South Carolina Department of Social Services Office of Child Care Licensing NSPECTION VISIT FORM FOR REGISTERED FAMILY CHILD CARE HO

INSPECTION VISIT FORM FOR REGISTERED FAMILY CHILD CARE HOMES

perator Name: Jaquetta Squire		Date of Insp	ection: 🄏🕻	ST (539	_ Time of Inspectio	n: 🕰: 🤅	376M
ermit #: 25264	Type of Inspection: ∕□ Annual	□ Complaint	□Renewal	□ Follow	w Up (original inspec	ction dat	te)
			Reaso	n for Fol	low up: □pending d∈	ficienci	es 🗆 self-repor
ddress: 841 Redbud Lane SUMMER	VILLE, SC 29486			s of Oper			•
elephone #: 803-348-8078	Any changes in contact info (PI	hone/Email/Fa:	x)? 🗆 Yes	rd No	Overnight Care?	□ Yes	ø No
hange in address? Yes No	Zoning restrictions - Yes - No _		•				
otal Capacity: 5	Items to be posted: Registration	n	/	,			
erify the following: Verified Liability Ins	surance 63-13-210 🗹 Yes 🗆 No If i	no, verify signe	d statement	s from par	rents. Yes No		
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HOME INSPECTION (HEALTH, SANITATION, & SAFETY)	C	N	A1/		
Vitaban Jaharn ahiasta alaming supuling ata inacceptible to still and			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)					
Sleep Arrangements (no Pack-N-Plays)					
Cribs meet CPSC requirements					
Bathrooms (no visible mold, etc.)	Z ^ ′	0			
Garage/Shed (secured if harmful items inside)					
Outside/Playground (sharp edges, rusty points, fence if ditches, accessible to street)	Z				
Multiple floor levels?	Ø	∠ Yes □ No			
No suffocation / Poisonous hazardous materials around the house					
No major structural damages (Holes in floors or walls, etc.)					
Pets/Animals? ☐ Yes ☐ No Up to date vaccination records?			Ø		
Smoke Detectors/Fire Extinguishers? If not, TA provided ☐ Yes ☐ No					
Any serious injuries requiring medical attention?			No.		
Any fatalities?		□ Yes No			
DOCUMENTATION					
	C	N	N/A		
DSS 2909 completed for all enrolled children?					
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			2		
STAFFING & SUPERVISION					
PROCESSION AND VOTE THE REAL PROCESSION AND AND AND AND AND AND AND AND AND AN	C	N			
Staff observed were qualified?					
Training hours up-to-date? 63-13-825					
Is provider over capacity?			No		
Number of children observed:			□ Yes ØNo		
		<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 24 2023

Refused to signature of Child Care Licensing Specialist:

Date: 8 24 2023

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