## South Carolina Department of Social Services Office of Child Care Licensing

## INSPECTION VISIT FORM FOR REGISTERED FAMILY CHILD CARE HOMES

Operator Name: Latoyia Johnson		Date of Inspe	ection: 8/1	11/2022	Time of Inspection	n: <u>12 :</u>	34 PM
Permit #: 25211	Type of Inspection: Annual	□ Complaint	□Renewal	□ Follow U	lp (original inspec	tion date	θ)
		1.2	Reaso	n for Follow	v up: pending de	ficiencie	s =self-report
Address: 531 Autumn Glen Road Colu	ımbia, SC 29229		Hours	of Operation	on:		,
Telephone #: 716-335-1185	Any changes in contact info (Pl	hone/Email/Fax	()? □ Yes	e No	Overnight Care?	□ Yes	e-No
Change in address? □ Yes ☑ No	Zoning restrictions Yes Do		<u> </u>			_	
Total Capacity: 5	Items to be posted: Registratio	n					
Verify the following: Verified Liability Insurance 63-13-210							
		7 0					

	C	N	N//		
Kitchen (sharp objects, cleaning supplies, etc. inaccessible to children)			0		
Living room (no excessive clutter, etc.)			0		
Bedrooms (no children unsupervised, guns or drugs, etc)					
Sleep Arrangements (no Pack-N-Plays)	DB/	0	0		
Cribs meet CPSC requirements			Ø		
Bathrooms (no visible mold, etc.)	₩		0		
Garage/Shed (secured if harmful items inside)			ū		
Outside/Playground (sharp edges, rusty points, fence if ditches, accessible to street)	<b>D</b> /	0			
Multiple floor levels?			r Yes □ No		
No suffocation /Poisonous hazardous materials around the house	<b>a</b>				
No major structural damages (Holes in floors or walls, etc.)	<b>□</b>				
Pets/Animals? ☐ Yes ☑ No Up to date vaccination records?			<b>D</b>		
Smoke Detectors/Fire Extinguishers? If not, TA provided ☐ Yes ☐ No	08				
Any serious injuries requiring medical attention?		Yes 🗈	Νo		
Any fatalities?		□ Yes 🗹 No			
DOCUMENTATION					
	C	N	N/A		
DSS 2909 completed for all enrolled children?			0		
Emergency Preparedness Plan?			0		
Is medication administered? ☐ Yes ☐ No If yes, is the medication expired?			0		
Permission forms from parents signed and dated?					
Field Trips? If yes, signed parental permissions forms? 🗹 Yes 🗆 No	<u> </u>				
STAFFING & SUPERVISION					
	C	N			
Staff observed were qualified?	<b>8</b>	n	1		
Training hours up-to-date? 63-13-825			<u> </u>		
Is provider over capacity?			□ Yes 🗹 No		
Number of children observed:		<u> </u>			

<u>Supervision</u>: Care provided to an individual child or group of children. Adequate supervision requires awareness of and responsibility for the ongoing activity of each child, knowledge of activity requirements and children's needs and accountability for their care. Adequate supervision also requires the operator and/or staff being near and having ready access to children in order to intervene when needed.

Signature of Operator/Emergency Person	Date: 8   11   2 7 Refused to sign
Signature of Operator/Emergency Person PULL NOTE TO THE PROPERTY OF THE PROPER	Date: 8111 0 0 Refused to sign
'N'	0/1.10
Signature of Child Care Licensing Specialist:	- Date: 8/11/2022