

**SOUTH CAROLINA DEPARTMENT OF SOCIAL SERVICES
CHILD CARE LICENSING ORIGINAL & RENEWAL INSPECTION CHECKLIST**

Type of Inspection: Provisional Evaluation Full Evaluation Renewal

Center Name: The House of Smiles
 License/APP ID #: CC020141 Licensed Registered
 Address: 210 Carolina Avenue, Moncks Corner, SC 29461
 Telephone #: 843-860-1173
 Director/Designee: Roslind Mann
 Change in Ownership or Director? Yes No If yes, Name: _____
 Total Capacity: 35
 Maximum number of infants: 0
 Date of Inspection: 3/16/23 Time of Inspection: 11:04AM
 Center Faith Based GCCH CDEP
 Hours of Operation: _____
 Any changes in contact info (Phone/Email/Fax)? Yes No
 Overnight Care? Yes No
 Building 1: Building 2: _____ Building 3: _____
 24 months 30 months I-4 facility Clear Fire Report Yes No NA Date cleared _____

Physical Site	CENTER	FAITH BASED	GCCH	C	N	N/A
The Approval/ License/ Registration is displayed in public view.	114-503 A.1	114-523 A.1	114-513 A.1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Daily menu dated and posted in conspicuous location in public view.	114-508 A.1	114-528 A.1	114-518 A.1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Building has proper ventilation to include kitchen and bathrooms.	114-507 A.2	114-527 A.2	114-517 A.2	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Tobacco free facility	114-505 A.3	114-525 A.2	114-517 A.2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Decals on all glass doors, placed at eye level of children.	114-507 A.3	114-527 A.3	114-517 A.3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adequate lighting for rooms, hallway, bathrooms and fire escapes.	114-507 A.4	114-527 A.4	114-517 A.4(a)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ceiling, floors, windows, doors and rugs properly secured.	114-507 A.5(d)	114-527 A.5(d)	114-517 A.5(d)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No strangulation, choking or suffocation hazards.	114-507 A.5(g)	114-527 A.5(g)	114-517 A.5(h)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electrical outlets securely covered and inaccessible to children.	114-507 A.11(c)	114-527 A.11(c)	114-517 A.11(c)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Temperature in building between 68 and 80 degrees °F.	114-507 A.7(a)	114-527 A.7	114-517 A.7(a)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Facility has hot and cold water.	114-507 A.6(b)	114-527 A.6(b)	114-517 A.6(b)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trash in restroom and classroom kept in plastic lined container.	114-507A.8(f)	114-527 A.8(f)	114-517 A.8(f)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Facility free from pest problems (insects, rodents, etc.).	114-507 A.8(b)	114-527 A.8(b)	114-517 A.8(b)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Furniture, toys & equipment are clean and free from hazards.	114-507 C.1	114-527 C.1	114-517 C.1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Furniture, toys & equipment meet standards of the CPSC.	114-507 C.2	114-527 C.2	114-517 C.2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bathroom completely enclosed. Private toilet use by preschool & up.	114-507 A.12	114-527 A.12		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child size toilets & sinks (has seat adapter and sturdy steps).	114-507 A.12(e)	114-527 A.12(e)	114-517 A.12(e)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Soap and disposable towels provided at each sink.	114-507 A.12(i)	114-527 A.12(i)	114-517 A.12(g)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cots or mats labeled with child's name for use only by that child.	114-507 D.2	114-527 D.2	114-517 D.2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cots and mats stored so that the side child lies on does not touch floor.	114-507 D.6	114-527 D.6	114-517 D.6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Poisons/harmful agents locked, labeled and stored properly.	114-507 E.1	114-527 E.1	114-517 E.1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Only healthy pets/animals permitted. (Vaccination records up-to-date)	114-507 E.4	114-527 E.4	114-517 E.4	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Ratio chart prominently posted in each classroom.	114-504 B.1	114-524 B.1		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency phone numbers posted (police, fire and poison control).	114-503 J.2	114-523 G.2	114-513 J.2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Internal means of communication among staff.	114-503 J.3			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parents have free & full access.	114-503 F.1		114-513 F.1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If overnight care is provided, requirements have been met.	114-509 C	114-529 C	114-519 C	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Age appropriate radio, TV, VCR and DVD for children use.	114-506 A.7		114-516 A.7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Staff files are in compliance to include required training hours.	114-503 F(1-4)	114-523 H.(1-7)	114-513 H(1-7)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

C = Compliant with Regulation, N = Noncompliant with Regulation, N/A = Not Applicable

No violations noted at time of visit.

Signature of Director/Operator/Designee: [Signature] Date 3/16/23 Refused to Sign
 Signature of Child Care Licensing Specialist: [Signature] Date 3/16/23

Division of Early Care and Education**Deficiency Correction**NAME OF PROVIDER/OPERATOR The House of SmilesPERMIT # 21085

Deficiency Cited	Corrective Action Needed	Expected Date of Correction
Vents in the bathroom were filed with dust particles	Vents need to be cleaned	3/16/2020
Caregiver does not have TB test	schedule appointment for doctor visit.	3/20/2023
Caregiver does not have health assessment	schedule appointment for doctor visit.	3/16/2023
Training hours are missing for caregivers and directors	Training needs to be completed	4/16/2023
Children files are missing: immunizations, DSS 2900, and signed policies from parents	schedule appointment for doctor visit and get parents to sign documents from facility	3/20/2023

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

Licensing Specialist

Cherell W. Hester

Date

3/21/23