

South Carolina Department of Social Services
ABC Quality Rating and Improvement System
HEALTH & SAFETY INSPECTION VISIT FOR LICENSE-EXEMPT SCHOOL AGE PROGRAMS

Facility Name _____ Facility CC#: _____

Facility Address (Street, City, Zip Code) _____

Telephone Number: _____ Facility Supervisor/Designee/Contact: _____

Date of Inspection: _____ Time of Inspection: _____ ABC Quality Staff: _____

Type of Inspection: ☐ Enrollment ☐ Annual ☐ Complaint ☐ Follow-up ☐ Self-report

If follow-up, list date of previous inspection: _____

Is this visit the result of a serious injury? _____ or fatality of a child? _____

Maximum # of Children enrolled: _____ Number of children observed: _____

Age range of children: enrolled _____ observed _____

Hours of Operation: School Year _____ Summer (if applicable) _____

Eligibility Standard	
4.1 Program Operations	
4.1.3 Program operates within legal parameters.	Determination
a. Operating hours are in compliance.	
b. Serves only children ages five years and older.	
4.1.6 Business phone available	Determination
a. Must have a working business phone available during operating hours and at all times children are present.	
4.2 Program Eligibility	
4.2.6 Written Policies (Interviews)	Determination
a. Staff understand and adhere to the Medication Policy.	
b. Staff understand and adhere to the Emergency Medical Care Policy.	
c. Staff understand and adhere to the Emergency Preparedness Policy	
d. Staff understand and adhere to the Child Abuse and Neglect Policy	
e. Staff understand and adhere to the Swimming Policy.	
f. Staff understand and adhere to the Transportation Policy.	
h. Staff understand and adhere to the Discipline and Child Maltreatment Policy.	
i. Staff understand and adhere to the Prevention and Control of Infectious Diseases Policy.	
j. Staff understand and adhere to the Handling, Storage, and Disposal of Hazardous Materials and Biological Contaminants Policy.	
k. Staff understand and adhere to the Safe Release of Children Policy.	
l. Staff understand and adhere to the Parental Access Policy.	
4.3 Program Staff Eligibility	
4.3.1 All staff responsible for the care of children meet eligibility requirements.	Determination

Determination Codes:

N/O = Not Observed during visit, C = Compliant with requirement, N – Noncompliance with requirement, N/A = Non- Applicable, COS – Corrected on-site,

a. Must be 18 years of age. (Government issued verification on file; i.e., driver's license, passport, etc.)	
b. Must have a valid high school diploma or GED. (Verified in SC Endeavors)	
c. Must have 6+ months verifiable experience working with children or be supervised by an experienced teacher.	
4.3.5 Pediatric First Aid	Determination
a. All staff responsible for the care or supervision of children have current Pediatric First Aid.	
4.3.6 Infant/Child Cardiopulmonary Resuscitation (CPR)	Determination
a. All staff responsible for the care or supervision of children have current infant/child CPR.	
4.3.8 Health and Safety Pre-Service Certificate	Determination
a. All staff responsible for the care or supervision of children have current Health and Safety Pre-Service certificate.	
History of Compliance Standard	
7.2 Regulations	
7.2.1 Ratios & Group Size	Determination
a. Ratios met in all classes/groups of children.	
b. If swimming provided, water safety ratios are met.	
c. Group size met in all classes/groups of children.	
7.2.2 Supervision	Determination
a. Staff are physically near children and have ready access to intervene when needed.	
c. Staff focus on the supervision of children at all times.	
e. Two qualified staff are on the premises during operating hours and when children are present.	
g. The Site Supervisor, Director or Designee was present.	
h. Children's whereabouts must be tracked throughout the facility, and during activities away from the facility.	
7.2.5 Transportation	Determination
a. Child: staff ratios met during transport.	
c. Each vehicle has safety restraints in good repair that are age appropriate for children being transported.	
d. Children are properly restrained in individual, age-appropriate safety restraints when the vehicle is in motion.	
e. Each vehicle has current registration and proof of current insurance.	
f. Each driver has a valid Driver's License.	
g. Children are tracked entering/exiting the vehicle.	
j. Each driver has access to a cell phone during transport.	
k. Each driver has emergency medical/contact information for each child being transported.	
l. Program complies with Jacob's Law.	
7.2.6 Indoor Environment	Determination
a. Facility is free from hazards and litter.	
b. Facility temperature is between 68-80 degrees.	
c. Facility is free from insects, rodents and other pest infestations.	
d. Facility is clean and sanitary.	
e. Facility has running water and private bathrooms inside the facility are accessible and operational.	
g. Furniture, toys and equipment are clean, in good repair and meet the US Consumer Products Safety Commission (CPSC), if applicable.	
h. Hazardous materials, chemicals, and medications are locked and out of the reach of children.	
i. Animals present (no reptiles or rodents) must be healthy, clean, and present no apparent threat to children.	

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j. No weapons are allowed on the premises.	
k. Staff bags/personal belongings are kept out of the reach of children.	
l. The use of tobacco products, alcoholic beverages, or other illegal substances are not allowed on the premises or while transporting children.	
7.2.7 Outdoor Environment	Determination
a. Playground / outdoor areas used by children are free of trash and litter.	
b. The building and physical premises are in good repair and safe for children.	
c. Playgrounds areas are safe and free of physical and chemical hazards.	
d. Playground equipment must be safe, firmly anchored, meet the US Consumer Products Safety Commission (CPSC), and be rated for commercial use.	
e. Adequate cushioning material is provided around fall zones.	
f. Unsafe areas and conditions are restricted by a fence or natural barrier that is at least 4 feet high.	
g-i. No use of hot tubs, spas, saunas, trampolines), inflatable bouncy houses, inflatable water slides, or similar items.	
7.2.8 Meal Requirements and Food Preparation	Determination
All meals and snacks provided by the program meet USDA meal component guidelines and child dietary needs.	
a. Food is properly procured, stored, prepared, and labeled to reduce risk of foodborne illnesses.	
c, f, g. All food preparation equipment, appliances, surfaces, food service areas, kitchenware, tableware, and utensils are in good repair and routinely cleaned and sanitized before and after use.	
d. Equipment and food are monitored and maintained to ensure that food is kept at safe temperatures.	
7.2.9 Handwashing	Determination
a. Proper handwashing procedures are used by staff and children.	
b. Liquid soap and disposable paper towels are accessible at every handwashing sink.	
7.2.10 First Aid Kit	Determination
a. A first aid kit is accessible to staff wherever children are present.	
Records Standard	
13.0 Record accessibility	Determination
a. Records are kept on-site and are accessible.	
13.2 Tracking sheets	Determination
a. Program must maintain the tracking sheets for a period of one year.	
13.5 Staff Records	Determination
a. An individual file must be kept on-site for each staff employed (CPR/First Aid, code of ethics, background checks, DSS Form 1081, DSS Form 1083, staff health assessment, TB test results, discipline and maltreatment policy).	
13.6 Child Records	Determination
a. An individual file must be kept on-site for each child enrolled (child enrollment, immunization, transportation).	
13.7 Field Trip Records	Determination
a. Records must be documented and maintained for each field trip.	
Practice Drills	Determination
a. Records reflect that practice drills are regularly conducted.	

☐ **Note:** Check box if the provider is receiving technical assistance during program year October 1, 2026 – September 30, 2027, to become fully compliant with 13.6 Child Records immunization requirement by Federal Fiscal Year 2027-2028.

Signature of School-Age Site Supervisor/Director/Designee: _____

Date: _____

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