

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

**SECTION A- IDENTIFYING INFORMATION**

|                                                                         |                                                                                                                  |                                       |
|-------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|---------------------------------------|
| Facility Name:<br>MS. JOANN'S DAYCARE                                   | Type of Facility: Center [ ]<br>Day [X]      OST [ ]<br>Night [ ]      Family [X]<br>University [ ]<br>Group [ ] | Date of Visit:<br>04/23/2025          |
| Facility Address:<br>444 COTTONHILL ROAD, EUFAULA,<br>AL 36027, Barbour | Licensee:<br>JOANN A. MCKEMY                                                                                     | Telephone #:<br>(334) 703-0618        |
| Ages:<br>6 Weeks to 12 Years                                            | Director (if applicable):                                                                                        | Capacity:<br>6 / NA<br>Day      Night |

**SECTION B - DEFICIENCY INFORMATION**

| <u>Performance Standard Deficiency</u><br><b>HAZARDS MUST BE CORRECTED IMMEDIATELY*</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Date Corrected by<br>Licensee |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|
| <b>Deficiency Summary</b><br><br><p>Failed - Home free of apparent hazardous conditions, Inspection Form<br/> Comments: Antibacterial soap not under lock and key or combination lock in bathroom and kitchen.</p> <p>Failed - Dangerous substances locked, Inspection Form<br/> Comments: Antibacterial soap not under lock and key or combination lock in bathroom and kitchen.</p> <p>Failed - Clear glass doors marked at child level, Inspection Form<br/> Comments: Clear glass door is not marked.</p> <p>Failed - Number of cribs that meet US consumer Product Safety Act of 2008:, Inspection Form<br/> Comments: No manufactured date for crib.</p> <p>Failed - Outdoor play area and equipment free from apparent hazards, Inspection Form<br/> Comments: Electrical outlet uncovered on patio. Vines on fence. Climbing apparatus and seesaw airplane not anchored. Wasp nest inside toy kitchen. Off spray on patio not under lock and key or combination lock.</p> |                               |

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Failed - Outdoor play equipment not designed to be portable anchored,  
Inspection Form  
Comments: Climbing apparatus and seesaw airplane not anchored.

Failed - Home and grounds free of apparent hazards including abandoned  
automobiles unused appliances uncovered wells and cisterns stacked  
lumber with exposed nails explosives, Inspection Form  
Comments: indoor and outdoor hazards

Failed - All poison kept in locked area, Inspection Form  
Comments: Off spray on patio not under lock and key or combination  
lock.

Failed - Licensee and each caregiver has current infant-child CPR and  
first aid certificate copies on file in home, Inspection Form  
Comments: CPR & first aid is expired.

Failed - Fire, Inspection Form  
Comments: No documentation.

Failed - Tornado, Inspection Form  
Comments: No documentation.

Failed - Lockdown, Inspection Form  
Comments: No documentation.

Failed - Relocation, Inspection Form  
Comments: No documentation.

Failed - By August 1 2022 all home staff including  
licensee/substitutes/assistant caregivers must enroll in Alabama Pathways  
Professional Development Registry, Inspection Form  
Comments: None of the facility staff are enrolled in the Alabama  
Pathways Registry.

Failed - Diapering area washable cleaned and disinfected after each use,  
Inspection Form  
Comments: Diapering area is not clean and disinfected after each use.

Failed - Special foods for children labeled with child's name and stored  
as directed, Inspection Form  
Comments: Baby bottle not labeled with child's name.

Failed - Certificate of rabies vaccination, Inspection Form  
Comments: Certificate is not on file in the home.

Failed - Children's records complete, Inspection Form  
Comments: Missing documentation.

Failed - Physical/structural changes to home or grounds reported in advance, Inspection Form  
Comments: Installed gate was not reported to the Department.

Failed - Record for licensee/household member, Inspection Form  
Comments: Missing documentation.

Failed - Records for caregivers/substitutes, Inspection Form  
Comments: Missing documentation.

Failed - Current Driver's License, Staff Checklist  
Comments: Missing photo ID.

Failed - Photo ID Verification, Staff Checklist  
Comments: Photo ID missing.

Failed - Health and Safety Training, Staff Checklist  
Comments: Missing required training.

Failed - Infant -Child CPR Certification, Staff Checklist  
Comments: Expired CPR certification.

Failed - Infant -Child First Aid Certificate, Staff Checklist  
Comments: Expired First Aid certification.

Failed - Ongoing Training, Staff Checklist  
Comments: Missing required training.

Failed - Health and Safety Training, Staff Checklist  
Comments: Missing required training.

Failed - Infant -Child CPR Certification, Staff Checklist  
Comments: Expired CPR certification.

Failed - Infant -Child First Aid Certificate, Staff Checklist

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Comments: Expired First Aid certification.

Failed - Application, Staff Checklist  
Comments: Missing application.

Failed - Photo ID Verification, Staff Checklist  
Comments: Photo ID missing.

Failed - Current Driver's License, Staff Checklist  
Comments: Missing photo ID.

Failed - Immunization Certificate, Child Checklist  
Comments: Expired Immunization.

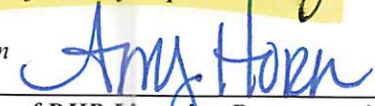
Failed: A current certificate of rabies vaccination shall be on file in the home for any animal required by law to be vaccinated. No current vaccination on file in the home., Ad Hoc  
Comments: NA

**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 5/14/25 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

Amy Horn

  
Signature of DHR Licensing Representative

5-9-25  
Date

4/29/25  
Date

COPIES TO:

mailed copy to licensee 4/29/25