/2026
Failed - *Large/medium building blocks-app. 15 non-interlocking, Classroom Checklist / Mini Marvels Comments: Missing	5/27/2026
Failed - *Small building blocks-app. 100 non-interlocking, Classroom Checklist / Mini Marvels Comments: Missing	5/27/2026
Failed - Indoor thermometer (child safe), Classroom Checklist / Nursery Comments: Not reading the temp in the class	5/27/2026

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 _____, 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.

Stephanie Simpson

06/23/2026

Signature of Facility Representative

Date

SHUNDR NEVELS

Signature of DHR Licensing Representative

Date

COPIES TO: _____