ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

Facility Name: SOUTH SHELBY EARLY LEARNING CENTER	Type of Facility : Center [X] Day [X] OST [ ] Night [ ] Family [ ] University [ ] Group [ ]	Date of Visit: 7/14/2026
Facility Address: 1757 14TH STREET, CALERA, AL 35040, Shelby	Licensee: SOUTH SHELBY EARLY LEARNING CENTER	Telephone #: (205) 668-1486
Ages: 6 Weeks to 12 Years	Director (if applicable): WENDY PIERCE	Capacity: 142 / NA Day Night

SECTION B - DEFICIENCY INFORMATION

Performance Standard Deficiency ***HAZARDS MUST BE CORRECTED IMMEDIATELY****	**Date Corrected by Licensee**
Deficiency Summary	
Failed - Expressed human milk sent in container labeled with infant's full name/date, and specific written instructions on how to prepare, store, and use, Inspection Form Comments: In the crawlers room there six bottles of expressed human milk that did not have the infant's full name and date.	7/14/2026
Failed - Medication administered only with written authorization from parent and child's health professional, Inspection Form Comments: In the Wobblers room there were three medications that did not have written authorization from the parent and child's health professional.	Pending Correction
Failed - Time and date medication is given is documented in writing, kept in child's file/copies available to parents upon request, Inspection Form Comments: In the Wobblers room there were three medications that had been given without documentation of time and date medication was given.	Pending Correction
Failed - Medical, Staff Checklist Comments: The staff does not have a medical form.	Pending Correction

Failed - TB Test Date and Results, Staff Checklist Comments: The staff does not have documentation of a TB test.	Pending Correction
Failed - Medical, Staff Checklist Comments: The staff's medica form expired 12/18/2025.	Pending Correction
Failed - Medical, Staff Checklist Comments: The staff's medical form expired 6/23/2026.	Pending Correction
Failed - Medical, Staff Checklist Comments: The staff does not have a medical form.	Pending Correction
Failed - TB Test Date and Results, Staff Checklist Comments: The staff does not have documentation of a TB test.	Pending Correction
Failed - Verification of Education, Staff Checklist Comments: The staff does not have verification of education.	Pending Correction
Failed - Medical, Staff Checklist Comments: The staff does not have a medical form.	Pending Correction
Failed - TB Test Date and Results, Staff Checklist Comments: The staff does not have documentation of a TB test.	Pending Correction
Failed - CA/N Clearance Form (Every Five Years), Staff Checklist Comments: The staff's CA/N expired 6/8/2026.	Pending Correction
Failed - Suitability Determination (Every 5 years), Staff Checklist Comments: The staff does not have a suitability letter.	Pending Correction
Failed - Waterproof mattress, sheets, Classroom Checklist / Nursery Comments: In the nursery there were two ripped crib mattresses.	Pending Correction
Failed - Waterproof mattress, sheets, Classroom Checklist / Wobblers Comments: In the Wobbler room there was one ripped mattress.	Pending Correction
Failed - Hazardous substances locked, Classroom Checklist / Toddler A Comments: The bathroom between the Toddler A room and Toddler B room had hazardous substances not under lock and key (dish detergent and bleach).	7/14/2026
Failed - Indoor thermometer (child safe), Classroom Checklist / Prek 5	7/14/2026

Purple
Comments: In the PreK 5 purple room there was not an indoor thermometer.

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 _____7/28/2026_____, 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.

Keisha Bulger-Talton
_____ 07/14/2026
Signature of Facility Representative Date

LEANNA TOWERY
_____ **_____7/14/2026_____**
Signature of DHR Licensing Representative Date

COPIES TO: director