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

Type of Inspection:

Provisional Evaluation Full Evaluation Renewal

		7				
enter Name: Mary Vanessa Ladson RL/APP ID #: CC000587 Licensed Registered Date of Inspection: Logs 23 Time of Inspection: Logs Log						
				·		
ddress: 208 Bryant Drive, Saint Stephen, SC 29479 Hours of Operation: Single Shift ⇒lephone #: 843-567-2055 Any changes in contact info (Phone/Email/Fax)? □ Yes √ No Overnight Care? □ Yes √ No						
enter Director/Designee:	ioremain axy. B 1	00 (2110 0	romight Oute:	103	7	10
nange in Ownership or Director? Yes No If yes, Name:					•	
nange in Ownership or Director? Yes No If yes, Name: btal Capacity: 12 Building 1: Building 1:	ding 2:	Building 3:				
aximum number of infants: 12 / 24 months \square 30 months \square 1-4 fac	ility Clear Fire Re	port pe Yes □ No □	NA Date cleared			
Physical Site	CENTER	FAITH BASED	GCCH	С	N	N/A
The Approval/ License/ Registration is displayed in public view.	114-503 A.1	114-523 A.1	114-513 A.1	1		_
Daily menu dated and posted in conspicuous location in public view.	114-508 A.1	114-528 A.1	114-518 A.1	ø		
Building has proper ventilation to include kitchen and bathrooms.	114-507 A.2	114-527 A.2	114-517 A.2	4		
Tobacco free facility	114-505 A.3	114-525 A.2	114-517 A.2	Z		
Decals on all glass doors, placed at eye level of children.	114-507 A.3	114-527 A.3	114-517 A.3	12		
Adequate lighting for rooms, hallway, bathrooms and fire escapes.	114-507 A.4	114-527 A.4	114-5 1 7 A.4(a)			Ö
Ceiling, floors, windows, doors and rugs properly secured.	114-507 A.5(d)	114-527 A.5(d)	114-517 A.5(d)	7		0
No strangulation, choking or suffocation hazards.	114-507 A.5(g)	114-527 A.5(g)	114-517 A.5(h)	ø		_
Electrical outlets securely covered and inaccessible to children.	114-507 A.11(c)	114-527 A.11(c)	114-517 A.11(c)	qi.		0
Temperature in building between 68 and 80 degrees ∘F.	114-507 A.7(a)	114-527 A.7	114-517 A. 7(a)	4		0
Facility has hot and cold water.	114-507 A.6(b)	114-527 A.6(b)	114-517 A.6(b)	T)		
Trash in restroom and classroom kept in plastic lined container.	114-507A.8(f)	114-527 A.8(f)	114-517 A.8(f)	1		
Facility free from pest problems (insects, rodents, etc.).	114-507 A.8(b)	114-527 A.8(b)	114-517 A.8(b)	10		
Furniture, toys & equipment are clean and free from hazards.	114-507 C.1	114-527 C.1	114-517 C.1	6		
Furniture, toys & equipment meet standards of the CPSC.	114-507 C.2	114-527 C.2	114-517 C.2	9		
Bathroom completely enclosed. Private toilet use by preschool & up.	114-507 A.12	114-527 A.12	NO BY USE SEE	7		
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		0
Soap and disposable towels provided at each sink.	114-507 A.12(i)	114-527 A.12(i)	114-517 A.12(g)	ø		
Cots or mats labeled with child's name for use only by that child.	114-507 D.2	114-527 D.2	114-517 D.2	4		
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	7		
Poisons/harmful agents locked, labeled and stored properly.	114-507 E.1	114-527 E.1	114-517 E.1	7		
Only healthy pets/animals permitted. (Vaccination records up-to-date)	114-507 E.4	114-527 E.4	114-517 E.4			d
Ratio chart prominently posted in each classroom.	114-504 B.1	114-524 B.1		20		_ _ _
Emergency phone numbers posted (police, fire and poison control).	114-503 J.2	114-523 G.2	114-513 J.2	<u>z</u>		
Internal means of communication among staff.	114-503 J.3		111 010 0:2	Ø		
Parents have free & full access.	114- 503 F.1		114-513 F.1	7		
If overnight care is provided, requirements have been met.	114-509 C	114-529 C	114-519 C			
Age appropriate radio, TV, VCR and DVD for children use.	114-506 A.7	Remodel Association	114-516 A.7	Ī		_ F _
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)		Ď	
Staff filed and in configuration to include required staffing fields.	111 0001 (1 1)	11102011.(17)	11101011(11)			
C= Compliant with Regulation, N = Noncompliant with Regulation, N/A = No	nt Applicable				101-	
No violations noted at time of visit.						
110 VIOLENTINO HOUSE IN THIS OF FIGURE				0.780		
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Signature of Director/Operator/Designee: May Vanese	Kada	Date <u></u>	28/ 23 a Ref	usec	i to :	Sign
alch an H	- > 4 > -					_
Signature of Child Care Licensing Specialist Chanell Troops Date 6/28/23 Refused to Sign Date 6/28/23 Date 6/28/23						

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Division of Early Care and Education Deficiency Correction

NAME OF PROVIDER/OPERATOR	Mary	Vanessa	Ladson	
PERMIT # 15685				

Deficiency Cited	Corrective Action Needed	Expected Date of Correction 06/30/2023		
The following staff files were missing: health assessment	All staff files should be completed and updated.			
Annual blood-borne pathogens training is missing.	Training should be completed annually.	07/28/2023		

Providers/Operators are required by regulations and statutes to be in compliance at all time.

Licensing Specialist	banell	Unsors	Date <u>U</u>	30	23
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