

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

**SECTION A- IDENTIFYING INFORMATION**

|                                                                     |                                                                                                                   |                                                  |
|---------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|
| Facility Name:<br>LITTLE STARS LEARNING CENTER                      | Type of Facility : Center [X]<br>Day [X]      OST [ ]<br>Night [ ]      Family [ ]<br>University [ ]<br>Group [ ] | Date of Visit:<br>8/14/2026                      |
| Facility Address:<br>3348 DENTON ROAD, DOTHAN, AL<br>36303, Houston | Licensee:<br>PORTER'S GROUP INC.                                                                                  | Telephone #:<br>(334) 618-0322                   |
| Ages:<br>6 Weeks to 13 Years                                        | Director (if applicable):<br>PHYLLIS PORTER                                                                       | Capacity:<br>60      /      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> |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|
| <b>Deficiency Summary</b>                                                                                                                                                               |                                       |
| Failed - Outdoor play area and equipment are free of apparent hazardous conditions, Inspection Form<br>Comments: The wood on the bottom of the center is pulled off with nails exposed. | Pending Correction                    |
| Failed - Outdoor play area enclosed by a fence or wall at least 4 feet in height, Inspection Form<br>Comments: Part of the fence is not 4 feet tall.                                    | Pending Correction                    |
| Failed - Fence or wall free of sharp edges, Inspection Form<br>Comments: The wooden fence has sharp edges and loose boards.                                                             | Pending Correction                    |
| Failed - CA/N Clearance Form (Every Five Years), Staff Checklist<br>Comments: expired                                                                                                   | Pending Correction                    |
| Failed - Ongoing Training, Staff Checklist<br>Comments: There is no verification of training.                                                                                           | Pending Correction                    |
| Failed - Ongoing Training, Staff Checklist<br>Comments: There is no verification of training.                                                                                           | Pending Correction                    |

|                                                                                                           |                    |
|-----------------------------------------------------------------------------------------------------------|--------------------|
| Failed - Ongoing Training, Staff Checklist<br>Comments: There is no verification of training.             | Pending Correction |
| Failed - Ongoing Training, Staff Checklist<br>Comments: There is no verification training.                | Pending Correction |
| Failed - Ongoing Training, Staff Checklist<br>Comments: There is no verification of training.             | Pending Correction |
| Failed - Medical, Staff Checklist<br>Comments: expired                                                    | Pending Correction |
| Failed - Ongoing Training, Staff Checklist<br>Comments: There is no verification of training.             | Pending Correction |
| Failed - Medical, Staff Checklist<br>Comments: expired                                                    | Pending Correction |
| Failed - Ongoing Training, Staff Checklist<br>Comments: There is no verification of training.             | Pending Correction |
| Failed - Ongoing Training, Staff Checklist<br>Comments: There is no verification of training.             | Pending Correction |
| (814/26) There is a cardboard box on the porch by the backdoor on the playground., Ad Hoc<br>Comments: NA | Pending Correction |

**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 Aug. 28.2026, 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.

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***Signature of Facility Representative***

Date

JAY DALTON

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***Signature of DHR Licensing Representative***

**8/14/26**

Date

COPIES TO: Phyllis Porter