

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

Facility Name: Little Creations Learning Center  
Permit #: 22923

Date of Inspection: 10.14.24 Time of Inspection: 12:50  
Type of Inspection: ☒ Annual ☐ Complaint ☒ Follow Up (original inspection date 6.13.24)  
Reason for Follow up: ☒ clear up pending deficiency ☐ Self-Report

Address: 3128 S. Cashua Drive, FLORENCE, SC 29501

Hours of Operation: 7 am- 5:30pm

Telephone #: 843-662-0922

Any changes in contact info (Phone/Email/Fax)? ☐ Yes ☒ No

Overnight Care? ☐ Yes ☒ No

Center Director/Designee: Beshunda Lenae Ervin

Change in Ownership or Director? ☐ Yes ☒ No If yes, Name: \_\_\_\_\_

Maximum number of children: 37

Building 1: \_\_\_\_\_ Building 2: \_\_\_\_\_ Building 3: \_\_\_\_\_ ☐ CDEP

Maximum number of infants: 5

☐ 24 months ☒ 30 months ☐ I-4 facility **Infants are in designated rooms?** ☐ Yes ☒ No ☐ N/A

Items posted in public view: ☒ License ☒ Menu ☒ Ratio Chart (All classrooms) **Does facility transport children?** ☐ Yes ☐ No ☒ N/A

| MANAGEMENT, ADMINISTRATION & STAFFING 114-503   |                                     |                                     |                                     | SUPERVISION 114-504   |                                     |                                     |                                     |
|---|-------------------------------------|-------------------------------------|-------------------------------------|---|-------------------------------------|-------------------------------------|-------------------------------------|
|   | C                                   | N                                   | N/A                                 |   | C                                   | N                                   | N/A                                 |
| Staff files are in compliance <b>H(1-7)</b>   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Adequate supervision throughout facility <b>A(1-2)</b>  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| Training hours up-to-date <b>K(5)(b-c)</b>  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Facility following tracking of children procedures <b>A(3)</b>  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| At least 1 person with CPR & 1 <sup>st</sup> Aid on the premises <b>K(5)(h)</b>                               | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Ratios adequate in all classrooms and on playground <b>B, C</b>   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| HEALTH, SANITATION & SAFETY 114-505   |                                     |                                     |                                     |   |                                     |                                     |                                     |
|   | C                                   | N                                   | N/A                                 |   | C                                   | N                                   | N/A                                 |
| Children's faces/hands are clean <b>B(1)</b>  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Proper diaper changing practices were observed <b>F(1-16)</b>   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| Medicine and harmful items labeled and stored properly <b>D(2)</b>  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Proper handwashing practices were observed <b>G(4)</b>  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| First Aid kit in facility and in vehicle if transport <b>E(1), I(1)(g)</b>                                    | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No smoking/consumption of alcoholic beverage <b>A(3)</b>  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| PHYSICAL SITE 114-507   |                                     |                                     |                                     |   |                                     |                                     |                                     |
| BUILDING  | C                                   | N                                   | N/A                                 | PLAYGROUND  | C                                   | N                                   | N/A                                 |
| Ventilation and lighting & sufficient <b>A(2)(a-d), (4)(a-c)</b>  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Playground equip. safe & firmly anchored <b>B(7)</b>  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| No strangulation/choking/suffocation hazards <b>A(5)(g)(i-iii)</b>  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Adequate cushioning material; at least 6ft fall zone <b>B(9)</b>  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| Ceiling, floors, windows, doors free from hazards <b>A(5)(d)</b>  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Fencing/safety barriers 4ft. in height, in good repair <b>B(4)</b>  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| Building(s) temp between 68-80°F <b>A(7)</b> If no, close in 4 hrs.   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Outdoor space free from hazards and litter <b>B(2)</b>  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| Facility free from pest problems (Insects, rodents) <b>A(8)(b-c)</b>  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | RESTING   | C                                   | N                                   | N/A                                 |
| Garbage kept properly in plastic lined receptacles <b>A(8)(d-i)</b>   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Play Pens observed <b>C(4)</b>  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| Electrical outlets are securely covered <b>A(11)(c)</b>   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Cribs meet federal standards (reviewed certificate) <b>D(1)</b>   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| Sink area has running water <b>A(12)(d)</b>   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Cots, mats, cribs labeled or charted for each child <b>D(2)</b>   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| Soap and disposable towels available at sink <b>A(12)(i)</b>  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | PROGRAM 114-506   | C                                   | N                                   | N/A                                 |
| Furniture, toys & equipment are clean and in good repair <b>C(1)</b>  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Written, planned, daily program of activities that is developmentally & age appropriate observed <b>A(1-3)</b>          | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| Furniture, toys & equipment meets the CPSC standards <b>C(2)</b>  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Positive, non-abusive discipline practice <b>B(1)</b>   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| Healthy pets/animals (Vaccination record up-to-date) <b>E(4)</b>  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |   |                                     |                                     |                                     |
| MEAL REQUIREMENTS 114-508   |                                     |                                     |                                     |   |                                     |                                     |                                     |
|   | C                                   | N                                   | N/A                                 |   | C                                   | N                                   | N/A                                 |
| Meals & snacks in compliance with USDA <b>A(1)(b)</b>   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Round, firm foods are not offered to children under 4 yrs. Old, unless properly cut to prevent choking risk <b>A(3)</b> | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| Clean, wholesome, unspoiled, properly labeled food <b>A(4)</b>  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Food stored & handled properly <b>D(1)</b>  | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| Food preparers have proper hair restraints <b>B(5)</b>  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | All cleaning & poisonous items stored away from food <b>D</b>   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| Refrigerators have thermometers, temp under 45°F <b>D(2-3)</b>  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |   |                                     |                                     |                                     |
| INFANT CARE 114-509   |                                     |                                     |                                     | TRANSPORTATION 114-505 I  |                                     |                                     |                                     |
|   | C                                   | N                                   | N/A                                 |   | C                                   | N                                   | N/A                                 |
| Infants are placed on their back to sleep <b>A(5)(a)</b>  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Vehicle has proper safety restraints & in good repair <b>I(1)</b>   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| No bottles propped or given in cribs or on mats <b>A(3)(c)</b>  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Checklist for loading/unloading children reviewed <b>(2)(d)</b>   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| Food for toddlers cut in pieces ½ inch or less <b>A(3)(k)</b>   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Driver's (valid) driver's license reviewed <b>(1)(f)</b>  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| Food for infants cut in pieces ¼ inch or less <b>A(3)(l)</b>  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |   |                                     |                                     |                                     |
| Crock pots, bottle warmers, are inaccessible to children, No microwaving of beverages observed <b>A(3)(d)</b> | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <b>C-Compliant with Regulation</b><br><b>N-Noncompliant with Regulation</b>   |                                     |                                     |                                     |
| Cups and bottles labeled with child's name & used only by that child <b>A(3)(a)</b>                           | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <b>No violations noted at the time of visit</b> <input type="checkbox"/>  |                                     |                                     |                                     |

Signature of Director/Operator/Designee: Beshunda Lenae Ervin

Date: 10/14/24

☐ Refused to sign

Signature of Child Care Licensing Specialist: Rodney R. [Signature]

Date: 10.14.24

**Division of Early Care and Education****Deficiency Correction****NAME OF PROVIDER/OPERATOR: Little Creations Learning Center****PERMIT #22923**

| <b>Deficiency Cited</b>  | <b>Corrective Action Needed</b>  | <b>Expected Date of Correction</b> |
|--|--|------------------------------------|
| Cups in 3k room not labelled with child's name                         | Provider will use disposable cups or ensure cups labelled with each child's name for individual use by that child.             | 10.14.2024                         |
| Infants (under 30 months) in non-approved room.                        | Children under 30 months will only be cared for in infant approved rooms as determined by the fire Marshall inspection report. | 10.14.2024                         |
| Bottles made prior to morning drop off were not handled/stored safely. | Provider will ensure food is stored and handled properly.  | 10.14.2024                         |
| Education documentation was not on file for one staff.                 | Director to ensure all required paperwork in staff file, prior to beginning work.  | 11.14.2024 (30 days)               |
|  |  |                                    |
|  |  |                                    |

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

**Licensing Specialist RoseAnna Bryant Date 10.14.2024**