

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

SECTION A- IDENTIFYING INFORMATION

Facility Name: KIDZ KLUBHOUSE OF SELMA	Type of Facility : Center [X] Day [X] OST [] Night [] Family [] University [] Group []	Date of Visit: 8/20/2026
Facility Address: 1115 Old Orrville Road, Selma, AL 36701, Dallas	Licensee: KIDZ KLUBHOUSE OF SELMA	Telephone #: (334) 526-4246
Ages: 4 Weeks to 14 Years	Director (if applicable): DE'SHANDA HATCHER	Capacity: 64 / NA Day Night

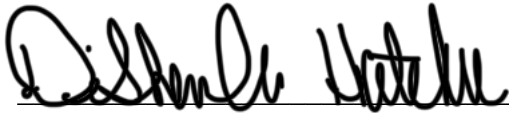
SECTION B - DEFICIENCY INFORMATION

<u>Performance Standard Deficiency</u> <i>HAZARDS MUST BE CORRECTED IMMEDIATELY*</i>	Date Corrected by Licensee
Deficiency Summary	
Failed - Center free of apparent hazards, Inspection Form Comments: There is wall paint peeling in the afterschool room 5yrs-14yrs	7/31/2026
Failed - Outdoor play area and equipment are free of apparent hazardous conditions, Inspection Form Comments: weeds and vines protruding both playground fences and equipment.	8/27/2026
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: some staff are not enrolled in Pathways	8/27/2026
Failed - Ongoing Training, Staff Checklist Comments: missing	7/24/2026
Failed - Health and Safety Training, Staff Checklist Comments: missing	7/24/2026
Failed - Photo ID Verification, Staff Checklist Comments: missing	8/27/2026
Failed - Ongoing Training, Staff Checklist Comments: missing	8/27/2026
Failed - Health and Safety Training, Staff Checklist Comments: missing	8/27/2026
Failed - Photo ID Verification, Staff Checklist Comments: missing	8/27/2026
Failed - Suitability Determination (Every 5 years), Staff Checklist	Pending Correction

Comments: expired Failed - Ongoing Training, Staff Checklist	Pending Correction
Comments: missing Failed - Health and Safety Training, Staff Checklist	Pending Correction
Comments: missing Failed - Photo ID Verification, Staff Checklist	8/27/2026
Comments: missing Failed - References, Staff Checklist	8/27/2026
Comments: missing Failed - Ongoing Training, Staff Checklist	8/27/2026
Comments: missing Failed - Health and Safety Training, Staff Checklist	8/27/2026
Comments: missing Failed - Ongoing Training, Staff Checklist	Pending Correction
Comments: missing Failed - Health and Safety Training, Staff Checklist	Pending Correction
Comments: missing Failed - Medication locked, Classroom Checklist / Infant Room	7/15/2026
Comments: Tylenol cherry medicine Failed - Shelving for equipment and supplies/anchored, Classroom Checklist / Preschool	7/15/2026
Comments: tv not secured on shelf Failed - Barriers around heaters, fans, Classroom Checklist / Afterschool	7/15/2026
Comments: fan no barrier The toilet seat is missing in the preschool 2 classroom 3yrs-5yrs., Ad Hoc	7/20/2026
Comments: NA There are active ant beds on the toddler playground., Ad Hoc	7/24/2026
Comments: NA There is a red basketball goal on the preschool playground with chipped paint., Ad Hoc	7/31/2026
Comments: NA There are foam cubes on the toddler playground with exposed foam., Ad Hoc	7/15/2026
Comments: NA	

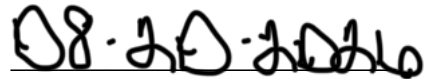
INSTRUCTIONS TO LICENSEE: Column 2, Date Corrected by Licensee, is to be completed by the facility representative after each deficiency is corrected. The facility representative must put the date of correction and his/her initials in Column 2. This form must be returned to the Department of Human Resources on or before 9-03-2026, 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.



Signature of Facility Representative

KAMILA CROWELL



Date

Signature of DHR Licensing Representative

08-20-2026

Date

COPIES TO: _____director_____