South Carolina Department of Social Services Office of Child Care Licensing

INSPECTION VISIT FORM FOR LICENSED CENTERS

| acility Name: The Playpen Child Care Center ermit #: 25472 Type of Inspection: Annual Annua | ual -c | | | Inspection: 14 May 23 Time of Inspection: 093 **The Expection of the Inspection of |] |) | |
|--|-------------|---------|----------|---|---------------|----------|-----|
| ddress: 1256 Old Gilliard Road Unit 1, RIDGEVILLE, SC 2947 elephone #: 843-530-0817 enter Director/Designee: Andrea Black nange in Ownership or Director? Yes No If yes, Name: | | ict inf | o (Pho | Hours of Operation: Single Shift ne/Email/Fax)? Yes Vo Overnight Care? | | | • |
| aximum number of children: 17 | _ | | Buil | ding 2: Building 3: □ | CDE | Р | |
| aximum number of infants: 7 | -3 0 | mont | hs 🗆 I- | 4 facility Infants are in designated rooms?□ Yes □ | Noz | | l . |
| ems posted in public view: DeLicense Menu Ratio Ch | nart (| All cl | assroo | ms) Does facility transport children? 🗆 Yes 🖼 🗷 🖯 🛭 🗸 | Α | | |
| MANAGEMENT, ADMINISTRATION & STAFFING 114-503 | | | | SUPERVISION 114-50-4 | | | |
| WANAGEWENT, ADMINISTRATION & STAFFING 114-303 | С | N | N/A | 30FERVISION 114-30-4 | С | Ŋ | N/A |
| Staff files are in compliance H(1-7) | | 7 | | Adequate supervision throughout facility A(1-2) | 6 | | 100 |
| Training hours up-to-date K(5)(b-c) | | 0 | 0 | Facility following tracking of children procedures A(3) | | <i>-</i> | - |
| At least 1 person with CPR & 1st Aid on the premises K(5)(h) | 16 | | | Ratios adequate in all classrooms and on playground B, C | $\overline{}$ | 10 | |
| HEALT | H, SA | ANIT | ATION | & SAFETY 114-505 | | | |
| | С | N | N/A | | С | N | N/A |
| Children's faces/hands are clean B(1) | Ø | | | Proper diaper changing practices were observed F(1-16) | 0 | | 6 |
| Medicine and harmful items labeled and stored properly D(2) | | 0 | 4 | Proper handwashing practices were observed G(4) | 0 | 0 | R |
| First Aid kit in facility and in vehicle if transport E(1), I(1)(g) | 19/ | 0 | | No smoking/consumption of alcoholic beverage A(3) | D | 0 | D |
| | | _ | TE 114 | | | | |
| BUILDING | C | N | N/A | PLAYGROUND | С | N | N/A |
| Ventilation and lighting & sufficient A(2)(a-d), (4)(a-c) | 2 | 1- | | Playground equip. safe & firmly anchored B(7) | Ø | | 0 |
| No strangulation/choking/suffocation hazards A(5)(g)(i-iii) | 0 | 1 - | | Adequate cushioning material; at least 6ft fall zone B(9) | | 0 | 0 |
| Ceiling, floors, windows, doors free from hazards A(5)(d) | 100 | 1- | | Fencing/safety barriers 4ft. in height, in good repair B(4) | 0/ | | |
| Building(s) temp between 68-80°F A(7) If no, close in 4 hrs. | 1 | 7 | | Outdoor space free from hazards and litter B(2) | <u> </u> | | |
| Facility free from pest problems (Insects, rodents) A(8)(b-c) | 19 | | | RESTING | C | N | N/A |
| Garbage kept properly in plastic lined receptacles A(8) (d-i) | | _ | | Play Pens observed C(4) | | | - |
| Electrical outlets are securely covered A(11)(c) | K | 4 | | Cribs meet federal standards (reviewed certificate) D(1) | _ | | 8 |
| Sink area has running water A(12)(d) | | | | Cots, mats, cribs labeled or charted for each child D(2) | C | | _ |
| Soap and disposable towels available at sink A(12)(i) | b/ | | | PROGRAM 114-506 Written, planned, daily program of activities that is | 쒸 | N | N/A |
| Furniture, toys & equipment are clean and in good repair C(1) Furniture, toys & equipment meets the CPSC standards C(2) | V | * | | developmentally & age appropriate observed A(1-3) | - □ ✓ | ا مر | 0 |
| Healthy pets/animals (Vaccination record up-to-date) E(4) | | ╁ | | Positive, non-abusive discipline practice B(1) | ₩ | | |
| | _ | _ | | S 114-508 | | ŭ, | |
| | С | N | N/A | | С | N | N/A |
| Meals & snacks in compliance with USDA A(1)(b) | | 0 | 6 | Round, firm foods are not offered to children under 4 | 0 | | 10 |
| Clean, wholesome, unspoiled, properly labeled food A(4) | | | 9./ | yrs. Old, unless properly cut to prevent choking risk A(3) | | <i>-</i> | 0 |
| Food preparers have proper hair restraints B(5) | 0 | | 0 | Food stored & handled properly D(1) | 4 | | |
| Refrigerators have thermometers, temp under 45°F D(2-3) | | | 9/ | All cleaning & poisonous items stored away from food D | | 0 | |
| INFANT CARE 114-509 | | | | TRANSPORTATION 114-505 I | | | |
| A Company of the Comp | С | N | N/A | | С | N | N/A |
| Infants are placed on their back to sleep A(5)(a) | - | - | <u> </u> | Vehicle has proper safety restraints & in good repair I(1) | 믜 | <u> </u> | 8 |
| No bottles propped or given in cribs or on mats A(3)(c) | - | | 0/ | Checklist for loading/unloading children reviewed (2)(d) | 0 | | |
| Food for toddlers cut in pieces ½ inch or less A(3)(k) | - | - | 0 | Driver's (valid) driver's license reviewed (1)(f) | | | d_ |
| Food for infants cut in pieces ¼ inch or less A(3)(j) | - | | | C-Compliant with Regulation | | | |
| Crock pots, bottle warmers, are inaccessible to children, No microwaving of beverages observed A(3)(d) | D | 0 | 9 | N-Noncompliant with Regulation | | 8 1 | |
| Cups and bottles labeled with child's name & used only by that child A(3)(a) | 0 | | 4 | No violations noted at the time of visit □ | | | |
| | | | | | | | |
| Signature of Director/Operator/Designee: | 2 | P | SPON | Date: 3/14/23 Refused to | sign | | |

Signature of Child Care Licensing Specialist:

| | 1 | | 1 | |
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<u>Division of Early Care and Education</u> <u>Deficiency Correction</u>

NAME OF PROVIDER/OPERATOR The Playpen Child Care Center PERMIT # 25472

| Deficiency Cited | Corrective Action Needed | Expected Date of Correction |
|--|---|-----------------------------|
| Two staff at the center missing cleared fingerprints and Central Registries. | These staff will not be at the facility until background checks are cleared. | 3/28/2023 |
| Two staff at the center missing degree to show qualification. | Director will collect education verifications from staff before their return. | 3/28/2023 |
| Two staff at the center missing 2901 Medical Statements. | Director will collect form 2901 from staff before their return. | 3/28/2023 |
| Two staff at the center missing TB test verification. | Director will collect TB verification from staff before their return. | 3/28/2023 |
| Two staff at the center missing agreement to all facility policies. | Director will collect policy agreement signatures from staff before their return. | 3/28/2023 |
| One staff member missing 2926 Health Assessment. | Director will collect form 2926 from staff before their return. | 3/28/2023 |

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

Licensing Specialist Date 3/23/23