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

Building 2:

acility Name: Sea Island Sproute TLC		

Permit #: 26271

Address: 802 15th St PORT ROYAL, SC 29935

Date of Inspection: 1 Time of Inspection: _13:45 Type of Inspection:

Annual Complaint ☐ Follow Up (Original Inspection Date: / / Reason for Follow up: □ Pending Deficiencies □ Self-Reported Incident

Telephone #: 845-551-5734 Any changes in contact info (Phone/Email/Fax)? Yes ONO Center Director/Designee: Alexandra Nicole Schofield

Building 1: __ Vaximum number of children: 86

Building 3:

Infants are in designated rooms?

Yes

No

N/A Does facility transport children?

Yes No N/A

lours of Operation: M- 7:00AM- 5:30PM T- 7:00AM- 5:30PM W- 7:00Al	M- 5:30	OPM 1	Γh- 7:00.	AM- 5:30PM F- 7:00AM- 5:30PM			
MANAGEMENT, ADMINISTRATION & STAFFING 114-503	C	N	N/A	SUPERVISION 114-504	С	N	N/A
Staff files are in compliance H(1-7)		or.		Adequate supervision throughout facility A(1-2)	Ď	-58	D
Training hours up-to-date K(5)(b-c)			X	Facility following tracking of children procedures A(3)	₽	₽.	
At least 1 person with CPR & 1 St Aid on the premises K(5)(h)	علام			Ratios adequate in all classrooms and on playground B, C	<u> </u>	1	
NA 1-AND MEA	LTH,	SANI	`	& SAFETY 114-505	TO RES		SUNE
	C	N	N/A	THE INVESTIGATION OF THE PARTY	С	N	N/A
Children's faces/hands are clean B(1)				Proper diaper changing practices were observed F(1-16)			V
Medicine and harmful items labeled and stored properly D(2)	100		D	Proper handwashing practices were observed G(4)	0	0	8
First Aid kit in facility and in vehicle if transport E(1), I(1)(g)	d		0	No smoking/consumption of alcoholic beverage A(3)		0	4
Current Emergency Preparedness Plan H(3)	6	1		Emergency Medical Plan C(1)	D	0	5
PHYSICA	AL SIT	E 114	-507		()BWW	2016	MEL
BUILDING	С	N	N/A	PLAYGROUND	С	N	N/A
Ventilation and lighting & sufficient A(2)(a-d), (4)	K			Playground equip. safe & firmly anchored B(7)	K	0	
No strangulation/choking/suffocation hazards A(5)(g)	104			Adequate cushioning material; at least 6ft fall zone B(9)	DK.	0	0
Ceiling, floors, windows, doors free from hazards A(5)(d)	12		D	Fencing/safety barriers 4ft. in height, in good repair B(4)		*	0
Building(s) temp between 68-80°F A(7) If no, close in 4 hrs.	1		0	Outdoor space free from hazards and litter B(2)	-K	Ů	0
Facility free from pest problems (Insects, rodents) A(8)(b-c)	10/			RESTING	C	N	N/A
All potentially harmful items including cleaning supplies, flammable				Play Pens observed C(4)			-3
products, poisonous, toxic, hazardous and materials are labeled and	1						B
stored in locked area out of children's reach. Bio-contaminants are							
disposed of properly. A(5)(c) (e), A(8); E(1),(4)	1	 _ 			+		
Electrical outlets are securely covered A(11)(c)	CO.	+		Cribs meet federal standards (reviewed certificate) D(1)			又
Sink area has running water A(12)(d)	14			Cots, mats, cribs labeled or charted for each child D(2)	<u> </u>	-	0
Soap and disposable towels available at sink A(12)(i)	1			PROGRAM 114-506	С	N	N/A
Furniture, toys & equipment are clean and in good repair C(1)	d		0	Written, planned, daily program of activities that is	4		
Furniture, toys & equipment meets the CPSC standards C(2)	X			developmentally & age appropriate observed A(1-3)			
Healthy animals, not permitted if allergic E(4)			08	Positive, non-abusive discipline practice B(1)	4	0	0
Other environmental allergies (Policy #120)	×	0			0	D	O
MEAL REQ		_		08			
	С	N	N/A		C	N	N/A
Meals & snacks in compliance with USDA A(1)(b)	1	Q.		Round, firm foods are not offered to children under 4 yrs. old,		- C	
Clean, wholesome, unspoiled, properly labeled food A(4) Food preparers have proper hair restraints B(5)	2	0		unless properly cut to prevent choking risk A(3) Food stored & handled properly D(1)			0
Refrigerators have thermometers, temp under 45°F D(2-3)	2		<u>-</u>	All cleaning & poisonous items stored away from food D(8)	45		0
Prevention and response to food allergies A(9-10)	2	†		Air cleaning a poisonous items stored away iron lood b(e)	- Co-		0
INFANT CARE 114-509				TRANSPORTATION 114-505 I			EVEN.
	С	N	N/A		С	N	N/A
Infants are placed on their back to sleep A(5)(a)			1	Vehicle has proper safety restraints & in good repair I(1)			Q
No bottles propped or given in cribs or on mats A(3)(c)			2	Checklist for loading/unloading children reviewed (2)(d)	i i		R
Food for toddlers cut in pieces 1/2 inch or less A(3)(k)	0	0	RZ.	Driver's (valid) driver's license reviewed (1)(f)		0	9
Food for infants cut in pieces ¼ inch or less A(3)(j)	0		4				
Crock pots, bottle warmers, are inaccessible to children, No microwaving of beverages observed A(3)(d)	0	0	201	C-Compilant with Regulation N-Noncompliant with Regulation			
Cups and bottles labeled with child's name & used only by that child	-		of	Violations noted at the time of visit Yes □ No			
A(3)(a)	T.	Γ_{Γ}		Any violations corrected onsite a Yes No DSS Form 2910 n	eeded	Yes	□ No
Signature of Director/Operator/Designee:				Date: Refused to sig	n.		
Signature of Child Care Licensing Specialist:	<u>بر</u>	>		Date: 917125			

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

NAME OF PROVIDER/OPERATOR Sea Island Sprouts, LLC

PERMIT # 26271

Deficiency Cited	Corrective Action Needed	Expected Date of Correction	
3 unauthorized caregivers- no SLED/FBI results	caregivers will not return to center until background checks clear	09/17/25	
1 unauthorized caregivers- no Central registry checks	caregivers will not return to center until background checks clear	9/17/25	
1 classroom out of ratio	only authorized & qualified caregivers are to care for children	9/17/25	
Tracking was not properly implemented	children will be tracked as they enter, exit & move throughout facility	9/17/25	
2 signed center/discipline policies need to be signed.	caregivers will sign the required form	9/17/25	
1 medical assessment	caregiver will complete the required form	9/17/25	

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

Licensing Specialist

Data

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

NAME OF PROVIDER/OPERATOR Sea Island Sprouts, LLC PERMIT # 26271

Deficiency Cited	Corrective Action Needed	Expected Date of Correction	
1 unqualifed caregiver- no verification of education	caregiver will not return until providing verification of education	9/17/25	
V			

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

Licensing Specialist	thea SA.	Date 10/2/35	