

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

SECTION A- IDENTIFYING INFORMATION

Facility Name: MRS. JO'S DAYCARE	Type of Facility : Center [] Day [X] OST [] Night [] Family [X] University [] Group []	Date of Visit: 7/22/2026
Facility Address: 1501 10TH AVE SW, HAMILTON, AL 35570, Marion	Licensee: JO RETTA TUCK	Telephone #: (205) 528-0211
Ages: 6 Weeks to 8 Years	Director (if applicable): N/A	Capacity: 6 / 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 - By August 1 2022 all home staff including licensee/substitutes/assistant caregivers must enroll in Alabama Pathways Professional Development Registry, Inspection Form Comments: On 7/02/2020 some records on a staff are not uploaded in Alabama Pathways Registry	7/16/2026
Failed - Infant -Child CPR Certification, Staff Checklist Comments: On 07/02/2026, the record has expired.	8/3/2026
Failed - Infant -Child First Aid Certificate, Staff Checklist Comments: On 07/02/2026, the record has expired.	8/3/2026

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.

Jo Retta Tuck
Signature of Facility Representative

8-3-26
Date

Rolanda Nelson
Signature of DHR Licensing Representative

08/03/2026
Date

COPIES TO: Jo Retta Tuck