South Carolina Department of Social Services Office of Child Care Licensing

INSPECTIO	N VI			OR LICENSED CENTERS			
Facility Name: The Learning Station			Date o	f Inspection: 5 115 25 Time of Inspect i on:	10	In.	_
Permit #: 18287 Type of Inspection: Ann	ual	D-€0	mplain	t	,0,	411	-
				Reason for Follow up: clear up pendi ing deficien		_)	
Address: 690 Singleton Ridge Road, CONWAY, SC 29526					cy 🗆 s	Self-R	lepor
	oont.	n \$ 1	(, /Db -	Hours of Operation:			
Center Director/Designee: Michelle Rae Brown	CUIRE	actin	io (Pno	one/Email/Fax)? □ Yes □ № Overnig tht Care? □	Yes	en	Ю.
Change in Ownership or Director? Yes No If yes, Name:							
Maximum number of children: 176 Ruilding 1			D				
= anang r,	- 30		. Bull	lding 2: Building 3:	⊐ CD	EΡ	
Maximum number of infants: 48 ✓ 24 months tems posted in public view: □ License ✓ Menu Ratio C	hart (HOIII Io IIA)	(IIS LI I-	4 facility Infants are in designated rooms? Yes	oN c	□ N//	Ą
A Sect 18.60 184	mant ((All G	a55100	inis) Does racility transport children? Yes No	₩A		
MANAGEMENT, ADMINISTRATION & STAFFING 114-503	100	8130	NEW STREET	SUPERVISION 444 FOR			
	C	N	N/A	SUPERVISION 114-504		3	
Staff files are in compliance H(1-7)	2	_		Adequate supervision throughout facility A(1-2)		_	I N
Training hours up-to-date K(5)(b-c)		10	_	Facility following tracking of children procedures A(3)	_	10	-
At least 1 person with CPR & 1 St Aid on the premises K(5)(h)	2			Ratios adequate in all classrooms and on pla yground B, (- F	10	-
				& SAFETY 114-505		10	
The Soft State of the State of	C	N	N/A				
Children's faces/hands are clean B(1)	8	<u> </u>	0	Dropor diagon changing months	С	N	N/
Medicine and harmful items labeled and stored properly D(2)	-	 -	0/	Proper diaper changing practices were observed F(1-16)		0	
First Aid kit in facility and in vehicle if transport E(1), I(1)(g)	0	1		Proper handwashing practices were observed G(4)			0
	_		E 114-	No smoking/consumption of alcoholic beverage A(3)	Ó		C
BUILDING	C	N	N/A	THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TO SERVICE AND ADDRESS OF THE PERSON NAMED IN COLUMN TO SERVICE AND ADDRE	SY		9
Ventilation and lighting & sufficient A(2)(a-d), (4)(a-c)		+		PLAYGROUND	С	N	N/
No strangulation/choking/suffocation hazards A(5)(g)(i-iii)	+	 -	8	Playground equip. safe & firmly anchored B(7)			D
Ceiling, floors, windows, doors free from hazards A(5)(d)			8	Adequate cushioning material; at least 6ft fall zone B(9)		10	2
Building(s) temp between 68-80°F A(7) If no, close in 4 hrs.	-		8	Fencing/safety barriers 4ft. in height, in good repair B(4)	0		-8
Facility free from pest problems (insects, rodents) A(8)(b-c)	<u> </u>	<u> </u>	P	Outdoor space free from hazards and litter B(2)		0	-হ
Garbage kept properly in plastic lined receptacles A(8) (d-i)	0		2	RESTING	С	N	N/A
Electrical outlets are securely covered A(11)(c)	-	-		Play Pens observed C(4)			٥
Sink area has running water A(12)(d)	-	-	. 5/	Cribs meet federal standards (reviewed certificate) D(1)			-28
Soap and disposable towels available at sink A(12)(i)	0		<u> </u>	Cots, mats, cribs labeled or charted for each Child D(2)			2
Furniture, toys & equipment are clean and in good repair C(1)	<u> □</u>		2	PROGRAM 114-506	С	N	N/A
Furniture, toys & equipment meets the CPSC standards C(2)	0	0	22	Written, planned, daily program of activities that is			
Healthy pets/animals (Vaccination record up-to-date) E(4)			2	developmentally & age appropriate observed A(1-3)		0	ď
	DEO	UGIG		Positive, non-abusive discipline practice B(1)	0		9
MEAL	C			S 114-508	1		
Meals & snacks in compliance with USDA A(1)(b)		N	N/A	David Surface 1	C	N	N/A
Clean, wholesome, unspoiled, properly labeled food A(4)				Round, firm foods are not offered to children under 4			0
Food preparers have proper hair restraints B(5)				yrs. Old, unless properly cut to prevent choking risk A(3)			
Refrigerators have thermometers, temp under 45°F D(2-3)	<u> </u>			Food stored & handled properly D(1)			
INFANT CARE 114-509				All cleaning & poisonous items stored away from food D		□	
	С	N	N/A	TRANSPORTATION 114-505 I			
Infants are placed on their back to sleep A(5)(a)			14/7	Vehicle has proper cofety sectorists 6 in and	С	N	N/A
No bottles propped or given in cribs or on mats A(3)(c)			9	Vehicle has proper safety restraints & in good repair (1)	□		9
Food for toddlers cut in pieces ½ inch or less A(3)(k)		1		Checklist for loading/unloading children reviewed (2)(d)	0		9
Food for infants cut in pieces ¼ inch or less A(3)(j)			7	Driver's (valid) driver's license reviewed (1)(f)	□ <i>.</i>		
Crock pots, bottle warmers, are inaccessible to children, No	 		<u> </u>	C. Compliant with Passilette			
microwaving of beverages observed A(3)(d)			· 6	C-Compliant with Regulation			
Cups and bottles labeled with child's name & used only by that	1			N-Noncompliant with Regulation			8
child A(3)(a)		0		No violations noted at the time of visit			
		-		No violations noted at the time of visit			
1/20. 1	1		22	-1-1-0			
Signature of Director/Operator/Designee:	1	2	In	Date: 5/19/23 PD	ai -		
Signature of Child Care Licensing Specialist		0 1	. ^	Date: $\frac{5/19/23}{5/9/23}$ Refused to	sign		
Signature of Child Care Licensing Specialist:) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		at 1	W	Date: 31/9/23			
. /							