

ALABAMA DEPARTMENT OF HUMAN RESOURCES  
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT

SECTION A - IDENTIFYING INFORMATION

Facility Name: <b>Generations</b>	Type of Facility: Family <input type="checkbox"/> Day <input checked="" type="checkbox"/> Night <input type="checkbox"/>	Group <input type="checkbox"/> Center <input checked="" type="checkbox"/> S.A.P. <input type="checkbox"/>	Date of Visit: <b>7 / 17 / 24</b> month day year
Facility Address: <b>6112 Grant Ave Prichard, AL 36610</b>	Licensee: <b>Generation Family Daycare Learning Center</b>	Telephone #: <b>(251) 408-9438</b>	
Ages: <b>looks to 3yrs / X to X</b> day night	Director (if applicable): <b>Cecelia Davison</b>	Capacity: <b>159 / X</b> day / night	

SECTION B - DEFICIENCY INFORMATION

Column 1	Performance Standard Deficiency <i>*HAZARDS MUST BE CORRECTED IMMEDIATELY*</i>	Column 2 Date Corrected by Licensee
1*	On playground A there is a hole at the bottom of the wooden fence.	CD 7/17/24
2*	On playground B there is a broken swing and several large branches on the ground.	CD 7/17/24
3*	In the 18 months to 2 1/2 years there is a rip in the changing pad.	CD 7/17/24

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 7/31/24, 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 meet Performance Standards applicable to that facility at all times. It is the responsibility of the licensee to operate in compliance with Performance Standards.

Signature of Facility Representative Cecelia Davison Date 7-17-24

Signature of DHR Licensing Representative Leslie Walker Date 7/17/24

COPIES TO Cecelia Davison - Director

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CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT (Additional Page)**

Facility Name: Generations

Date of Visit: 7/17/24

**SECTION B – DEFICIENCY INFORMATION (Continued)**

Column 1 <u>Performance Standard Deficiency</u> *HAZARDS MUST BE CORRECTED IMMEDIATELY*	Column 2 Date Corrected by Licensee
4. Staff's files are incomplete. (See pgs. 18 + 22)	

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Signature of Facility Representative Cecelia Davison Date 7-17-24

Signature of DHR Licensing Representative Leshie Walker Date 7/17/24

COPIES TO: Cecelia Davison