South Carolina Department of Social Services
Office of Child Care Licensing
INSPECTION VISIT FORM FOR REGISTERED FAITH BASED CHILD CARE CENTERS

acility Name: Springs Christian Day School ermit #: 924	ion:	ty∕An	nual	Date of Inspection: <u>4/13/7</u> Time of Inspection: <u>\ C</u> \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	1.45	an	1
		•		Reason for Follow up: □pending deficienci	es os	elf-re	—/ ∌port
ddress: 3600 Boiling Springs Road, Boiling Springs, SC 293 elephone #: 864-578-2148 Any changes in 6		act inf	o (Pho	Hours of Operation: Single Shift one/Email/Fax)? □ Yes □/No Overnight Care?	□ Y€	es r	1410
center Director/Designee: Teresa Dickerson Change in Ownership or Director? □ Yes ☑ No ☐ If your faximum number of children: 252 ☐ Building 1: ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	es, N 	lame: E nonth	 Buildin s □ l-4	g 2: Building 3: 4 facility		T T	
MANAGEMENT 114-523	_	N	N/A	APPLICATION OF STAFF: CHILD RATIOS 114-524		NI.	NI/A
Staff files are in compliance F(1-4)	W		Π/Λ □	Adequate supervision throughout the facility A(1) (a-b)	C	N	N/A
Are training hours up-to-date? F(3)(a-b)	V	/ 0	0	Facility following tracking of children procedures A(2)	10/	무	
At least 1 person with CPR & 1St Aid on the premises H(5)(f)	17		<u> </u>	Ratios adequate in all classrooms and on playground B & C	0/		
				N & SAFETY 114-525	1 4		
	С	N	N/A		С	N	N/A
Children's faces/hands are clean B(1)	ø/		0	Proper diaper diapering practices were observed F(1-16)	١٠		its/
Medicine & harmful items labeled and stored properly D(2)	p/	, 0		Proper handwashing practices were observed G(4)			4
First Aid kit in facility and in vehicle if transport E(1), I(1)(g)				Smoking permitted only in designated area A(3)			ds/
	SIC A	LCIT					120
PHI	C	N	E 114 N/A		0	N.I.	ALCA
BUILDING		J IN	I IV/A	PLAYGROUND	C	N	N/A
Ventilation and lighting sufficient A(2)(a-d),(4)(a-c)	G/			Outdoor space free of glass, paper & other litter B(2)		0	<u> </u>
Ceiling, floors, windows, doors free from hazards A(5)(d)	4	7	-	Fencing/safety barriers 4ft in height, in good repair B(4)	Q/ Q/		
No strangulation/choking/suffocation hazards A(5)(g)(i-iii)	1 OV			Playground equipment safe & firmly anchored C (6)	6		0
Building(s) temp between 68-80 °F A(7)	18	1-		Adequate cushioning material; at least 6ft. fall zone C(8)	3		
Facility free from pest problems (Insects, rodents)A(8)(b-c)	<u> </u>	4-		RESTING	Č	N	N/A
Garbage kept properly in plastic lined receptacles A(8)(d-i)	100	_		Cribs meet federal standards (reviewed certificate) D(1)	Ğ		0
Electrical outlets are securely covered A(11)(c)	Ox/		0	Cots, beds, mats, & cribs labeled for each child D(2)	102	-	
Sink area has hot & cold water A(12)(d)	1 2/		0	Pack & plays not used for sleeping D(1-2)			P
Soap and towels in restrooms A(12)(i)	<u> </u> d/		0	TRANSPORTATION 114-525 I			
Furniture, toys & equipment are clean and in good repair C(1)	10/		0	Vehicle has proper safety restraints and in good repair I(1)	Ò/		
Furniture, toys & equipment meets CPSC standards C(2)				Checklist for loading/unloading children reviewed. I(2)(d)	Lø/		
MEAL	REQI	UIREI	_	S 114-528		W 1 =	
Made and enough in a surface with 1100 A 4449 A	С	N	N/A	国籍工程的基础的基础的基础的基础的基础的基础的基础的基础的	С	N	N/A
Meals and snacks in compliance with USDA A(1)(b) Clean, wholesome, unspoiled properly labeled food A(4)			6/	Round, firm foods are not given to children under 4y/o,			10
Food preparers have proper hair restraints B(5)	0	-	Ø'	unless properly cut to prevent choking risk. A(3)	8		
Refrigerators have thermometers(Temp under 45°F)D(2-3)			0/	Food labeled, stored and handled properly D(1) Cleaning & poisonous items stored away from food D(8)	6		0
	_		114-				9
		<u> </u>			С	N	N/A
Cups and bottles labeled with child's name & used only by that	child	A(1)(a)		0		10/1/
No bottles propped or given in cribs or on mats A(1)(c)						0	0
Breast milk is not heated in the microwave. If microwave is used to heat formula/beverages, parents are notified in writing A(1)(d)							4
Food for toddlers cut in pieces ½ inch or less. A(1)(k)							4
Food for infants cut in pieces ¼ inch or less. A(1)(i)							5
Infants are placed on their backs to sleep, unless Doctor's note is provided. A(3)(a)							· ·
	100s	70 E	a de la				EWI
C = Compliant with Regulation - N = Noncompliant with	Reg	ulatio	n	No violations noted at the time of visit		2	SEEK.
Signature of Director/Operator/Designee:		\$1	Oic	keyow Date: 9/13/21 Refus	ed to	sian	11.476
Signature of Child Care Licensing Specialist:	. (IM	y	Pate: 9 13 17 1		- J.,	