South Carolina Department of Social Services
Office of Child Care Licensing
INSPECTION VISIT FORM FOR LICENSED CENTERS

Facility Name: Kiddie University
Permit #: 15382

Date of Inspection: 4-22-24 Time of Inspection: 3:15PM

Type of Inspection: ☒ **Annual** ☐ **Complaint** ☐ **Follow Up (original inspection date_____)**
Reason for Follow up: ☐ **clear up pending deficiency** ☐ **Self-Report**

Address: 1700 South Main Street, ANDERSON, SC 29624
Telephone #: 864-224-2064
Hours of Operation: Single Shift
Center Director/Designee: Sherry Adger, Rosemary Berry
Any changes in contact info (Phone/Email/Fax)? ☐ Yes ☒ No
Change in Ownership or Director? ☐ Yes ☒ No If yes, Name: _____
Overnight Care? ☐ Yes ☒ No
Maximum number of children: 97
Maximum number of infants: 24
Building 1: _____ Building 2: _____ Building 3: X
☐ 24 months ☒ 30 months ☐ I-4 facility ☐ CDEP
Items posted in public view: ☒ License ☒ Menu ☒ Ratio Chart (All classrooms)
Infants are in designated rooms? ☒ Yes ☐ No ☐ N/A
Does facility transport children? ☐ Yes ☐ No ☒ N/A

MANAGEMENT, ADMINISTRATION & STAFFING 114-503	C	N	N/A
Staff files are in compliance H(1-7)	☒	☐	☐
Training hours up-to-date K(5)(b-c)	☒	☐	☐
At least 1 person with CPR & 1st Aid on the premises K(5)(h)	☒	☐	☐

SUPERVISION 114-504	C	N	N/A
Adequate supervision throughout facility A(1-2)	☒	☐	☐
Facility following tracking of children procedures A(3)	☒	☐	☐
Ratios adequate in all classrooms and on playground B, C	☒	☐	☐

HEALTH, SANITATION & SAFETY 114-505	C	N	N/A
Children's faces/hands are clean B(1)	☒	☐	☐
Medicine and harmful items labeled and stored properly D(2)	☒	☐	☐
First Aid kit in facility and in vehicle if transport E(1), I(1)(g)	☒	☐	☐

	C	N	N/A
Proper diaper changing practices were observed F(1-16)	☐	☐	☒
Proper handwashing practices were observed G(4)	☐	☐	☒
No smoking/consumption of alcoholic beverage A(3)	☐	☐	☒

PHYSICAL SITE 114-507 — BUILDING	C	N	N/A
Ventilation and lighting & sufficient A(2)(a-d), (4)(a-c)	☒	☐	☐
No strangulation/choking/suffocation hazards A(5)(g)(i-iii)	☒	☐	☐
Ceiling, floors, windows, doors free from hazards A(5)(d)	☒	☐	☐
Building(s) temp between 68-80°F A(7) If no, close in 4 hrs.	☒	☐	☐
Facility free from pest problems (Insects, rodents) A(8)(b-c)	☒	☐	☐
Garbage kept properly in plastic lined receptacles A(8) (d-i)	☒	☐	☐
Electrical outlets are securely covered A(11)(c)	☒	☐	☐
Sink area has running water A(12)(d)	☒	☐	☐
Soap and disposable towels available at sink A(12)(i)	☒	☐	☐
Furniture, toys & equipment are clean and in good repair C(1)	☒	☐	☐
Furniture, toys & equipment meets the CPSC standards C(2)	☒	☐	☐
Healthy pets/animals (Vaccination record up-to-date) E(4)	☐	☐	☒

PLAYGROUND	C	N	N/A
Playground equip. safe & firmly anchored B(7)	☒	☐	☐
Adequate cushioning material; at least 6ft fall zone B(9)	☒	☐	☐
Fencing/safety barriers 4ft. in height, in good repair B(4)	☒	☐	☐
Outdoor space free from hazards and litter B(2)	☒	☐	☐

RESTING	C	N	N/A
Play Pens observed C(4)	☐	☐	☒
Cribs meet federal standards (reviewed certificate) D(1)	☒	☐	☐
Cots, mats, cribs labeled or charted for each child D(2)	☒	☐	☐

PROGRAM 114-506	C	N	N/A
Written, planned, daily program of activities that is developmentally & age appropriate observed A(1-3)	☒	☐	☐
Positive, non-abusive discipline practice B(1)	☒	☐	☐

MEAL REQUIREMENTS 114-508	C	N	N/A
Meals & snacks in compliance with USDA A(1)(b)	☒	☐	☐
Clean, wholesome, unspoiled, properly labeled food A(4)	☒	☐	☐
Food preparers have proper hair restraints B(5)	☒	☐	☐
Refrigerators have thermometers, temp under 45°F D(2-3)	☒	☐	☐

	C	N	N/A
Round, firm foods are not offered to children under 4 yrs. Old, unless properly cut to prevent choking risk A(3)	☒	☐	☐
Food stored & handled properly D(1)	☒	☐	☐
All cleaning & poisonous items stored away from food D	☒	☐	☐

INFANT CARE 114-509	C	N	N/A
Infants are placed on their back to sleep A(5)(a)	☒	☐	☐
No bottles propped or given in cribs or on mats A(3)(c)	☒	☐	☐
Food for toddlers cut in pieces ½ inch or less A(3)(k)	☒	☐	☐
Food for infants cut in pieces ¼ inch or less A(3)(j)	☒	☐	☐
Rock pots bottle warmers are inaccessible to children, No microwaving of beverages observed A(3)(d)	☒	☐	☐
Cups and bottles labeled with child's name & used only by that child A(3)(a)	☒	☐	☐

TRANSPORTATION 114-505	C	N	N/A
Vehicle has proper safety restraints & in good repair I(1)	☐	☐	☒
Checklist for loading/unloading children reviewed (2)(d)	☐	☐	☒
Driver's (valid) driver's license reviewed (1)(f)	☐	☐	☒

C-Compliant with Regulation
N-Noncompliant with Regulation

No violations noted at the time of visit ☒

Signature of Director/Operator/Designee: Sherry Adger Date: 4-22-24 ☐ Refused to sign

Signature of Child Care Licensing Specialist: _____ Date: 4-22-24