South Carolina Department of Social Services Office of Child Care Licensing

INCRECTION VICIT FORM FOR RECICIEDED FAITH BACED CHILD CARE CEN

acility Name: St. Paul UMC Preschool/Afterschool			D	ate of Inspection: 1 / 21 Time of Inspection: 1 Complaint & Follow Up (original inspection date Reason for Follow up: pending deficiencies)
ddress: 1320 Fernwood - Glendale Road, SPARTANBURG, elephone #: 864-582-2068 Any changes in c				Hours of Operation: Single Shift ne/Email/Fax)? Yes No Overnight Care?			•
Maximum number of children: 191 Building 1:			Building	2: Building 3: facility	N/A		
MANAGEMENT 114-523	С	N	N/A	APPLICATION OF STAFF: CHILD RATIOS 114-524	С	N	N/A
Staff files are in compliance F(1-4)	0	0	10/	Adequate supervision throughout the facility A(1) (a-b)			IN/A
Are training hours up-to-date? F(3)(a-b)	0		M	Facility following tracking of children procedures A(2)		0	<u> </u>
At least 1 person with CPR & 1St Aid on the premises H(5)(f)		п	te)	Ratios adequate in all classrooms and on playground B & C			
HEAL				l & SAFETY 114-525			
Children's force (hands are sleep D(6)	C		N/A	Desper disper disperies proving were channel F/4 4C)	С	N	N/A
Children's faces/hands are clean B(1)	4	0		Proper diaper diapering practices were observed F(1-16)	_		N N
Medicine & harmful items labeled and stored property D(2)			$\overline{}$	Proper handwashing practices were observed G(4)	0		
First Aid kit in facility and in vehicle if transport E(1), I(1)(g)	Ø	ū		Smoking permitted only in designated area A(3)			6/
PHY:	_	_	E 114-	527			
DIN DING STATE OF THE DING STA	С	N	N/A		C	N	N/A
Wentilation and lighting sufficient A(2)(a-d),(4)(a-c)	04			PLAYGROUND Outdoor proces from of gloop, process 8 with as little B(2)			8
Ceiling, floors, windows, doors free from hazards A(5)(d)	13			Outdoor space free of glass, paper & other litter B(2) Fencing/safety barriers 4ft in height, in good repair B(4)		-	02/
No strangulation/choking/suffocation hazards A(5)(g)(i-iii)	2	1 5	 	Playground equipment safe & firmly anchored C (6)		0	
Building(s) temp between 68-80 °F A(7)	va	1 -		Adequate cushioning material; at least 6ft. fall zone C(8)			4
Facility free from pest problems (Insects, rodents)A(8)(b-c)	d			RESTING	c	N	N/A
Garbage kept properly in plastic lined receptacles A(8)(d-i)	0	, n	0	Cribs meet federal standards (reviewed certificate) D(1)	10/		0
Electrical outlets are securely covered A(11)(c)	ď		0	Cots, beds, mats, & cribs labeled for each child D(2)	02/	0	
Sink area has hot & cold water A(12)(d)	0			Pack & plays not used for sleeping D(1-2)	□		10/
Soap and towels in restrooms A(12)(i)	2	<u> </u>		TRANSPORTATION 114-525 I	9		0
Furniture, toys & equipment are clean and in good repair C(1)	db/	4-		Vehicle has proper safety restraints and in good repair I(1)	V)		
Furniture, toys & equipment meets CPSC standards C(2)	A			Checklist for loading/unloading children reviewed. I(2)(d)	A		
MEAL REQUIREMENTS 114-528							
Meals and snacks in compliance with USDA A(1)(b)	C	N	N/A	Round, firm foods are not given to children under 4y/o.	C	N	N/A
Clean, wholesome, unspoiled properly labeled food A(4)	-	0	10/	unless properly cut to prevent choking risk. A(3)		_	~
Food preparers have proper hair restraints B(5)	10		12/	Food labeled, stored and handled properly D(1)		<u> </u>	<u>₽</u>
Refrigerators have thermometers(Temp under 45°F)D(2-3)		 	-	Cleaning & poisonous items stored away from food D(8)		-	6/
	ANT	CAR	<u> 114-5</u>				
					С	N	N/A
Cups and bottles labeled with child's name & used only by that	child	A(1)	a)				V
No bottles propped or given in cribs or on mats A(1)(c)							8
Breast milk is not heated in the microwave. If microwave is used to heat formula/beverages, parents are notified in writing A(1)(d)						0	Ĭ ĕ
Food for toddlers cut in pieces ½ inch or less. A(1)(k)							
Food for infants cut in pieces ½ inch or less. A(1)(j)							
Infants are placed on their backs to sleep, unless Doctor's note is provided. A(3)(a)							
C = Compliant with Regulation - N = Noncompliant with	Reg	ulatio	n	No violations noted at the time of visit ☑	0		
Signature of Director/Operator/Designee: Date: Date:							