SOUTH CAROLINA DEPARTMENT OF SOCIAL SERVICES CHILD CARE LICENSING ORIGINAL & RENEWAL INSPECTION CHECKLIST

Type of Inspection:

Provisional Evaluation

Full Evaluation

enter Name: St. Peter's Catholic RL/APP ID #: CC007373 Idress: 70 Lady's Island Drive, E elephone #: 843-522-2163 enter Director/Designee: Nneka	□ Licensed Registered leaufort, SC 29907 Any changes in conta	Date of Inspection: Center Aith Based Hour ct info (Phone/Email/Fax)?	s of Operation: Singl				
nange in Ownership or Director? otal Capacity: 140	□ Yes □No If yes, Name: Building 1:	Building 2:	Building 3 <u>:</u>		-		
aximum number of infants: 0	□ 24 months □ 30 mon	Building 2: ths □ I-4 facility Clear Fire R	eport □ Yes ♠No □	NA Date cleare	ed		
	Physical Site	CENTER	FAITH BASED	GCCH	С	N	N/A

Physical Site	CENTER	FAITH BASED	GCCH	C	ĮΝ	N/A
The Approval/ License/ Registration is displayed in public view.	114-503 A.1	114-523 A.1	11 4 -513 A.1	Ø		
Daily menu dated and posted in conspicuous location in public view.	114-508 A.1	114-528 A.1	11 4 -518 A.1			NZ.
Building has proper ventilation to include kitchen and bathrooms.	114-507 A.2	114-527 A.2	11 4 -517 A.2	-		
Tobacco free facility	114-505 A.3	114-525 A.2	11 4 -517 A.2			-
Decals on all glass doors, placed at eye level of children.	114-507 A.3	114-527 A.3	11 4- 517 A.3	R		
Adequate lighting for rooms, hallway, bathrooms and fire escapes.	114-507 A.4	114-527 A.4	114-517 A.4(a)	K		
Ceiling, floors, windows, doors and rugs properly secured.	114-507 A.5(d)	114-527 A.5(d)	114-517 A.5(d)	1		
No strangulation, choking or suffocation hazards.	114-507 A.5(g)	114-527 A.5(g)	114-517 A.5(h)	2		
Electrical outlets securely covered and inaccessible to children.	114-507 A.11(c)	114-527 A.11(c)	114-517 A.11(c)	4		
Temperature in building between 68 and 80 degrees •F.	114-507 A.7(a)	114-527 A.7	114-517 A. 7(a)			
Facility has hot and cold water.	114-507 A.6(b)	114-527 A.6(b)	114-517 A.6(b)	·		
Trash in restroom and classroom kept in plastic lined container.	114-507A.8(f)	114-527 A.8(f)	114-517 A.8(f)	V		
Facility free from pest problems (insects, rodents, etc.).	114-507 A.8(b)	114-527 A.8(b)	114-517 A.8(b)	2		
Furniture, toys & equipment are clean and free from hazards.	114-507 C.1	114-527 C.1	114-517 C.1	2		
Furniture, toys & equipment meet standards of the CPSC.	114-507 C.2	114-527 C.2	114-517 C.2	A/		
Bathroom completely enclosed. Private toilet use by preschool & up.	114-507 A.12	114-527 A.12		4		
Child size toilets & sinks (has seat adapter and sturdy steps).	114-507 A.12(e)	114-527 A.12(e)	114-517 A.12(e)	4		
Soap and disposable towels provided at each sink.	114-507 A.12(i)	114-527 A.12(i)	114-517 A.12(g)	8		
Cots or mats abeled with child's name for use only by that child.	114-507 D.2	114-527 D.2	114-517 D.2	V		
Cots and mats stored so that the side child lies on does not touch floor.	114-507 D.6	114-527 D.6	114-517 D.6	X	. 🗆	
Poisons/harmful agents locked, labeled and stored properly.	114-507 E.1	114-527 E.1	114-517 E.1	Ø		
Only healthy pets/animals permitted. (Vaccination records up-to-date)	114-507 E.4	114-527 E.4	114-517 E.4			3
Ratio chart prominently posted in each classroom.	114-504 B.1	114-524 B.1		1		
Emergency phone numbers posted (police, fire and poison control).	114-503 J.2	114-523 G.2	114-513 J.2	Y		
Internal means of communication among staff.	114-503 J.3			bØ1		
Parents have free & full access.	114- 503 F.1		114-513 F.1	M		
If overnight care is provided, requirements have been met.	114-509 C	114-529 C	114-519 C			De
Age appropriate radio, TV, VCR and DVD for children use.	114-506 A.7		114-516 A.7	\checkmark		
Staff files are in compliance to include required training hours.	114-503 F(1-4)	114-523 H.(1-7)	114-513 H(1-7)		X	

C= Compliant with Regulation, N = Noncompliant with Regulation, N/A = Not Applicable

No violations noted at time of visit.

Signature of Director/Operator/Designee: _

Signature of Child Care Licensing Specialist:

Date 3 923 Refused to Sign

Date <u>84733</u>

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<u>Division of Early Care and Education</u> <u>Deficiency Correction</u>

NAME OF PROVIDER/OPERATOR St. Peter's Catholic School PERMIT #832

Deficiency Cited	Corrective Action Needed	Expected Date of Correction
2 health assessments needed	schedule doctor appointments within 2 weeks	03/29/23
1 tuberculosis result needed	schedule a doctor appointment for the following week	03/17/23

Providers/Operators at all time.	are required by regulati	ions and statutes to be in compliance
Licensing Specialist_	902	Date