

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

**SECTION A- IDENTIFYING INFORMATION**

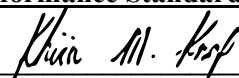
|                                                                                           |                                                                                                                                                                                                                                                                                  |                                   |
|-------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|
| Facility Name:<br>VINEHOUSE NURSERY, LLC                                                  | Type of Facility : Center <input checked="" type="checkbox"/><br>Day <input checked="" type="checkbox"/> OST <input type="checkbox"/><br>Night <input type="checkbox"/> Family <input type="checkbox"/><br>University <input type="checkbox"/><br>Group <input type="checkbox"/> | Date of Visit:<br>7/21/2026       |
| Facility Address:<br>105 PLAZA CIRCLE, SUITE 100, 200,<br>300 ALABASTER, AL 35007, Shelby | Licensee:<br>VINEHOUSE NURSERY, LLC                                                                                                                                                                                                                                              | Telephone #:<br>(205) 564-8564    |
| Ages:<br>6 Weeks to 5 Years                                                               | Director (if applicable):<br>KHIARI MCALPIN-KNOX                                                                                                                                                                                                                                 | Capacity:<br>51 / NA<br>Day Night |

**SECTION B - DEFICIENCY INFORMATION**

| <b><u>Performance Standard Deficiency</u></b><br><b><i>HAZARDS MUST BE CORRECTED IMMEDIATELY*</i></b>                                                                                                                                                                                                                                                                                                  | <b>Date Corrected by<br/>Licensee</b> |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|
| <p><b>Deficiency Summary</b></p> <p>No deficiencies observed at the time of visit.</p> <p>SUPERVISION AT ALL TIMES, Allegation: According to a staff's statement on June 17, 2026, infants were left in the infant room for an undetermined amount of time. The children's health, welfare, and safety were at risk., Ad Hoc<br/>Comments: NA</p> <p style="text-align: right;">Pending Correction</p> |                                       |

**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 8/4/26, 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

07/21/2026  
\_\_\_\_\_  
Date

LEANNA TOWERY

\_\_\_\_\_  
*Signature of DHR Licensing Representative*

\_\_\_\_\_  
**7/21/2026**

\_\_\_\_\_  
Date

COPIES TO: director