ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

Facility Name:	Type of Facility : Center [X] Day [X] Night [ ] OST [ ] Family [ ] University [ ] Group [ ]	Date of Visit:
BONNIE'S KIDS CHILD CARE CENTER		8/4/2026
Facility Address:	**Licensee:**	**Telephone #:**
2314 ENTERPRISE DR, OPELIKA, AL 36801, Lee	BONNIE'S KIDS CHILD CARE CENTER INC.	(334) 745-6248
Ages:	**Director (if applicable):**	**Capacity:**
4 Weeks to 11 Years	TAMMIE M LONG	155 / NA Day Night

SECTION B - DEFICIENCY INFORMATION

Performance Standard Deficiency ***HAZARDS MUST BE CORRECTED IMMEDIATELY****	**Date Corrected by Licensee**
Deficiency Summary	
Failed - Lighting adequate at nap/rest time to allow children to be seen, Inspection Form Comments: In the Creeper room the lighting was not adequate.	Pending Correction
Failed - Two staff with infant-child CPR and first aid present during all hours of operation, Inspection Form Comments: There were not two people at the facility with CPR	Pending Correction
Failed - When able, infants allowed to sit in feeding chair, Inspection Form Comments: In infant 2 classroom there was an infant not sitting in a feeding chair while feeding.	Pending Correction
Failed - Fire, Inspection Form Comments: missing	Pending Correction
Failed - Tornado, Inspection Form Comments: missing	Pending Correction
Failed - Lockdown, Inspection Form Comments: missing	Pending Correction
Failed - Relocation, Inspection Form Comments: missing	Pending Correction
Failed - Available to all staff and employees, Inspection Form Comments: missing	Pending Correction
Failed - Posted in a conspicuous place, Inspection Form Comments: not posted	Pending Correction
Failed - By August 1, 2022, director/all teachers/substitutes/all service staff must be enrolled in the Alabama Pathway's	Pending Correction

Professional Development Registry, Inspection Form Comments: None of the facility staff are enrolled in the Alabama Pathway Registry.	
Failed - Verification of Education, Staff Checklist Comments: missing	Pending Correction
Failed - Ongoing Training, Staff Checklist Comments: missing	Pending Correction
Failed - Health and Safety Training, Staff Checklist Comments: missing	Pending Correction
Failed - Ongoing Training, Staff Checklist Comments: missing	Pending Correction
Failed - Ongoing Training, Staff Checklist Comments: missing	Pending Correction
Failed - Health and Safety Training, Staff Checklist Comments: missing	Pending Correction
Failed - Ongoing Training, Staff Checklist Comments: missing	Pending Correction
Failed - Health and Safety Training, Staff Checklist Comments: missing	Pending Correction
Failed - Medical, Staff Checklist Comments: missing	Pending Correction
Failed - Current Driver's License, Staff Checklist Comments: has expired	Pending Correction
Failed - Ongoing Training, Staff Checklist Comments: missing	Pending Correction
Failed - Medical, Staff Checklist Comments: has expired	Pending Correction
Failed - Ongoing Training, Staff Checklist Comments: missing	Pending Correction
Failed - Photo ID Verification, Staff Checklist Comments: missing	Pending Correction
Failed - Medical, Staff Checklist Comments: missing	Pending Correction
Failed - TB Test Date and Results, Staff Checklist Comments: missing	Pending Correction
Failed - References, Staff Checklist Comments: missing	Pending Correction
Failed - CA/N Clearance Form (Every Five Years), Staff Checklist Comments: missing	Pending Correction
Failed - Written Verification of Standards Read, Staff Checklist Comments: missing	Pending Correction
Failed - Ongoing Training, Staff Checklist Comments: missing	Pending Correction
Failed - Health and Safety Training, Staff Checklist Comments: missing	Pending Correction
Failed - Medical, Staff Checklist Comments: missing	Pending Correction
Failed - Health and Safety Training, Staff Checklist Comments: missing 2 hours	Pending Correction
Failed - Ongoing Training, Staff Checklist	Pending Correction

Comments: missing	
Failed - Medical, Staff Checklist	Pending Correction
Comments: has expired	
Failed - Current Driver's License, Staff Checklist	Pending Correction
Comments: has expired	
Failed - Ongoing Training, Staff Checklist	Pending Correction
Comments: missing	
Failed - Health and Safety Training, Staff Checklist	Pending Correction
Comments: missing	
Failed - Health and Safety Training, Staff Checklist	Pending Correction
Comments: missing	
Failed - Preadmission Form, Child Checklist	Pending Correction
Comments: missing second page of preadmission	
Failed - Preadmission Form, Child Checklist	Pending Correction
Comments: missing address on first page	
Failed - Preadmission Form, Child Checklist	Pending Correction
Comments: missing doctor information	
Failed - Preadmission Form, Child Checklist	Pending Correction
Comments: missing full address on second page	
Failed - Preadmission Form, Child Checklist	Pending Correction
Comments: address missing on second page	
Failed - Hazardous substances locked, Classroom Checklist / Toddlers 18-24m	Pending Correction
Comments: There was hazardous substance not under lock and key (shaving cream)	
Failed - Containers labeled, Classroom Checklist / SK 1 5-7yo	Pending Correction
Comments: Containers not labeled	
Failed - Shelving for equipment and supplies/anchored, Classroom Checklist / SK 2 8-10yo	Pending Correction
Comments: shelving not anchored	
Failed - Containers labeled, Classroom Checklist / SK 2 8-10yo	Pending Correction
Comments: containers not labeled	
On 8-4-26 in the 3yr old classroom there was peeling paint and holes in the wall., Ad Hoc	Pending Correction
Comments: NA	
On 8-4-26 in 3 1/2yr old classroom there was peeling paint and holes in the wall., 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.

_____ _____

Signature of Facility Representative Date

SHYNECSA BLEVINS

_____ _____

Signature of DHR Licensing Representative Date

COPIES TO: _____