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

Any changes in contact info (Phone/Email/Fax)? Yes No Overnige in address? Yes No Yes		′es 🔄	170
Capacity: 6 Items to be posted: Registration	es de No		
	es de No		
the following: Verified Liability Insurance 63-13-210 Tes (Fro.) If no, verify signed statements from parents, (1) Yes	es divino		
HOME INSPECTION (HEALTH, SANITATION, & SAFETY)			
	C	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)			
Sleep Arrangements (no Pack-N-Plays)			0
Cribs meet CPSC requirements			
Bathrooms (no visible mold, etc.)			
Garage/Shed (secured if harmful items inside)	0		_
Outside/Playground (sharp edges, rusty points, fence if ditches, accessible to street)			
Multiple floor levels?		Yes 🗈	
No suffocation /Poisonous hazardous materials around the house			
No major structural damages (Holes in floors or walls, etc.)	100		
Pets/Animals? Yes No Up to date vaccination records?	1	-	0
Smoke Detectors/Fire Extinguishers? If not, TA provided ☐ Yes ☐ No			
	====		
	8	□ Yes ı⊯	□ No
Any serious injuries requiring medical attention?		Yes 🕡	11 0.
			11 0.
Any serious injuries requiring medical attention? Any fatalities?	0	Yes Yes	No.
Any serious injuries requiring medical attention? Any fatalities? DOCUMENTATION	C	Yes Yes	No No N/A
Any serious injuries requiring medical attention? Any fatalities? DOCUMENTATION DSS 2909 completed for all enrolled children?	C	Yes Y	No No
Any serious injuries requiring medical attention? Any fatalities? DOCUMENTATION DSS 2909 completed for all enrolled children? Emergency Preparedness Plan?	C	Yes Yes N	No No
Any fatalities? DOCUMENTATION DSS 2909 completed for all enrolled children? Emergency Preparedness Plan? Is medication administered? Yes No If yes, is the medication expired?	C	Yes Yes N	No N/A
Any serious injuries requiring medical attention? Any fatalities? DOCUMENTATION 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?	C	Yes Yes N	No N/A
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