ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

Facility Name: WE CARE DAYCARE AND LEARNING CENTER, LLC	Type of Facility : Center [X] Day [X] OST [ ] Night [ ] Family [ ] University [ ] Group [ ]	Date of Visit: 7/9/2026
Facility Address: 501 LITTLEJOHN ROAD, CLANTON, AL 35045, Chilton	Licensee: WE CARE DAYCARE AND LEARNING CENTER, LLC	Telephone #: (205) 755-5065
Ages: 6 Weeks to 16 Years	Director (if applicable): CATHRYN ANN MCDANIEL	Capacity: 41 / NA Day Night

SECTION B - DEFICIENCY INFORMATION

Performance Standard Deficiency ***HAZARDS MUST BE CORRECTED IMMEDIATELY****	**Date Corrected by Licensee**
Deficiency Summary	
Failed - Outdoor play area and equipment are free of apparent hazardous conditions, Inspection Form Comments: Metal equipment and shade structure have peeling paint Fence rails are bent in two areas Drain is posing a tripping hazard.	7/10/2026
Failed - Diapering area, Classroom Checklist / infant Comments: The changing pad is torn.	7/9/2026
Saff files are not in compliance. See list., Ad Hoc Comments: NA	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
_____07/21/26_____, 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.

Cathryn Mcdaniel

07/09/2026

_____ _____

Signature of Facility Representative Date

JESSICA VICE

_____ _____**07/09/2026**_____

Signature of DHR Licensing Representative Date

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