

ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

Facility Name: K'S BEAUTIFUL BEGINNINGS LEARNING CENTER	Type of Facility : Center [X] Day [X] OST [] Night [] Family [] University [] Group []	Date of Visit: 9/24/2026
Facility Address: 1001 WILKES ROAD, MIDFIELD, AL 35228, Jefferson	Licensee: KYRI ELMORE	Telephone #: (205) 436-8571
Ages: 8 Months to 12 Years	Director (if applicable): KYRI ELMORE	Capacity: 75 / NA Day Night

SECTION B - DEFICIENCY INFORMATION

<u>Performance Standard Deficiency</u> HAZARDS MUST BE CORRECTED IMMEDIATELY*	Date Corrected by Licensee
Deficiency Summary	
Center is no longer operating in Site/ Building 1 in which center's capacity will decrease based on staff files and measurements.	
Failed - Equipment not designed to be portable, securely anchored, Inspection Form	Pending Correction
Comments: Swing set is not securely anchored	
Failed - Fire, Inspection Form	Pending Correction
Comments: Missing	
Failed - Alterations to center or grounds, Inspection Form	Pending Correction
Comments: Center did not report to the Department of the playgroup equipment being moved to a new area prior to occurrence	
Failed - 2 ½ years up to 4 years 1 to 11, Inspection Form	Pending Correction
Comments: Due to staff's CAN	
Failed - CA/N Clearance Form (Every Five Years), Staff Checklist	Pending Correction
Comments: Expired	
Failed - CA/N Clearance Form (Every Five Years), Staff Checklist	Pending Correction
Comments: Not present	
Failed - Interstate CA/N if applicable (within 5 years), Staff Checklist	Pending Correction
Comments: Not present	
Failed - Preadmission Form, Child Checklist	Pending Correction
Comments: Incomplete- missing info, signature, and date	
Failed - Preadmission Form, Child Checklist	Pending Correction
Comments: Incomplete- missing information	

Center did not notify the Department of the changes in the lease agreement that the center is no longer operating in Site/ Building 1 prior to occurrence. , Ad Hoc Comments: NA	Pending Correction
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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.

Kyri Elmore _____

Signature of Facility Representative

09/24/2026 _____

Date

SHUNDR NEVELS _____

Signature of DHR Licensing Representative

Date

COPIES TO: _____