South Carolina Department of Social Services Office of Child Care Licensing

INSPECTION VISIT FORM FOR REGISTERED FAITH BASED CHILD CARE CENTERS Facility Name: Dillon Christian Preschool and Child Care Contex							
Facility Name: Dillon Christian Preschool and Child Care Center Permit #: 902 Type of Inspection: Annual Complaint Follow Up (original inspection date)							
Telephone #: 843-774-0890 Any changes in contest into (Pk - 4/5 - 14/5 -							
Center Director/Designee: Marie Wolfe Any changes in contact into (Phone/Email/Fax)? Yes Vano Overnight Care? Yes Vano Overnight Care? Yes Vano							
Maria I Callet 1-2							
Maximum number of infants: 36							
Items posted in public view: Registration Menu Ratio Chart (All classroom) Does facility transport children? Yes No							
MANAGEMENT 114-523				APPLICATION OF STAFF: CHILD RATIOS 114-524	0 100		0.00
Staff files are in compliance F(1-4)	C	N	N/A		C	N	N/A
Are training hours up-to-date? F(3)(a-b)	VZ			Adequate supervision throughout the facility A(1) (a-b)	Ver		
At least 1 person with CPR & 1 St Aid on the premises H(5)(f)	W			Facility following tracking of children procedures A(2)	1,0	-	_
	0			Ratios adequate in all classrooms and on playground B & C	VZ	-	-
HEAL				l & SAFETY 114-525			
Children's faces/hands are clean B(1)		N	N/A		C	IN	N/A
	VE			Proper diaper diapering practices were observed F(1-16)			
Medicine & harmful items labeled and stored properly D(2)	M			Proper handwashing practices were observed G(4)			12
First Aid kit in facility and in vehicle if transport E(1), I(1)(g)	4			Smoking permitted only in designated area A(3)			8
PHYSICAL SITE 114-527							
	C	N	N/A		IC	l NI	LALIA
BUILDING		7		PLAYGROUND	C	N	N/A
Ventilation and lighting sufficient A(2)(a-d),(4)(a-c)	0			Outdoor space free of glass, paper & other litter B(2)			
Ceiling, floors, windows, doors free from hazards A(5)(d)	2			Fencing/safety barriers 4ft in height, in good repair B(4)	18.	0	
No strangulation/choking/suffocation hazards A(5)(g)(i-iii)	12			Playground equipment safe & firmly anchored C (6)	V3		
Building(s) temp between 68-80 °F A(7)	R			Adequate cushioning material; at least 6ft. fall zone C(8)	VD'	-	
Facility free from pest problems (Insects, rodents)A(8)(b-c)	Va			RESTING	C	N	N/A
Garbage kept properly in plastic lined receptacles A(8)(d-i)	W			Cribs meet federal standards (reviewed certificate) D(1)	V		
Electrical outlets are securely covered A(11)(c) Sink area has hot & cold water A(12)(d)	VET	ם		Cots, beds, mats, & cribs labeled for each child D(2)	W C	- 0	0
Soap and towels in restrooms A(12)(i)	10			Pack & plays not used for sleeping D(1-2)			9
Furniture, toys & equipment are clean and in good repair C(1)	V			TRANSPORTATION 114-525 I			
Furniture, toys & equipment and clean and in good repair C(1)	100			Vehicle has proper safety restraints and in good repair I(1)			
	A-CAILL			Checklist for loading/unloading children reviewed. I(2)(d)			0
MEAL REQUIREMENTS 114-528 C N N/A							
Meals and snacks in compliance with USDA A(1)(b)				Down firm for the state of the	C	N	N/A
Clean, wholesome, unspoiled properly labeled food A(4)	W.			Round, firm foods are not given to children under 4y/o,			
Food preparers have proper hair restraints B(5)	8			unless properly cut to prevent choking risk. A(3)	0		
Refrigerators have thermometers(Temp under 45°F)D(2-3)	N			Food labeled, stored and handled properly D(1)	8		
The state of the s			114-5	Cleaning & poisonous items stored away from food D(8)	0		
	IKI O	A111-	UULFCZ	3			Contract of the Contract of th
Cups and bottles labeled with child's name & used only by that of	child A	(1)(2	a)		C	N	N/A
No bottles propped or given in cribs or on mats A(1)(c)					W		
Breast milk is not heated in the microwave. If microwave is used to heat formula/beverages, parents are notified in writing A(1)(d)							
rood for toddiers cut in pieces ½ inch or less. A(1)(k)							
Food for infants cut in pieces ¼ inch or less, A(1)(i)							
Infants are placed on their backs to sleep, unless Doctor's note is provided. A(3)(a)							
C = Compliant with Regulation - N = Noncompliant with Regulation No violations noted at the time of visit							
Signature of Director/Operator/Designee: Ward J. Curve Date: U 3 1							
Signature of Director/Operator/Designee: WWW J. Curve Date: U.3.1 Date:							