

South Carolina Department of Social Services
 ABC Quality Rating and Improvement System
TECHNICAL ASSISTANCE INSPECTION VISIT FOR LICENSED-EXEMPT CENTERS

Facility CC# _____ Quality Assessor: _____

Facility Name: _____ Date of Inspection: _____ Time of Inspection: _____

Facility Address (Street, City, Zip Code): _____

Type of Inspection (Annual, Complaint/Follow-up): _____ Date of Inspection: _____

Telephone Number: _____ Facility Director/Contact: _____ Hours of Operation: _____

Days of Week Open: _____ Maximum # of children enrolled: _____ # of children observed: _____

ABC Quality License-Exempt			
C=Compliant with requirement, N=Noncompliant with requirement, N/A non-applicable			
Staff	C	N	N/A
Training hours current:	C	N	N/A
Directors-20 hours annually (1 bloodborne & 2 health & safety)			
Teachers-15 hours annually (1 bloodborne & 2 health & safety)			
History of Compliance			
Ratio: (teacher: child)	C	N	N/A
(5 years, 1:20), (6-12 years, 1:23)			
Supervision:	C	N	N/A
2 staff on premises at all times (1 staff the director)			
Children supervised at all times			
Tracking			
Transportation of children:	C	N	N/A
Appropriate constraint of children during transport			
Tracking			
Valid driver's license reviewed			
Environmental Hazards Indoor Space:	C	N	N/A
Facility free of hazards and litter			
Facility temperature 68-80 degrees			
Facility free of insect, rodents & other vermin			
Soap & paper towels at each sink			
All cleaning supplies/poisonous chemicals stored away from food & inaccessible to children			
Furniture, toys & equipment are clean, good repair & meet Consumer Safety Product Council (CPSC)			
Animals are healthy, do not cause threat, are clean, properly housed, fed & cared for			
Usable fire extinguishers & smoke alarms			
Environmental Hazards Outdoor Space:	C	N	N/A
Playground area and playground equipment maintained and safe			
Cushioning material in fall zones			
Children restricted from unsafe areas			
Swimming on/off premises follows safety precautions (supervision, ratio, fencing, & certified lifeguards)			
Meal Requirements:	C	N	N/A
USDA Compliance			
Food properly stored, labeled & dated			
Refrigerators with thermometers, temperature 45 degrees			
Hair restraints worn			
Clean food prep and service areas			
Sanitized food prep and service areas			
Serious injury and/or death of child	YES	NO	N/A
Incident occurred during previous program year (Oct 1 - Sept. 30)			

Signature of Director/Operator/Designee: _____ Date: _____