South Carolina Department of Social Services Office of Child Care Licensing INSPECTION VISIT FORM FOR LICENSED CENTERS

Facility Na Permit #:		r Child Development Center Type of Inspection: Annu		[Con	Date of nplaint	Inspection: 8/10/22 Time of Inspection: 10:221 Follow Up (original inspection date 12/16/21 Reason for Follow up: 12 clear up pending deficiency	1		
Telephone Center Dir Change in	e#: 803-462-0632 rector/Designee: Sl Ownership or Dire	nekera Sada Williams ctor? □ Yes 🎜 No If yes, Name: ָ		ct info		Hours of Operation: Single Shift ne/Email/Fax)? □ Yes ๗ No Overnight Care? □ \		,	•
Maximum	number of children: number of infants: sted in public view	10 24 months g	73 0 г	nonti	ns 🗆 I-4	ding 2: Building 3: □ If facility Infants are in designated rooms? Ves □ Ins) Does facility transport children? □ Yes □ No □ No □	CDE No □ /A	P 1 N/A	i
		RATION & STAFFING 114-503	- No	10		SUPERVISION 114-504	10.0		
			С	N	N/A	301 EKVISION 114-304	C	N	N/A
Staff files	s are in compliance I	H(1-7)	10			Adequate supervision throughout facility A(1-2)	IS.	4	N/A
	hours up-to-date K(0	P	Facility following tracking of children procedures A(3)	12		
At least	1 person with CPR &	1 St Aid on the premises K(5)(h)	10			Ratios adequate in all classrooms and on playground B, C	15	_	l o
				NITA	TION 8	SAFETY 114-505		تنا	
P/ - To			С	N	N/A		С	N	N/A
Children'	's faces/hands are cl	ean B(1)	W	o		Proper diaper changing practices were observed F(1-16)	10	-	
		abeled and stored properly D(2)	UZ.	0		Proper handwashing practices were observed G(4)	W/	-	
		ehicle if transport E(1), I(1)(g)	10	0		No smoking/consumption of alcoholic beverage A(3)	1		-
THOUAIG	RICHI Idollity dild ili v				E 114-		□		0/
	RI	JILDING	C	N	N/A	PLAYGROUND	С	N	N/A
Ventilatio	AND REAL PROPERTY AND ADDRESS OF THE PARTY O	ficient A(2)(a-d), (4)(a-c)	12	0	0	Playground equip. safe & firmly anchored B(7)	120		
		focation hazards A(5)(g)(i-iii)	UZ/	0		Adequate cushioning material; at least 6ft fall zone B(9)			
		rs free from hazards A(5)(d)	UZ/	_		Fencing/safety barriers 4ft. in height, in good repair B(4)	-		-
		-80°F A(7) If no, close in 4 hrs.	D/	0		Outdoor space free from hazards and litter B(2)	W/		_
		ms (Insects, rodents) A(8)(b-c)	J.			RESTING	C	D NI	AI/A
		stic lined receptacles A(8) (d-i)	υ <u>ν</u> υΖΙ		_ D	Play Pens observed C(4)		N	N/A
	l outlets are securely		UZÍ			Cribs meet federal standards (reviewed certificate) D(1)	<u> </u>		
	a has running water		Ø		0	Cots, mats, cribs labeled or charted for each child D(2)	D/		
			VZ.				NZ		-
		available at sink A(12)(i)		0		PROGRAM 114-506	С	N	N/A
		are clean and in good repair C(1)	w		0	Written, planned, daily program of activities that is	W	ا ه	
		meets the CPSC standards C(2)	UZ/		-	developmentally & age appropriate observed A(1-3)			
пеашу	pets/ammais (vaccin	ation record up-to-date) E(4)			Medical	Positive, non-abusive discipline practice B(1)	Ø		0
MEAL REQUIREMENTS 114-508 C N N/A									ALLA
Moals &	enacks in compliance	e with USDA A(1)(b)	ø			Round, firm foods are not offered to children under 4	C	N	N/A
		d, properly labeled food A(4)	UZÍ			yrs. Old, unless properly cut to prevent choking risk A(3)	yZ		
	parers have proper		UZ/			Food stored & handled properly D(1)	10		
		eters, temp under 45°F D(2-3)				All cleaning & poisonous items stored away from food D	4		0
rtonigor		CARE 114-509	Ų.			TRANSPORTATION 114-505 I			
	1031 / 3131	57.11.E 77.7 503	С	N	· N/A		С	N	N/A
Infants a	re placed on their ba	ack to sleep A(5)(a)	W	<u> </u>	0	Vehicle has proper safety restraints & in good repair I(1)			16
			+-				-		V
			_		_		-		1
			_			Divor 3 (valid) divor 6 hooriso reviewed (1)(1)			
Crock pots, bottle warmers, are inaccessible to children, No microwaving of beverages observed A(3)(d)			W	0	0	C-Compliant with Regulation			
Cups and bottles labeled with child's name & used only by that child A(3)(a)			W	0	0	No violations noted at the time of visit			
Food for Food for Crock po microwa Cups an	toddlers cut in pieces infants cut in pieces ots, bottle warmers, a ving of beverages of d bottles labeled with	oserved A(3)(d)	· ,		,	N-Noncompliant with Regulation		0	

Signature of Director/Operator/Designee: Date: D