

ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

Facility Name: EKKLESIA PRESCHOOL & CDC 2ND LOCATION	Type of Facility : Center [X] Day [X] OST [] Night [] Family [] University [] Group []	Date of Visit: 8/18/2026
Facility Address: 401 WEST COLLEGE STREET, FLORENCE, AL 35630, Lauderdale	Licensee: EKKLESIA MB CHURCH	Telephone #: (256) 284-7705
Ages: 6 Weeks to 18 Years	Director (if applicable): KATENIA FITZGERALD	Capacity: 76 / 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, director/all teachers/substitutes/all service staff must be enrolled in the Alabama Pathway's Professional Development Registry, Inspection Form Comments: On 8/18/2026, there are some staff with missing documents not uploaded in Pathways.	Pending Correction
Failed - Preadmission Form, Child Checklist Comments: On 8/18/2026, there are in-complete addresses on the form.	Pending Correction
Failed - Preadmission Form, Child Checklist Comments: On 8/18/2026, there is no preadmission record.	Pending Correction
Failed - Electrical outlets covered, Classroom Checklist / Toddler 1 Comments: On 8/18/2026, there is one outlet exposed.	Pending Correction
Failed - Hazardous substances locked, Classroom Checklist / Toddler 1 Comments: On 8/18/2026, the Peraspray cleaner was not locked up.	Pending Correction
Failed - Individual, labeled storage space for each child, Classroom Checklist / Infant Room Comments: On 8/18/2026, children storage was not labeledd.	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 09/01/2026, 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.

Katenia Fitzgerald

Signature of Facility Representative

Date

Rolanda Nelson
Signature of DHR Licensing Representative

08/18/2026

Date

COPIES TO: Katenia Fitzgerald