

ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

Facility Name: GIFT OF DREAM 2	Type of Facility : Center [X] Day [X] OST [] Night [X] Family [] University [] Group []	Date of Visit: 9/29/2026
Facility Address: 1541 Cooper Hill Road, Irondale, AL 35210, Jefferson	Licensee: GIFT OF DREAM # 2	Telephone #: (404) 935-1684
Ages: 6 Weeks to 12 Years/5 Years to 12 Years	Director (if applicable): QUIANA EVANS	Capacity: 91 / 21 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 - Equipment not designed to be portable, securely anchored, Inspection Form Comments: The climbing apparatus was not securely anchored.	Pending Correction
Failed - Individual records on each child on file on first day of attendance, Inspection Form Comments: Children's files were incomplete and/ or missing from the center.	Pending Correction
Failed - Children younger than 2 ½ grouped separately, Inspection Form Comments: Children younger than 2 1/2 were in the same classroom as children over 2 1/2.	Pending Correction
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: All staff were not enrolled in Alabama Pathways.	Pending Correction
Failed - Immunization Certificate, Child Checklist Comments: The child's immunization was missing.	Pending Correction

Failed - Preadmission Form, Child Checklist
Comments: The preadmission form was incomplete.

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 10/13/26, 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.

Quiana Evans
Signature of Facility Representative

09/30/2026
Date

AJOIA MCGHEE

9/29/26

Signature of DHR Licensing Representative

Date

COPIES TO: Center