

ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

Facility Name: LITTLE SAINTS PLAYSCHOOL	Type of Facility : Center [X] Day [X] OST [] Night [] Family [] University [] Group []	Date of Visit: 7/17/2026
Facility Address: 901 SOUTH MULBERRY, BUTLER, AL 36904, Choctaw	Licensee: CHOCTAW PRIVATE EDUCATIONAL FOUNDATION	Telephone #: (205) 459-3260
Ages: 6 Weeks to 6 Years	Director (if applicable): SAMANTHA JOHNSON ROBERTS	Capacity: 95 / 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	
No deficiencies at the time of this visit.	
Failed - Fire, Inspection Form Comments: missing	3/1/2026
Failed - Tornado, Inspection Form Comments: missing	3/1/2026
Failed - Lockdown, Inspection Form Comments: missing	3/2/2026
Failed - Relocation, Inspection Form Comments: missing	3/3/2026
Failed - Outdoor play area and equipment are free of apparent hazardous conditions, Inspection Form Comments: holes on preschool playground	2/23/2026
Failed - Outdoor play area free of apparent hazardous conditions:, Inspection Form Comments: light green little tikes boat sharp cracked edges	3/5/2026
Failed - Most recent fire inspection report within 5 years, Inspection Form Comments: expired	Pending Correction
Failed - Medical, Staff Checklist Comments: expired	3/1/2026
Failed - Ongoing Training, Staff Checklist Comments: missing 19 hours	3/1/2026
Failed - Health and Safety Training, Staff Checklist	3/1/2026

Comments: missing	
Failed - Ongoing Training, Staff Checklist	2/26/2026
Comments: missing 12 hours	
Failed - Health and Safety Training, Staff Checklist	3/10/2026
Comments: missing	
Failed - Medical, Staff Checklist	3/10/2026
Comments: expired	
Failed - Ongoing Training, Staff Checklist	2/10/2026
Comments: missing 8 hours	
Failed - Health and Safety Training, Staff Checklist	3/1/2026
Comments: missing	
Failed - Medical, Staff Checklist	3/16/2026
Comments: expired	
Failed - Ongoing Training, Staff Checklist	3/1/2026
Comments: missing 8 hours	
Failed - Health and Safety Training, Staff Checklist	3/16/2026
Comments: missing	
Failed - Medical, Staff Checklist	3/12/2026
Comments: expired	
Failed - Ongoing Training, Staff Checklist	3/12/2026
Comments: missing 8 hours	
Failed - Health and Safety Training, Staff Checklist	3/12/2026
Comments: missing	
Failed - CA/N Clearance Form (Every Five Years), Staff Checklist	2/25/2026
Comments: missing	
Failed - Health and Safety Training, Staff Checklist	3/1/2026
Comments: missing	
Failed - Medical, Staff Checklist	3/12/2026
Comments: missing	
Failed - Ongoing Training, Staff Checklist	3/12/2026
Comments: missing 8 hours	
Failed - Health and Safety Training, Staff Checklist	3/12/2026
Comments: missing	
Failed - Ongoing Training, Staff Checklist	3/1/2026
Comments: missing 8 hours	
Failed - Health and Safety Training, Staff Checklist	3/1/2026
Comments: missing	
Failed - Medical, Staff Checklist	3/9/2026
Comments: expired	
Failed - Ongoing Training, Staff Checklist	3/12/2026
Comments: missing 8 hours	
Failed - Health and Safety Training, Staff Checklist	3/16/2026
Comments: missing	
Failed - Medical, Staff Checklist	3/1/2026
Comments: missing	
Failed - TB Test Date and Results, Staff Checklist	3/12/2026
Comments: missing	
Failed - Immunization Certificate, Staff Checklist	3/12/2026
Comments: missing	
Failed - Ongoing Training, Staff Checklist	3/1/2026

Comments: missing 8 hours	
Failed - Health and Safety Training, Staff Checklist	3/1/2026
Comments: missing	
Failed - Medication locked, Classroom Checklist / 2 year old	2/25/2026
Comments: Robitussin cough gels	
Failed - Diapering area, Classroom Checklist / Nursery	2/25/2026
Comments: diaper pad torn	
Failed - Furniture child size, clean, good condition, Classroom Checklist / toddlers	2/28/2026
Comments: paint peeling on walls and border	

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 N/A, 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

LESLIE WILLIAMS

Date

07/17/2026

Signature of DHR Licensing Representative

Date

COPIES TO: Samantha Roberts