

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

Facility Name: Kids Paradise CDC
Permit #: 23772
Address: 4716 Hwy 17 Bypass South MYRTLE BEACH, SC 29588

Date of Inspection: 6/19/25
Time of Inspection: 11:05 AM
Type of Inspection: ☐ Annual ☒ Complaint
☐ Follow Up (Original Inspection)
Date: / /
Reason for Follow up:
☐ Pending Deficiencies
☐ Self-Reported Incident

Telephone #: 843-293-7529 Any changes in contact info (Phone/Email/Fax)? ☐ Yes ☒ No

Center Director/Designee: Jennifer Kane Knight

Change in Ownership or Director? ☐ Yes ☒ No If yes, Name: _____

Maximum number of children: 164

Maximum number of infants: 84

Items posted in public view: ☒ License ☒ Menu ☒ Ratio Chart (All classrooms)

ABC Quality Yes

Head Start

☐ Yes ☒ No

Public Schools

☐ Yes ☒ No

Building 1: _____ Building 2: _____ Building 3: _____

Infants are in designated rooms? ☒ Yes ☐ No ☐ N/A

Does facility transport children? ☒ Yes ☐ No ☐ N/A

Overnight Care? ☐ Yes ☒ No

Hours of Operation: M- 7:00AM- 5:30PM T- 7:00AM- 5:30PM W- 7:00AM- 5:30PM Th- 7:00AM- 5:30PM F- 7:00AM- 5:30PM

MANAGEMENT, ADMINISTRATION & STAFFING 114-503

	C	N	N/A
Staff files are in compliance H(1-7)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Training hours up-to-date K(5)(b-c)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
At least 1 person with CPR & 1st Aid on the premises K(5)(h)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SUPERVISION 114-504

	C	N	N/A
Adequate supervision throughout facility A(1-2)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Facility following tracking of children procedures A(3)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ratios adequate in all classrooms and on playground B, C	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

HEALTH, SANITATION & SAFETY 114-505

	C	N	N/A
Children's faces/hands are clean B(1)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medicine and harmful items labeled and stored properly D(2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
First Aid kit in facility and in vehicle if transport E(1), I(1)(g)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Current Emergency Preparedness Plan H(3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

	C	N	N/A
Proper diaper changing practices were observed F(1-16)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Proper handwashing practices were observed G(4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
No smoking/consumption of alcoholic beverage A(3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Emergency Medical Plan C(1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

PHYSICAL SITE 114-507

BUILDING	C	N	N/A
Ventilation and lighting & sufficient A(2)(a-d), (4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
No strangulation/choking/suffocation hazards A(5)(g)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Ceiling, floors, windows, doors free from hazards A(5)(d)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Building(s) temp between 68-80°F A(7) If no, close in 4 hrs.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Facility free from pest problems (Insects, rodents) A(8)(b-c)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
All potentially harmful items including cleaning supplies, flammable products, poisonous, toxic, hazardous and materials are labeled and stored in locked area out of children's reach. Bio-contaminants are disposed of properly. A(5)(c) (e), A(8); E(1),(4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Electrical outlets are securely covered A(11)(c)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Sink area has running water A(12)(d)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Soap and disposable towels available at sink A(12)(i)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Furniture, toys & equipment are clean and in good repair C(1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Furniture, toys & equipment meets the CPSC standards C(2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Healthy animals, not permitted if allergic E(4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Other environmental allergies (Policy #120)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

PLAYGROUND	C	N	N/A
Playground equip. safe & firmly anchored B(7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Adequate cushioning material; at least 6ft fall zone B(9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Fencing/safety barriers 4ft. in height, in good repair B(4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Outdoor space free from hazards and litter B(2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

RESTING

	C	N	N/A
Play Pens observed C(4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Cribs meet federal standards (reviewed certificate) D(1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Cots, mats, cribs labeled or charted for each child D(2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

PROGRAM 114-506

	C	N	N/A
Written, planned, daily program of activities that is developmentally & age appropriate observed A(1-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Positive, non-abusive discipline practice B(1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

MEAL REQUIREMENTS 114-508

	C	N	N/A
Meals & snacks in compliance with USDA A(1)(b)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Clean, wholesome, unspoiled, properly labeled food A(4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Food preparers have proper hair restraints B(5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Refrigerators have thermometers, temp under 45°F D(2-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Prevention and response to food allergies A(9-10)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

	C	N	N/A
Round, firm foods are not offered to children under 4 yrs. old, unless properly cut to prevent choking risk A(3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Food stored & handled properly D(1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
All cleaning & poisonous items stored away from food D(8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

INFANT CARE 114-509

	C	N	N/A
Infants are placed on their back to sleep A(5)(a)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
No bottles propped or given in cribs or on mats A(3)(c)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Food for toddlers cut in pieces ½ inch or less A(3)(k)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Food for infants cut in pieces ¼ inch or less A(3)(j)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Crock pots, bottle warmers, are inaccessible to children, No microwaving of beverages observed A(3)(d)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Cups and bottles labeled with child's name & used only by that child A(3)(a)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

TRANSPORTATION 114-505 I

	C	N	N/A
Vehicle has proper safety restraints & in good repair I(1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Checklist for loading/unloading children reviewed (2)(d)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Driver's (valid) driver's license reviewed (1)(f)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

C-Compliant with Regulation
N-Noncompliant with Regulation
Violations noted at the time of visit ☐ Yes ☐ No
Any violations corrected onsite ☐ Yes ☐ No DSS Form 2910 needed ☒ Yes ☐ No

Signature of Director/Operator/Designee: _____

Date: 6/19/25 ☐ Refused to sign.

Signature of Child Care Licensing Specialist: _____

Date: 6/19/25

Division of Early Care and Education**Deficiency Correction**NAME OF PROVIDER/OPERATOR Kids Paradise CDCPERMIT # 23772

Deficiency Cited	Corrective Action Needed	Expected Date of Correction
In the infant and toddler classes, food was served to the children and not cut in appropriate size pieces.	Ensure all food served is cut ¼ inch or less for infants and ½ inch or less for toddlers.	6/19/25
Round firm foods were served to children under 4 years old.	Ensure round firm foods are not offered to children younger than 4 years old.	6/19/25

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

Licensing Specialist Jina Vazquez Date 6/19/25