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

## SECTION A- IDENTIFYING INFORMATION

| Facility Name: | Type of Facility : Center [X] | Date of Visit: |
|---|---|---|
| AGES AND STAGES LEARNING CENTER | Day [X] OST [ ]<br>Night [ ] Family [ ]<br>University [ ]<br>Group [ ] | 7/15/2026 |
| Facility Address:<br>6513 SECOND AVE SOUTH, BIRMINGHAM, AL 35212, Jefferson | Licensee:<br>SANDRA ELLIS | Telephone #:<br>(205) 592-0810 |
| Ages:<br>6 Weeks to 12 Years | Director (if applicable):<br>SANDRA ELLISS ELLIS | Capacity:<br>55 / NA<br>Day Night |

## SECTION B - DEFICIENCY INFORMATION

| Performance Standard Deficiency<br>***HAZARDS MUST BE CORRECTED IMMEDIATELY**** | Date Corrected by Licensee |
|---|---|
| **Deficiency Summary** | |
| Failed - Sign in/sign out sheets, Inspection Form<br>Comments: 23 children present, but only 19 are signed in | Pending Correction |
| Failed - Vehicle safety check done annually, signed by certified mechanic, dated, and filed in center, Inspection Form<br>Comments: Expired | 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<br>Comments: None of the facility staff members are enrolled in Alabama Pathway's registry. | Pending Correction |
| Failed - Fire, Inspection Form<br>Comments: No documentation | Pending Correction |
| Failed - Outdoor play area and equipment are free of apparent hazardous conditions, Inspection Form<br>Comments: Exposed rust along the fenceline | Pending Correction |
| Failed - Two staff with infant-child CPR and first aid present during all hours of operation, Inspection Form<br>Comments: There are not 2 staff present with CPR/First aid | Pending Correction |
| Failed - Medical, Staff Checklist<br>Comments: not present in the files | Pending Correction |
| Failed - Ongoing Training, Staff Checklist<br>Comments: Missing | Pending Correction |
| Failed - Ongoing Training, Staff Checklist<br>Comments: Expired | Pending Correction |

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|---|---|
| Failed - Ongoing Training, Staff Checklist<br>Comments: Expired | Pending Correction |
| Failed - Ongoing Training, Staff Checklist<br>Comments: Expired | Pending Correction |
| Failed - Medical, Staff Checklist<br>Comments: Expired | Pending Correction |
| Failed - Ongoing Training, Staff Checklist<br>Comments: Expired | Pending Correction |
| Failed - Medical, Staff Checklist<br>Comments: Missing signature | Pending Correction |
| Failed - Suitability Determination (Every 5 years), Staff Checklist<br>Comments: Missing from the file | Pending Correction |
| Failed - Ongoing Training, Staff Checklist<br>Comments: Expired | Pending Correction |
| Failed - Health and Safety Training, Staff Checklist<br>Comments: Expired | Pending Correction |
| Failed - Ongoing Training, Staff Checklist<br>Comments: Expired | Pending Correction |
| Failed - Ongoing Training, Staff Checklist<br>Comments: Expired | Pending Correction |
| Failed - Immunization Certificate, Child Checklist<br>Comments: Expired | Pending Correction |
| Failed - Preadmission Form, Child Checklist<br>Comments: Incomplete | Pending Correction |
| Failed - Immunization Certificate, Child Checklist<br>Comments: Expired | Pending Correction |
| Failed - Immunization Certificate, Child Checklist<br>Comments: Missing | Pending Correction |
| Failed - Immunization Certificate, Child Checklist<br>Comments: Missing | Pending Correction |
| Failed - Preadmission Form, Child Checklist<br>Comments: Incomplete | 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** Aug 3-2026 **, 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.**

Shundr N

***Signature of Facility Representative***

Aug 3-2026

Date

*SHUNDR NEVELS*

***Signature of DHR Licensing Representative*** Date

COPIES TO: _____