South Carolina Department of Social Services Office of Child Care Licensing

INSPECTION VISIT FORM FOR REGISTERED FAMILY CHILD CARE HOMES

Operator Name: Dora Guzman

Address: 505 Tyler Street Columbia, SC 29205

Permit #: 24869

Type of Inspection: 9/25/3033 Time of Inspection: 10:40 AM

Type of Inspection: Graphint Renewal Renew

Reason for Follow up: pending deficiencies self-report

s: 505 Tyler Street Columbia, SC 29205 one #: 803-256-7435 Any changes in contact info (Phone/Email/Fax)? Yes Any Changes in Contact info (Phone/Email/Fax)? Yes Any Changes in Contact info (Phone/Email/Fax)? Yes Any Changes in Contact info (Phone/Email/Fax)?				rNo
Capacity: 5 the following: Verified Liability I	Items to be posted: Registration nsurance 63-13-210 □ Yes □No If no, verify signed statements from			
,	is the second of	parents. Er Yes - No		
	HOME INSPECTION (HEALTH, SANITATION, & SAFETY)			-
		C	N.	
Kitchen (sharp objects, clear	ing supplies, etc. inaccessible to children)	THE R. P. LEWIS CO., LANSING, MICH.	N	1
Living room (no excessive cla	itter, etc.)	<u>*</u>	-	+-
Bedrooms (no children unsu		<u> </u>	-	╄
Sleep Arrangements (no Pac		G G	-	╀
Cribs meet CPSC requiremen		- B	1 5	+
Bathrooms (no visible mold,		- र	-	╀
Garage/Shed (secured if har	nful items inside)	0		+
Outside/Playground (sharp e	edges, rusty points, fence if ditches, accessible to street)			+
Multiple floor levels?			Yes s	1
No suffocation /Poisonous h	azardous materials around the house			_
	s (Holes in floors or walls, etc.)		1	+
Pets/Animals? Pets N			Ö	+
Smoke Detectors/Fire Exting	uishers? If not, TA provided		<u> </u>	+
Any serious injuries requirin	g medical attention?		Yes D	_
Any fatalities?			Yes a	
	DOCUMENTATION			
		C	N	I
DSS 2909 completed for all		d	-	+
Emergency Preparedness Pla			0	
Is medication administered?				\top
Permission forms from pare			0	
riela irips: II yes, signea p	arental permissions forms? Tryes No		0	Γ
	STAFFING & SUPERVISION			*
Staff abanual ware avalish		C	N	100
Staff observed were qualified Training hours up-to-date?		w/	0	1
Is provider over capacity?	3-13-825	18/	0	1
Number of children observe	1.		Yes 🗆	Μo
Mulliper of children observe	1.		5	de .
C = Compliant with Regulation	N = Noncompliant with Regulation No violations noted at the time of	of visit of		075
		1	200012575	Ser S
upervision: Care provided to an inc	dividual child or group of children. Adequate supervision requires awareness of	f == 1		
may make a second to a second	and and animarch a liceas and arthritisming by their cale, evedingly energiese	i and responsibility for the ongoing	ig activi	ty of i
nd having ready access to children	n order to intervene when needed.	yri giso reduites the oberator and	or staff	bein
Signature of Operator/Emerg	D. 001 138 43 man	0/0017		
Signature of Operator/Emergi	ency Person: Date		Refuse	ed to