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

MANAGEMENT. ADMINISTRATION & STAFFING 114-503 SUPERVISION 114-504 Staff files are in compliance H(1-7) 	Facility Name: Big Blue Marble - 38 Date of Inspection: 3/19/2.5 Time of Inspection: 11:20 am. 11:55 Permit #: 25229 Type of Inspection: Annual Complaint Follow Up (original inspection date). Reason for Follow up: Clear up pending deficiency #Self-Report								
Askimum number of infants: 117 2 24 months cl 4 facility Infants are in designated rooms? Defs (n) N/A tems posted in public view: Closes a AMenu ARalo Charl (All classrooms) Does facility transport children? Yes off (n) N/A MANAGEMENT, ADMINISTRATION & STAFFING 114-603 SUPERVISION 114-504 C N N/A Staff files are in compliance M(1-7) Adequate supervision throughout facility A(1-2)	Telephone #: 803-888-2408 Any changes in contact info (Phone/Email/Fax)? • Yes #No Overnight Care? • Yes #No Center Director/Designee: Tammy Napolitano Tammy Napolitano Overnight Care? • Yes #No Change in Ownership or Director? • Yes #No If yes, Name:								
MANAGEMENT. ADMINISTRATION & STAFFING 114-503 SUPERVISION 114-504 Staff files are in compliance H(1-7) 	Aaximum number of children: 186 Building 1: Building 2: CDEP Aaximum number of infants: 117 D 24 months 2 30 months D I-4 facility Infants are in designated rooms? Pres D No D N/A tems posted in public view: Pricense Priero Chart (All classrooms) Does facility transport children? D Yes Prio D N/A								
Staff files are in compliance H(1-7) C N N/A Adequate supervision throughout facility A(1-2) C N Staff files are in compliance H(1-7) C N M/A Adequate supervision throughout facility A(1-2) C N At least 1 person with CPR & 1 st Aid on the premises K(5(h) C Ratios adequate in all classrooms and on playground B, C Ratios adequate in all classrooms and on playground B, C C N NA Children's faces/hands are clean B(1) C N NA Proper diaper changing practices were observed G(4) C N NA HeadLine and harmful items labeled and stored properly D(2) er 0 Proper handwashing practices were observed G(4) er 0 PHXSICAL STEET1414-507 Distinguistion/choking/sufficcation hazards A(5)(g)(-iii) N NA Playground equip staft all tast fill a tone B(9) 0 0 Ventilation and lighting & sufficient (A(2)(a-c)) C N N/A Playground equip staft all tast Bit I all cone B(9) 0 0 Celtrication property D(2) er 0 Playground equip staft all tast Bit I all cone B(9) 0 0 Ventilation and lighting & sufficient (A(2)(a-c) er 0 <									
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child A(3)(a) No violations noted at the time of visit	Cups and bottles labeled with child's name & used only by that child A(3)(a)	-	D	D	No violations noted at the time of visit				

Signature of Director/Operator/Designee: Sammy Napolitano Signature of Child Care Licensing Specialist: Jaryon Mark -

Date: $\frac{3/19/25}{3/19/25}$ ___ C Refused to sign