

INSPECTION VISIT FORM FOR LICENSED CENTERS

Permit #: 25157

Telephone #: 843-971-7127

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

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

Maximum number of children: 239

Building 1: X Building 2: _____
☐ 24 months ☒ 30 months ☐ I-4 facility

Building 3:

Infants are in designated rooms? ☒ Yes ☐ No ☐ N/A

Maximum number of infants: 100

Items posted in public view: ☐ License ☒ Menu ☒ Ratio Chart (All classrooms)

Does facility transport children? ☐ Yes ☐ No ☒ N/A

ABC Quality Yes

Head Start ☐ Yes ☒ No Public Schools ☐ Yes ☒ No

Overnight Care? ☐ Yes ☒ No

Hours of Operation: M- 6:30AM- 6:00PM T- 6:30AM- 6:00PM W- 6:30AM- 6:00PM Th- 6:30AM- 6:00PM F- 6:30AM- 6:00PM

Date of Inspection: 8/19/25

Time of Inspection: 12:03 pm

Type of Inspection: ☐ Annual ☒ Complaint

Follow Up (Original Inspection)

Date: / /

Reason for Follow up:

☐ Pending Deficiencies

☒ Self-Reported Incident

SUPERVISION 114-504

	C	N	N/A		C	N	N/A
Staff files are in compliance H(1-7)	☒	☐	☐	Adequate supervision throughout facility A(1-2)	☒	☐	☐
Training hours up-to-date K(5)(b-c)	☐	☐	☒	Facility following tracking of children procedures A(3)	☒	☐	☐
At least 1 person with CPR & 1 st Aid on the premises K(5)(h)	☒	☐	☐	Ratios adequate in all classrooms and on playground B, C	☒	☐	☐

HEALTH, SANITATION & SAFETY 114-505

	C	N	N/A		C	N	N/A
Children's faces/hands are clean B(1)	☒	☐	☐	Proper diaper changing practices were observed F(1-16)	☒	☐	☐
Medicine and harmful items labeled and stored properly D(2)	☐	☐	☒	Proper handwashing practices were observed G(4)	☒	☐	☐
First Aid kit in facility and in vehicle if transport E(1), I(1)(g)	☐	☐	☒	No smoking/consumption of alcoholic beverage A(3)	☒	☐	☐
Current Emergency Preparedness Plan H(3)	☐	☐	☒	Emergency Medical Plan C(1)	☒	☐	☐

PHYSICAL SITE 114-507

BUILDING	C	N	N/A	PLAYGROUND	C	N	N/A
Ventilation and lighting & sufficient A(2)(a-d), (4)	☒	☐	☐	Playground equip. safe & firmly anchored B(7)	☐	☐	☒
No strangulation/choking/suffocation hazards A(5)(g)	☒	☐	☐	Adequate cushioning material; at least 6ft fall zone B(9)	☐	☐	☒
Ceiling, floors, windows, doors free from hazards A(5)(d)	☒	☐	☐	Fencing/safety barriers 4ft. in height, in good repair B(4)	☐	☐	☒
Building(s) temp between 68-80°F A(7) If no, close in 4 hrs.	☒	☐	☐	Outdoor space free from hazards and litter B(2)	☐	☐	☒
Facility free from pest problems (Insects, rodents) A(8)(b-c)	☒	☐	☐	RESTING	C	N	N/A
All potentially harmful items including cleaning supplies, flammable products, poisonous, toxic, hazardous and materials are labeled and stored in locked area out of children's reach. Bio-contaminants are disposed of properly. A(5)(c) (e), A(8); E(1),(4)	☒	☐	☐	Play Pens observed C(4)	☐	☐	☒
Electrical outlets are securely covered A(11)(c)	☒	☐	☐	Cribs meet federal standards (reviewed certificate) D(1)	☒	☐	☐
Sink area has running water A(12)(d)	☒	☐	☐	Cots, mats, cribs labeled or charted for each child D(2)	☒	☐	☐
Soap and disposable towels available at sink A(12)(i)	☒	☐	☐	PROGRAM 114-506	C	N	N/A
Furniture, toys & equipment are clean and in good repair C(1)	☒	☐	☐	Written, planned, daily program of activities that is developmentally & age appropriate observed A(1-3)	☒	☐	☐
Furniture, toys & equipment meets the CPSC standards C(2)	☒	☐	☐				
Healthy animals, not permitted if allergic E(4)	☐	☐	☒	Positive, non-abusive discipline practice B(1)	☐	☒	☐
Other environmental allergies (Policy #120)	☐	☐	☒		☐	☒	☐

MEAL REQUIREMENTS 114-508

	C	N	N/A		C	N	N/A
Meals & snacks in compliance with USDA A(1)(b)	☐	☐	☒	Round, firm foods are not offered to children under 4 yrs. old,	☐	☐	☒
Clean, wholesome, unspoiled, properly labeled food A(4)	☐	☐	☒	unless properly cut to prevent choking risk A(3)	☐	☐	☒
Food preparers have proper hair restraints B(5)	☐	☐	☒	Food stored & handled properly D(1)	☐	☐	☒
Refrigerators have thermometers, temp under 45°F D(2-3)	☐	☐	☒	All cleaning & poisonous items stored away from food D(8)	☐	☐	☒
Prevention and response to food allergies A(9-10)	☐	☐	☒		☐	☐	☐

INFANT CARE 114-509

	C	N	N/A		C	N	N/A
Infants are placed on their back to sleep A(5)(a)	☒	☐	☐	Vehicle has proper safety restraints & in good repair I(1)	☐	☐	☒
No bottles propped or given in cribs or on mats A(3)(c)	☒	☐	☐	Checklist for loading/unloading children reviewed (2)(d)	☐	☐	☒
Food for toddlers cut in pieces ½ inch or less A(3)(k)	☒	☐	☐	Driver's (valid) driver's license reviewed (1)(f)	☐	☐	☒
Food for infants cut in pieces ¼ inch or less A(3)(j)	☒	☐	☐				
Crock pots, bottle warmers, are inaccessible to children, No microwaving of beverages observed A(3)(d)	☒	☐	☐	C-Compliant with Regulation			
				N-Noncompliant with Regulation			
Cups and bottles labeled with child's name & used only by that child A(3)(a)	☒	☐	☐	Violations noted at the time of visit ☒ Yes ☐ No			
				Any violations corrected onsite ☒ Yes ☐ No DSS Form 2910 needed ☐ Yes ☒ No			

Signature of Director/Operator/Designee:

Date: 8/19/25

☐ Refused to sign.

Signature of Child Care Licensing Specialist:

Date: 8/19/2025