

ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

Facility Name: GOODWATER HEAD START/ EARLY HEAD START	Type of Facility : Center [X] Day [X] OST [] Night [] Family [] University [] Group []	Date of Visit: 8/26/2026
Facility Address: 725 NEBO STREET, GOODWATER, AL 35072, Coosa	Licensee: TALLADEGA CLAY RANDOLPH CHILD CARE CORP	Telephone #: (256) 743-1274
Ages: 6 Weeks to 5 Years	Director (if applicable): NEISHA WHETSTONE	Capacity: 26 NA Day Night

SECTION B - DEFICIENCY INFORMATION

<u>Performance Standard Deficiency</u> HAZARDS MUST BE CORRECTED IMMEDIATELY*	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: Some staff not registered in Alabama Pathways	Pending Correction
Failed - Parents provided with information on influenza annually, Inspection Form Comments: no evidence provided at the time visit	Pending Correction
Failed - Parents provided information on child development and children's health annually, Inspection Form Comments: no evidence provided at the time of visit	Pending Correction
Failed - Copies provided to all parents/guardians, Inspection Form Comments: no evidence provided at the time of visit	Pending Correction
Failed - Poison control center, Inspection Form Comments: incorrect telephone number posted	Pending Correction
Failed - Verification of Education, Staff Checklist Comments: missing	Pending Correction
Failed - Health and Safety Training, Staff Checklist Comments: missing	Pending Correction
Failed - Verification of Education, Staff Checklist Comments: missing	Pending Correction
Failed - Verification of Education, Staff Checklist Comments: missing	Pending Correction
Failed - Suitability Determination (Every 5 years), Staff Checklist	Pending Correction

BRIDGETTE SMITH

BJS
Signature of DHR Licensing
Representative

8-26-26
Date

COPIES TO:

person in charge

Comments: missing	
Failed - Health and Safety Training, Staff Checklist	Pending Correction
Comments: missing	
Failed - Suitability Determination (Every 5 years), Staff Checklist	Pending Correction
Comments: expired	
Failed - TB Test Date and Results, Staff Checklist	Pending Correction
Comments: missing	
Failed - Suitability Determination (Every 5 years), Staff Checklist	Pending Correction
Comments: expired 2/26	
Failed - Health and Safety Training, Staff Checklist	Pending Correction
Comments: missing #7	
Failed - Ongoing Training, Staff Checklist	Pending Correction
Comments: need one hour in CCPF	
Failed - Preadmission Form, Child Checklist	Pending Correction
Comments: missing complete addresses on page 2 and signature on page 2	
Failed - Preadmission Form, Child Checklist	Pending Correction
Comments: Preadmission form missing complete addresses	
Failed - Preadmission Form, Child Checklist	Pending Correction
Comments: Preadmission form missing complete addresses	
Failed - Preadmission Form, Child Checklist	Pending Correction
Comments: Preadmission form missing complete addresses	
Failed - Preadmission Form, Child Checklist	Pending Correction
Comments: Preadmission form missing complete addresses	
Failed - Preadmission Form, Child Checklist	Pending Correction
Comments: Preadmission form missing complete addresses	
Failed - Preadmission Form, Child Checklist	Pending Correction
Comments: Preadmission form missing complete addresses	
Failed - Preadmission Form, Child Checklist	Pending Correction
Comments: Preadmission form missing complete addresses	
Failed - Preadmission Form, Child Checklist	Pending Correction
Comments: Preadmission form missing complete addresses	

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 9/19/26, 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.

Neshia White
Signature of Facility Representative

9/26/26
Date