

ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

Facility Name: NEW RISING STAR EARLY CHILDHOOD DEV CTR	Type of Facility : Center [X] Day [X] OST [] Night [] Family [] University [] Group []	Date of Visit: 7/16/2026
Facility Address: 7401 LONDON AVENUE, BIRMINGHAM, AL 35206, Jefferson	Licensee: NEW RISING STAR MISSIONARY BAPTIST CH	Telephone #: (205) 995-4416
Ages: 6 Weeks to 11 Years	Director (if applicable): DEMETRIA FITTS	Capacity: 60 / 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 - Medication not used beyond date of expiration, Inspection Form Comments: Medication present at the center for children no longer attending	Pending Correction
Failed - Locked storage provided for medication, Inspection Form Comments: Medication not locked	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: Some of the facility staff members are not enrolled in the Alabama Pathway's registry.	Pending Correction
Failed - Ongoing Training, Staff Checklist Comments: Missing 7.5 hrs	Pending Correction
Failed - CA/N Clearance Form (Every Five Years), Staff Checklist Comments: Expired	Pending Correction
Failed - Ongoing Training, Staff Checklist Comments: Missing 5.5 hrs	Pending Correction
Failed - Medical, Staff Checklist Comments: New hired med	Pending Correction
Failed - TB Test Date and Results, Staff Checklist Comments: New hire TB	Pending Correction
Failed - Verification of Education, Staff Checklist Comments: needs verification of education	Pending Correction
Failed - Medical, Staff Checklist	Pending Correction

Comments: Expired Failed - Ongoing Training, Staff Checklist	Pending Correction
Comments: Missing 8 hrs Failed - Preadmission Form, Child Checklist	Pending Correction
Comments: Incomplete Failed - Preadmission Form, Child Checklist	Pending Correction
Comments: Missing signature and date Failed - Hazardous substances locked, Classroom Checklist / Toddler 1	Pending Correction
Comments: Cleaning supplies and purse Failed - Hazardous substances locked, Classroom Checklist / Toddler 2	Pending Correction
Comments: Teacher's personal bag Staff files are incomplete., Ad Hoc	Pending Correction
Comments: NA	

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 _____, 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.

DemetriFitts	07/16/2026
_____ Signature of Facility Representative	_____ Date
SHUNDR NEVELS	
_____ Signature of DHR Licensing Representative	_____ Date

COPIES TO: _____