

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

SECTION A- IDENTIFYING INFORMATION

Facility Name: HOPE COMMUNITY CHRISTIAN DAYCARE	Type of Facility : Center [X] Day [X] OST [] Night [] Family [] University [] Group []	Date of Visit: 6/30/2026
Facility Address: 1111 PULASKI PIKE, HUNTSVILLE, AL 35816, Madison	Licensee: HOPE COMMUNITY CHRISTIAN DAYCARE	Telephone #: (256) 534-8780
Ages: 3 Years to 12 Years	Director (if applicable): CARLET S RODGERS	Capacity: 62 / 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 area free of apparent hazardous conditions;, Inspection Form Comments: On 5/27/26, There are tree branches that are a possible trip hazard laying on the ground near the preschool/PreK playground.	6/30/2026
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: On 5/27/26, staff’s training is not in Alabama Pathways.	Pending Correction
Failed - TB Test Date and Results, Staff Checklist Comments: On 5/27/26 staff’s file is missing TB date and results.	Pending Correction
Failed - References, Staff Checklist Comments: On 5/27/26, staff’s file is missing three references.	6/3/2026
Failed - Ongoing Training, Staff Checklist Comments: On 5/27/26, staff’s file is missing ten hours ongoing training.	6/3/2026
Failed - Preadmission Form, Child Checklist	6/30/2026

Comments: On 5/27/26, preadmission form needs signature on the second page.

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 7/14/2026, 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.

Carlett Rodgers
Signature of Facility Representative

6/30/2026
Date

LATONYA JAMES
Signature of DHR Licensing Representative

6/30/2026
Date

COPIES TO: Carlett Rodgers