

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

**SECTION A- IDENTIFYING INFORMATION**

|                                                                     |                                                                                                                                                   |                                                                                                   |
|---------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|
| Facility Name:<br>ABC & 123 LEARNING CENTER                         | Type of Facility : Center [X]<br>Day [X]                      OST [ ]<br>Night [ ]                      Family [ ]<br>University [ ]<br>Group [ ] | Date of Visit:<br>9/29/2026                                                                       |
| Facility Address:<br>2967 HIGHWAY 21, ATMORE, AL<br>36502, Escambia | Licensee:<br>TERRIE MCCREARY                                                                                                                      | Telephone #:<br>(251) 261-8996                                                                    |
| Ages:<br>4 Weeks to 8 Years                                         | Director (if applicable):<br>TERRIE MCCREARY                                                                                                      | Capacity:<br>135                      /                      NA<br>Day                      Night |

**SECTION B - DEFICIENCY INFORMATION**

| <u>Performance Standard Deficiency</u><br><b>HAZARDS MUST BE CORRECTED IMMEDIATELY*</b>                                                       | <b>Date Corrected by<br/>Licensee</b> |
|-----------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|
| <b>Deficiency Summary</b>                                                                                                                     |                                       |
| There are no new deficiencies on this visit.                                                                                                  |                                       |
| Failed - Fence or wall free of sharp edges, Inspection Form<br>Comments: Several wooden boards are broken and have sharp edges.               | 8/8/2026                              |
| Failed - Outdoor play area free of apparent hazardous conditions:, Inspection Form<br>Comments: Weeds are growing on fence line.              | 8/8/2026                              |
| Failed - 0 up to 18 months    1 to 5, Inspection Form<br>Comments: Infant room has 9 babies ages 4wks to 18 months with one staff person.     | 8/10/2026                             |
| Failed - 18 up to 2½ years    1 to 7, Inspection Form<br>Comments: 18 - 2 1/2 room is out of ratio (staff person missing Can and suitability) | 8/13/2026                             |
| Failed - Suitability Determination (Every 5 years), Staff Checklist<br>Comments: Suitability is missing                                       | 9/29/2026                             |
| Staff files are incomplete. Staff person missing Can and suitability, Ad Hoc<br>Comments: NA                                                  | 9/29/2026                             |

**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**

**\_\_\_\_\_N/A\_\_\_\_\_, 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***

KAREN JACKSON-MOULTON

\_\_\_\_\_  
Date

9/29/26

\_\_\_\_\_  
***Signature of DHR Licensing Representative***

\_\_\_\_\_  
Date

COPIES TO: \_\_\_\_\_