

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

Facility Name: Forest Hills Preschool & After Care
Permit #: 23554
Address: 628 Hiers Corner Road Waterboro, SC 29488

Telephone #: 843-549-1891
Center Director/Designer: Violet Bellinger
Change in Ownership or Director? Yes No If yes, Name: _____

Maximum number of children: 51
Maximum number of infants: 9
Beds posted in public view: License Menu Ratio Chart (All classrooms)
ABC Quality Yes
Head Start Yes No Public Schools Yes No
Hours of Operation: M- 7:00AM- 8:00PM T- 7:00AM- 8:00PM W- 7:00AM- 8:00PM Th- 7:00AM- 8:00PM F- 7:00AM- 8:00PM

Date of inspection: 7/23/25
Time of inspection: 11:40/12:05
Type of inspection: Annual Complaint
 Follow Up (Original inspection)
Date: 3/14/25
Reason for Follow up:
 Pending Deficiencies
 Self-Reported Incident

Any changes in contact info (Phone/Email/Fax)? Yes No

Building 1: 24 months 30 months 1-4 facility
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

| | C | N | N/A | | C | N | N/A |
|---|-------------------------------------|-------------------------------------|--------------------------|---|-------------------------------------|--------------------------|-------------------------------------|
| Staff files are in compliance H(1-7) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Adequate supervision throughout facility A(1-3) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Training hours up-to-date K(2)(b-c) | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Facility following tracking of children procedures A(3) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| At least 1 person with CPR & 1st Aid on the premises K(3)(b) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Ratio adequate in all classrooms and on playground B, C | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Children's fingerprints are clean B(1) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper diaper changing practices were observed F(1-16) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Medicine and harmful items labeled and stored properly B(2) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper handwashing practices were observed B(4) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| First Aid kit in facility and in vehicle if transport B(1), H(1)(b) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | No smoking/consumption of alcoholic beverage A(3) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Current Emergency Preparedness Plan H(3) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Emergency Medical Plan C(1) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| BUILDINGS | | | | PLAYGROUND | | | |
|---|-------------------------------------|--------------------------|--------------------------|---|-------------------------------------|--------------------------|-------------------------------------|
| | C | N | N/A | | C | N | N/A |
| Ventilation and lighting & sufficient A(2)(a-d), (4) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Playground equip. safe & firmly anchored B(7) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| No structural or electrical location hazards A(3)(a) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Adequate cushioning material, at least 6R fall zone B(8) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Celling, floors, windows, doors free from hazards A(3)(d) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Fencing/safety barriers 4R in height, in good repair B(4) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Building(s) temp between 69-80°F A(7) if no, close in 4 hrs. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Outdoor space free from hazards and litter B(2) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Facility free from pest problems (insects, rodents) A(3)(b-c) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | RESTING | C | N | N/A |
| 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(8) c1 & d; A(9); B(1)(4) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Play Pens observed C(4) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Electrical outlets are properly covered A(1)(e) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Cribs meet federal standards (reviewed certificate) B(1) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Sink area has running water A(12)(d) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Cots, mats, cribs labeled or charted for each child D(2) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Soap and disposable towels available at sink A(12)(b) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | PROGRAM 114-203 | C | N | N/A |
| Toilets, toys & equipment are clean and in good repair C(1) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Written, planned, daily program of activities that is developmentally & age appropriate observed A(1-3) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Furniture, toys & equipment meets the CPSC standards C(2) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Positive, non-abusive discipline practice B(1) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Healthy animals, not permitted if allergic E(4) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other environmental allergies (Policy #123) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | C | N | N/A | | C | N | N/A |
|--|-------------------------------------|--------------------------|--------------------------|--|-------------------------------------|--------------------------|--------------------------|
| Labels & packs in compliance with USDA A(1)(b) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Round, firm foods are not offered to children under 4 yrs. old, unless properly cut to prevent choking risk A(9) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Meats, whole/pieces, wrapped, properly labeled food A(4) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Food stored & handled properly D(1) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Food preparers have proper hair restraints B(5) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | All cleaning & poisonous items stored away from food D(6) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Refrigerators have thermometers, temp under 40°F D(3-4) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Reaction and response to food allergies AB-4(b) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | C | N | N/A | | C | N | N/A |
|---|--------------------------|--------------------------|-------------------------------------|---|--------------------------|--------------------------|-------------------------------------|
| Strollers are stored on their back to sleep A(3)(a) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Vehicle has proper safety restraints & in good repair E(1) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2 bottles propped or given in cribs or on mats A(3)(e) | <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"/> |
| Food for toddlers cut in pieces 1/2 inch or less A(3)(d) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Driver's (valid) driver's license reviewed (1)(g) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Food for infants cut in pieces 1/2 inch or less A(3)(c) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Hook pots, bottle warmers, are inaccessible to children, No consuming of beverages observed A(3)(d) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | C-Compliant with Regulation N-Noncompliant with Regulation | | | |
| Up and bottles labeled with child's name & used only by that child B(2) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Violations noted at the time of visit <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | |

Signature of Director/Operator/Designer: V. Bellinger Date: 7-23-25
Signature of Child Care Licensing Specialist: M. Rice Date: 7/23/25
Any violations corrected onsite? Yes No
DSS Form 2810 needed? Yes No
 Refused to sign.

Division of Early Care and Education

Deficiency Correction

NAME OF PROVIDER/OPERATOR Forest Hills Preschool and Aftercare

PERMIT # 23554

| Deficiency Cited | Corrective Action Needed | Expected Date of Correction |
|--|---|-----------------------------|
| Caregiver missing 2 hours of training for 2024 | Director will make staff get the required training. | 30 days |
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Providers/Operators are required by regulations and statutes to be in compliance at all time.

Licensing Specialist Marilyn Price Date 7/30/25