

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

SECTION A- IDENTIFYING INFORMATION

Facility Name: JUMP START ACADEMY	Type of Facility : Center [X] Day [X] OST [] Night [] Family [] University [] Group []	Date of Visit: 7/15/2026
Facility Address: 2132 CARSON ROAD, BIRMINGHAM, AL 35215, Jefferson	Licensee: JERRELL HENDON MINISTRIES	Telephone #: (205) 777-5867
Ages: 6 Weeks to 12 Years	Director (if applicable): TRINA ROBINSON	Capacity: 92 / NA Day Night

SECTION B - DEFICIENCY INFORMATION

Performance Standard Deficiency HAZARDS MUST BE CORRECTED IMMEDIATELY*	Date Corrected by Licensee
Deficiency Summary	
Failed - Tornado, Inspection Form Comments: no record	Pending Correction
Failed - Lockdown, Inspection Form Comments: no record	Pending Correction
Failed - Transportation checklists used as required, Inspection Form Comments: The forms are in the van on a field trip.	Pending Correction
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: All staff are not enrolled in Alabama Pathways.	Pending Correction
Failed - Transportation checklists, Inspection Form Comments: No record in the center.	Pending Correction
Failed - Photo ID Verification, Staff Checklist Comments: not in record	Pending Correction

Failed - References, Staff Checklist Comments: no record	Pending Correction
Failed - Photo ID Verification, Staff Checklist Comments: no record	Pending Correction
Failed - Application, Staff Checklist Comments: no record	Pending Correction
Failed - Photo ID Verification, Staff Checklist Comments: no record	Pending Correction
Failed - Medical, Staff Checklist Comments: no record	Pending Correction
Failed - TB Test Date and Results, Staff Checklist Comments: no record	Pending Correction
Failed - Verification of Education, Staff Checklist Comments: no record	Pending Correction
Failed - References, Staff Checklist Comments: no record	Pending Correction
Failed - Written Verification of Standards Read, Staff Checklist Comments: no record	Pending Correction
Failed - Photo ID Verification, Staff Checklist Comments: no record	Pending Correction
Failed - References, Staff Checklist Comments: no record	Pending Correction
Failed - Photo ID Verification, Staff Checklist Comments: no record	Pending Correction
Failed - Photo ID Verification, Staff Checklist Comments: no record	Pending Correction
Failed - References, Staff Checklist Comments: no record	Pending Correction

Failed - Photo ID Verification, Staff Checklist Comments: no record	Pending Correction
Failed - Photo ID Verification, Staff Checklist Comments: no record	Pending Correction
Failed - Photo ID Verification, Staff Checklist Comments: no record	Pending Correction
Failed - Medical, Staff Checklist Comments: no record	Pending Correction
Failed - TB Test Date and Results, Staff Checklist Comments: no record	Pending Correction
Failed - Immunization Certificate, Child Checklist Comments: expired	Pending Correction
Failed - Immunization Certificate, Child Checklist Comments: expired	Pending Correction
Failed - Immunization Certificate, Child Checklist Comments: expired	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 07/29/26, 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.



Signature of Facility Representative

JOY FRAZIER

Signature of DHR Licensing Representative

07/15/2026

Date

07/15/26

Date