South Carolina Department of Social Services Office of Child Care Licensing

INSPECTION VISIT FORM FOR REGISTERED FAMILY CHILD CARE HOMES

Operator Name: Lashawn Smiley		Date of Inspection:	19/2023 Time of Ins	spection: 11:20 am
Permit #: 23641	Type of Inspection: Annual	complaint □Renewal	□ Follow Up (original	inspection date
1=		Reaso	n for Follow up: mpend	ling deficiencies uself-repor
Address: 130 Sandpine Circle COLUI		Hours	s of Operation: 24 hour	's M-F
Telephone #: 803-446-9786	Any changes in contact info (P	hone/Email/Fax)? □ Yes	■No Overnight	Care? ►Yes □ No
Change in address? ☐ Yes	Zoning restrictions Yes Do		-	
Total Capacity: 5	Items to be posted: Registration	on		
Verify the following: Verified Liability In	surance 63-13-210 - Yes make If	no verify signed statements	from parente Mas =	No

HOME INSPECTION (HEALTH, SANITATION, & SAFETY)					
CARLO SERVICE DE LA CARLO DEL CARLO DE LA CARLO DEL CARLO DE LA CARLO DEL LA CARLO DE LA C	С	N	N/A		
Kitchen (sharp objects, cleaning supplies, etc. inaccessible to children)					
Living room (no excessive clutter, etc.)					
Bedrooms (no children unsupervised, guns or drugs, etc)	0				
Sleep Arrangements (no Pack-N-Plays)	9/				
Cribs meet CPSC requirements			<u> </u>		
Bathrooms (no visible mold, etc.)			-		
Garage/Shed (secured if harmful items inside)					
Outside/Playground (sharp edges, rusty points, fence if ditches, accessible to street)	t t				
Multiple floor levels?		to Yes - No			
No suffocation /Poisonous hazardous materials around the house					
No major structural damages (Holes in floors or walls, etc.)	<u> </u>				
Pets/Animals? Yes No Up to date vaccination records?	0		0		
Smoke Detectors/Fire Extinguishers? If not, TA provided Yes No	- W				
Any serious injuries requiring medical attention?			400		
Any fatalities?		□ Yes triNo			
DOCUMENTATION		163	TVO		
	C C	N	N/A		
DSS 2909 completed for all enrolled children?	W				
Emergency Preparedness Plan?					
Is medication administered? Yes No If yes, is the medication expired?					
Permission forms from parents signed and dated?					
Field Trips? If yes, signed parental permissions forms? ☐ Yes ☐ No					
STAFFING & SUPERVISION			D		
	C	N			
Staff observed were qualified?					
Training hours up-to-date? 63-13-825					
Is provider over capacity?					
Number of children observed:			□ Yes 🗹 No		
		5			
C = Compliant with Regulation - N = Noncompliant with Regulation No violations noted at the time of visit					

<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:	Lashaur Inle	Upate:	/19/23	☐ Refused to sign
Signature of Child Care Licensing Specialist:			/19/2023	_