## South Carolina Department of Social Services Office of Child Care Licensing

## INSPECTION VISIT FORM FOR LICENSED CENTERS

Facility Name Permit #:    2	e: Swan Lake Academy LLC 4767 Tyne	of Inspection:   Anne	ual .	-Ko	Date of	Inspection: 5/26/23 Time of Inspection: 26	m	2	
_	.,,,,,,	or moreodom. 🗆 Anni	uai į	<i>a</i> 60	mhiaiti	t □ Follow Up (original inspection date Reason for Follow up: □ clear up pendinc deficient		)	
Address: 13 i	Barnett Drive, SUMTER, SC	29150							leport
Telephone #:	803-418-5802		confr	et int	fo /Dho	Hours of Operation: Monday-Friday 6:30am ne/Email/Fax)? ☐ Yes ☑ No Overnight Care? ☐	1-5:30	)pm	
	or/Designee: Gregory R Wa	alters	SUIILO	IOL III	יוי (רוזט	ne/Email/Fax)? ☐ Yes ☐ Mo Overnight Care? ☐	Yes	DK	0
Change in O	wnership or Director?   Yes	No If yes Name							
Maximum nu	mber of children: 113	Building 1:			Ruil	ding 2: Building 3:			
Maximum nu	mber of infants: 41 /	□ 24 months a	<del>,</del> ⊿∕2∩.	moni	the - L	A facility Infanta and to 1	D CDI	ΞP	
tems posted	in public view: pLicense		hart í	All cl	assroo	ms) Does facility transport children? Profes Door No Does	ı No ı	⊃ N//	4
				, ,,, ,,	400100	mo) Does racinty transport children (D) 168 - No - N	I/A		
MANAGEM	ENT, ADMINISTRATION & S	TAFFING 114-503	H			SUPERVISION 114-50 ◀	1901	1000000	No.
Olasti Classes		Market Market	C	N	N/A			7 N	N/A
Starr files ar	e in compliance H(1-7)			10		Adequate supervision throughout facility A(1-2)			
At least 4 as	irs up-to-date K(5)(b-c)			0	p/	Facility following tracking of children procedures A(3)	V		
At least 1 pe	erson with CPR & 1st Aid on th		كفو			Ratios adequate in all classrooms and on player round B.	: 12	_	
	PARTICINE OF THE PARTICINES	HEALT				& SAFETY 114-505			NAME OF TAXABLE PARTY.
0.01	Mary Court Court		LC.	N	N/A	TEMPORE TO SELECT THE SECOND SERVICES.	С	N	N/A
Children's fa	ces/hands are clean B(1)			0	·K	Proper diaper changing practices were observed F(1-16)	W	1	
Medicine an	d harmful items labeled and st	ored properly D(2)	0		10	Proper handwashing practices were observed G(4)	10	<del>   </del>	-
First Aid kit i	n facility and in vehicle if trans			0		No smoking/consumption of alcoholic beverage A(3)		_	+-
S CASE OF	是 12 位 图 12 d d d d d d d d d d d d d d d d d d	PHY	SICA	L SI	TE 114	507			D
	BUILDING		С	N	N/A	PLAYGROUND	С	N	N/A
Ventilation a	nd lighting & sufficient A(2)(a-	d), (4)(a-c)	Lo		12	Playground equip. safe & firmly anchored B(7)	-		N/A
No strangula	tion/choking/suffocation haza	rds A(5)(g)(i-iii)	0		P	Adequate cushioning material; at least 6ft fall zone B(9)	_		ملا
Ceiling, floor	s, windows, doors free from h	azards A(5)(d)				Fencing/safety barriers 4ft. in height, in good repair B(4)			P
Building(s) to	emp between 68-80°F A(7) If r	10, close in 4 hrs.			Ø	Outdoor space free from hazards and litter B(2)	0		P/
Facility free	from pest problems (Insects, re	odents) A(8)(b-c)	0		0	RESTING	С	N	D/
	ot properly in plastic lined rece			0		Play Pens observed C(4)			N/A
Electrical out	llets are securely covered A(1	1)(c)			V	Cribs meet federal standards (reviewed certificate) D(1)	. 0	<u> </u>	<i>D</i> /
	s running water A(12)(d)				0	Cots, mats, cribs labeled or charted for each child D(2)			2/2
Soap and dis	sposable towels available at si	nk A(12)(i)	0		<b>5</b>	PROGRAM 114-506	C		u
Furniture, to	s & equipment are clean and	in good repair C(1)	0	0	0	Written, planned, daily program of activities that is	٠-	N_	N/A
Furniture, to	s & equipment meets the CP	SC standards C(2)			И	developmentally & age appropriate observed A(1-3)		-	12
Healthy pets.	animals (Vaccination record u				W	Positive, non-abusive discipline practice B(1)			
		MEAL	REQ	UIRE	MENT	S 114-508			Z
E TELLISIE			С	N	N/A		С	N	NI/A
Meals & snac	cks in compliance with USDA	A(1)(b)			16	Round, firm foods are not offered to children under 4			N/A
Clean, whole	some, unspoiled, properly lab	eled food A(4)			10	yrs. Old, unless properly cut to prevent choking risk A(3)	葥	님	
Food prepare	ers have proper hair restraints	B(5)			16	Food stored & handled properly D(1)		-	
Reirigerators	have thermometers, temp un	der 45°F D(2-3)			16	All cleaning & poisonous items stored away from food D	<u> </u>	-	10/
	INFANT CARE 114-50	9				TRANSPORTATION 114-505 I		1000	
Infanto ara ni	good on their healt to alone At	(EV-)	С	N	N/A		C	N	N/A
	aced on their back to sleep A				<b>1</b>	Vehicle has proper safety restraints & in good repair I(1)			D/
No potties pr	opped or given in cribs or on r	nats A(3)(c)	0		0	Checklist for loading/unloading children reviewed (2)(d)	0	-	b
Food for toda	llers cut in pieces ½ inch or le	ss A(3)(k)			V	Driver's (valid) driver's license reviewed (1)(f)	-	-	- b
	nts cut in pieces 1/4 inch or less				W	The state of the s			NAME OF TAXABLE PARTY.
Crock pots, b	ottle warmers, are inaccessible	le to children, No			V	C-Compliant with Regulation			
microwaving	of beverages observed A(3)(	<u>a)</u>			N-	N-Noncompliant with Regulation			
Cups and bot	tiles labeled with child's name	& used only by that		0	<b>1</b>				100 E S

Signature of Director/Operator/Designee: Kunette Welliam

Date: 5/26/23

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Page	ı	of	ı
9-			

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

## NAME OF PROVIDER/OPERATOR Swan Lake Academy LLC PERMIT # 24767

Deficiency Cited	Corrective Action Needed	Expected Date of Correction		
missing staff Medical Statement (DSS Form 2901)	ensure DSS Form 2901 is on file upon hire	6/1/23		
missing signed staff discipline policy	ensure staff signed discipline policy is on file upon hire	6/1/23		
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Providers/Operators are required by regulations and statutes to be in compliance at all time.

Licensing Specialist	Emily Broach	<sub>Date</sub> 5/26/23
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