

INSPECTION VISIT FORM FOR LICENSED CENTERS

Facility Name: Kids Garden  
 Permit #: 25708

Address: 1244 Central Ave Suite B, SUMMERVILLE, SC 29483  
 Telephone #: 843-641-8255

Center Director/Designee: \_\_\_\_\_  
 Name: \_\_\_\_\_

Maximum number of children: 8  
 Maximum number of infants: 40  
 License:  License  Menu  Ratio Chart (All classrooms)  Does facility transport children?  Yes  No  N/A

MANAGEMENT, ADMINISTRATION & STAFFING 114-503

|                                     |                                     |                                     |                                     |                                     |  |
|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--|
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Staff files are in compliance H(1-7)                         |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Training hours up-to-date K(5)(b-c)                          |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | At least 1 person with CPR & 1st Aid on the premises K(5)(h) |

HEALTH, SANITATION & SAFETY 114-505

|                                     |                                     |                                     |                                     |                                     |   |
|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---|
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Children's faces/hands are clean B(1)                               |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Medicine and harmful items labeled and stored properly D(2)         |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | First Aid kit in facility and in vehicle if transport E(1), I(1)(g) |

PHYSICAL SITE 114-507

|                                     |                                     |                                     |                                     |                                     |   |
|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---|
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Resting   |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Play Pens observed C(4)                                 |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Crbs meet federal standards (reviewed certificate) D(1) |

PLAYGROUND

|                                     |                                     |                                     |                                     |                                     |   |
|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---|
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Playground equip. safe & firmly anchored B(7)               |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Adequate cushioning material; at least 6ft fall zone B(9)   |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Fencing/safety barriers 4ft. in height, in good repair B(4) |

RESTING

|                                     |                                     |                                     |                                     |                                     |   |
|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---|
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Outdoor space free from hazards and litter B(2)   |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Written, planned, daily program of activities that is developmentally & age appropriate observed A(1-3) |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Positive, non-abusive discipline practice B(1)  |

MEAL REQUIREMENTS 114-508

|                                     |                                     |                                     |                                     |                                     |  |
|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--|
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Meals & snacks in compliance with USDA A(1)(b)         |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Clean, wholesome, unspiced, properly labeled food A(4) |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Food preparers have proper hair restraints B(5)        |

INFANT CARE 114-509

|                                     |                                     |                                     |                                     |                                     |   |
|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---|
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Refrigerators have thermometers, temp under 45°F D(2-3) |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Food stored & handled properly D(1)                     |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | All cleaning & poisonous items stored away from food D  |

TRANSPORTATION 114-505 I

|                                     |                                     |                                     |                                     |                                     |  |
|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--|
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Infants are placed on their back to sleep A(5)(a)          |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Vehicle has proper safety restraints & in good repair I(1) |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Checklist for loading/unloading children reviewed (2)(d)   |

|                                     |                                     |                                     |                                     |                                     |  |
|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--|
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Food for toddlers cut in pieces 1/2 inch or less A(3)(c) |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Food for infants cut in pieces 1/4 inch or less A(3)(j)  |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Food for infants cut in pieces 1/2 inch or less A(3)(k)  |

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Signature of Director/Operator/Designer: [Signature] Date: 7/24/23  
 Signature of Child Care Licensing Specialist: [Signature] Date: 7-24-23  
 Refused to sign

Reason for Follow up:  clear up pending deficiency  Self-Report  
 Hours of Operation: Single Shift  
 Any changes in contact info (Phone/Email/Fax)?  Yes  No  N/A  
 Overmight Care?  Yes  No  N/A  
 Time of Inspection: 8:45  
 Date of Inspection: 7-24-23  
 Type of Inspection:  Annual  Complaint  Follow Up (original inspection date)

Providers/Operators are required by regulations and statutes to be in compliance at all time.  
Licensing Specialist \_\_\_\_\_ Date 7/25/23



| Deficiency Cited                   | Corrective Action Needed                                 | Expected Date of Correction |
|------------------------------------|--|-----------------------------|
| 2 employees do not have TB results | Have employees get tested through their medical provider | August 4, 2023              |
|                                    |  |                             |
|                                    |  |                             |
|                                    |  |                             |
|                                    |  |                             |
|                                    |  |                             |
|                                    |  |                             |

PERMIT # 23708

NAME OF PROVIDER/OPERATOR Kids Garden

Deficiency Correction

Division of Early Care and Education