

South Carolina Department of Social Services
 ABC Quality Rating and Improvement System
HEALTH & SAFETY INSPECTION VISIT FOR LICENSED-EXEMPT CENTERS

Facility CC#: 046788

Quality Assessor: Erin Perry

Facility Name: Shekinah Glory Vision Center Date of Inspection: 9.12.22 Time of Inspection: 2:00 PM

Facility Address (Street, City, Zip Code): 305 Gapway Street, Mullins, 29574

Type of Inspection (Annual, Complaint/Follow-up): Annual/Enrollment Date of Inspection: 9.12.22

Telephone Number: 843-561-3037 Facility Director/Contact: Mary Campbell Hours of Operation: 2:45PM-6:00PM

Days of Week Open: M-F Maximum # of children enrolled: 4 # of children observed: 3

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

Signature of Director/Operator/Designee: Mary Campbell Date: 9.12.22