ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

Facility Name: MATTHEW AND MARTHA'S CHRISTIAN ACADEMY	Type of Facility : Center [X] Day [X] OST [ ] Night [X] Family [ ] University [ ] Group [ ]	Date of Visit: 10/7/2026
Facility Address: 2813 East South Boulevard, Montgomery, AL 36116, Montgomery	Licensee: CAROL CRAYTON JONES	Telephone #: (334) 233-0924
Ages: 6 Weeks to 12 Years/6 Weeks to 12 Years	Director (if applicable): LAKEITA SHAWNTRICE CARTER	Capacity: 15 / NA Day Night

SECTION B - DEFICIENCY INFORMATION

Performance Standard Deficiency ***HAZARDS MUST BE CORRECTED IMMEDIATELY****	**Date Corrected by Licensee**
Deficiency Summary	
Failed - Nightly activity schedule posted, Inspection Form Comments: Missing	8/24/2026
Failed - Soft material prohibited in infant's sleeping environment, no pillows, quilts, comforters, etc., Inspection Form Comments: Large stuffed animal and blanket in crib.	5/27/2026
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 in the Alabama Pathway's registry.	Pending Correction
Failed - Most recent fire inspection report within 5 years, Inspection Form Comments: Inspection not posted.	8/26/2026
Failed - Most recent Health department inspection report and food permit or written permission for catering food, Inspection Form Comments: Inspection not posted.	Pending Correction

Failed - Written Verification of Standards Read, Staff Checklist Comments: Missing	8/26/2026
Failed - CA/N Clearance Form (Every Five Years), Staff Checklist Comments: Missing	Pending Correction
Failed - Suitability Determination (Every 5 years), Staff Checklist Comments: Wrong suitability letter	8/26/2026
Failed - CA/N Clearance Form (Every Five Years), Staff Checklist Comments: Missing	8/24/2026
Failed - Suitability Determination (Every 5 years), Staff Checklist Comments: Incorrect suitability letter in file	Pending Correction
Failed - Preadmission Form, Child Checklist Comments: Missing information	8/26/2026
Failed - Preadmission Form, Child Checklist Comments: Missing information	8/26/2026
Failed - Preadmission Form, Child Checklist Comments: Missing information	8/26/2026
Failed - Preadmission Form, Child Checklist Comments: Missing information	8/26/2026
Failed - Preadmission Form, Child Checklist Comments: Missing information	8/26/2026
Failed - Immunization Certificate, Child Checklist Comments: Expired	Pending Correction
Failed - Preadmission Form, Child Checklist Comments: Missing information	8/26/2026
Failed - Preadmission Form, Child Checklist Comments: Missing information	8/26/2026
Failed - Electrical outlets covered, Classroom Checklist / Room A Comments: Missing outlet covers.	5/27/2026

Failed - Indoor thermometer (child safe), Classroom Checklist / Room B Comments: Missing	5/27/2026
Failed - Written daily schedule posted with 60-90 minutes of active play, Classroom Checklist / Room B Comments: Missing 30 minutes of active play	8/26/2026
Failed - Electrical outlets covered, Classroom Checklist / Room B Comments: Missing outlet covers	5/27/2026
Infant room out of ratio due to staff having an incomplete file. (Missing CA/N and suitability letter), Ad Hoc Comments: NA	Pending Correction
Facility closed without notifying DHR., Ad Hoc Comments: NA	8/26/2026
Infants watching videos on phone in infant room. 8/26/26, Ad Hoc Comments: NA	8/26/2026
Infants housed in unlicensed area of building. 8/26/26, Ad Hoc Comments: NA	8/26/2026
Lunch does not meet USDA guidelines. 8/26/26, Ad Hoc Comments: NA	Pending Correction
No menu posted in facility. 8/26/26, Ad Hoc Comments: NA	10/7/2026
There is a staff person in the preschool room with an incomplete file. (Missing Photo ID, References, Suitability Letter, and 8 hours of ongoing training. , Ad Hoc Comments: NA	Pending Correction
Facility closed without notifying DHR. 9/18/26, Ad Hoc Comments: NA	10/7/2026

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 ____10/21/26_____, 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.

_____	_____
Signature of Facility Representative	Date
ARIANN CHARITY	**10/7/26**
_____	_____
Signature of DHR Licensing Representative	Date

COPIES TO: _____Director_____