

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

Type of Inspection:  Provisional Evaluation  Full Evaluation  **Renewal**

Center Name: **Nia Infant and Toddler Child Development Center**  
 License/APP ID #: **CC000478**  Licensed  Registered  
 Address: **2004 & 2007 Helm Avenue, North Charleston, SC 29405**  
 Telephone #: **843-746-9377**

Date of Inspection: **1-31-24** Time of Inspection: **10:00 AM**  
 Center  Faith Based  GCCH  CDEP  
 Hours of Operation: **Single Shift**  
 Any changes in contact info (Phone/Email/Fax)?  Yes  No Overnight Care?  Yes  No

Center Director/Designee: **Sara Nesbit**  
 Change in Ownership or Director?  Yes  No If yes, Name: \_\_\_\_\_  
 Total Capacity: **35** Building 1: \_\_\_\_\_ Building 2: \_\_\_\_\_ Building 3: \_\_\_\_\_  
 Maximum number of infants: **22**  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 checked="" type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input 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: *Sherique Christina* Date 1/31/24 Refused to Sign   
 Signature of Child Care Licensing Specialist: \_\_\_\_\_ Date 1/31/24

**Division of Early Care and Education**  
**Deficiency Correction**

**NAME OF PROVIDER/OPERATOR** Nia Infant And Toddler CDC  
**PERMIT #** 15186

Deficiency Cited	Corrective Action Needed	Expected Date of Correction
DSS Regulation 114-503 K4A Training hours	Staff need to complete the required training hours.	COB

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

**Licensing Specialist**  **Date** 2/5/24