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

## SECTION A- IDENTIFYING INFORMATION

| Facility Name: | Type of Facility : Center [X] | Date of Visit: |
|---|---|---|
| ANNIE'S TRUE LOVE CHILD DEV CENTER | Day [X] OST [ ]<br>Night [ ] Family [ ]<br>University [ ]<br>Group [ ] | 10/7/2026 |
| Facility Address:<br>2424 HACKBERRY LANE, HOOVER, AL 35226, Jefferson | Licensee:<br>KYLA CARR | Telephone #:<br>(205) 823-5899 |
| Ages:<br>0 Weeks to 13 Years | Director (if applicable): | Capacity:<br>67 / NA<br>Day Night |

## SECTION B - DEFICIENCY INFORMATION

| **Performance Standard Deficiency**<br>***HAZARDS MUST BE CORRECTED IMMEDIATELY**** | **Date Corrected by Licensee** |
|---|---|
| **Deficiency Summary** | |
| Failed - Soft material prohibited in infant's sleeping environment, no pillows, quilts, comforters, etc., Inspection Form<br>Comments: Two infants (6wks- 12mos) asleep with blankets | 9/16/2026 |
| Failed - 2 ½ years up to 4 years 1 to 11, Inspection Form<br>Comments: Due to staff without a file (CAN, Suitability, and initial H&S trainings) | 9/30/2026 |
| Failed - Fire, Inspection Form<br>Comments: Expired | 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<br>Comments: Some of the facility staff members are not enrolled in Alabama's Pathways Registry | Pending Correction |
| Failed - Most recent fire inspection report within 5 years, Inspection Form<br>Comments: Expired 07/21/2021 | Pending Correction |
| Failed - Outdoor play area free of apparent hazardous conditions:, Inspection Form<br>Comments: overgrowth of weeds and vines on the playground and along the fenceline | 9/30/2026 |
| Failed - Ongoing Training, Staff Checklist<br>Comments: Missing 6 hrs | 9/30/2026 |
| Failed - Ongoing Training, Staff Checklist<br>Comments: Missing 4 hrs | 9/30/2026 |

| | |
|---|---|
| Failed - Health and Safety Training, Staff Checklist<br>Comments: Expired | 9/30/2026 |
| Failed - Ongoing Training, Staff Checklist<br>Comments: Missing 4 hrs | 9/30/2026 |
| Failed - Ongoing Training, Staff Checklist<br>Comments: Missing 4 hrs | 9/30/2026 |
| Failed - Ongoing Training, Staff Checklist<br>Comments: Missing 10 hrs | 9/30/2026 |
| Failed - Health and Safety Training, Staff Checklist<br>Comments: Expired | 9/30/2026 |
| Failed - Ongoing Training, Staff Checklist<br>Comments: Missing 4 hrs | 9/30/2026 |
| Failed - Health and Safety Training, Staff Checklist<br>Comments: Expired | 9/30/2026 |
| Failed - Ongoing Training, Staff Checklist<br>Comments: Missing 10hrs | 9/30/2026 |
| Failed - Health and Safety Training, Staff Checklist<br>Comments: Expired | 9/30/2026 |
| Failed - Immunization Certificate, Child Checklist<br>Comments: Not present in the file | 9/17/2026 |
| Failed - Preadmission Form, Child Checklist<br>Comments: Missing signature and date | 9/25/2026 |
| Failed - Preadmission Form, Child Checklist<br>Comments: Missing a date | 9/30/2026 |
| Failed - Hazardous substances locked, Classroom Checklist / Oranges<br>Comments: Cleaning supply closet is not locked and hand sanitizer not under lock and key/ combination lock | 9/16/2026 |
| Two infants (6wks- 12 mos) asleep in rockers/ bouncy seat for nap. , Ad Hoc<br>Comments: NA | 9/16/2026 |
| Upon arrival, there are two staff members hired/working without a file., Ad Hoc<br>Comments: NA | Pending Correction |
| Upon arrival, there is one staff working the Preschool Classroom (3yrs) without a CAN, Suitability, and initial H&S trainings., Ad Hoc<br>Comments: NA | 9/30/2026 |
| Upon arrival, there is one staff working the Preschool Classroom (4-5yrs) without a CAN, Suitability, and initial H&S trainings., Ad Hoc<br>Comments: NA | 9/30/2026 |
| Three staff files are incomplete., Ad Hoc<br>Comments: NA | 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 _____, 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.**

Kyla Carr _____ 10-08-2026

***Signature of Facility Representative*** Date

*SHUNDR NEVELS*

_____ _____

***Signature of DHR Licensing Representative*** Date

COPIES TO: _____