South Carolina Department of Social Services Office of Child Care Licensing

VIRTUAL INSPECTION VISIT FOR REGISTERED FAMILY CHILD CARE HOMES DUE TO THE HURRICANE EMERGENCY

| it #: 24321 | Type of Inspection: Annual | Date of Inspection: _11 _ Follow Up (ori | ginal inspection date |) | | 111) |
|--|---|---|---|----------|--------|-------|
| ess: 436 Cockspur Road Irmo, SC | 29063 | Hou | ণ। ধুর rs of Operation: M-F 6i30a | ·5:30 | | |
| hone #: 803-543-3945 ge in address? Yes | Any changes in contact info (Page 2001) Zoning restrictions - Yes Ano | hone/Email/Fax)? □ Yes | | | es p/ | No |
| Capacity: 6 | Items to be posted: Registration | | | | | |
| the following: Verified Liability Ins | urance 63-13-210 5/Yes □ No If | no, verify signed statemen | ts from parents. Yesur No |) | | |
| | | | | | | |
| HC | OME INSPECTION (HEALTH, SA | NITATION, & SAFETY) | | | | |
| | | | | C | N | N/A |
| Kitchen (sharp objects, cleaning supplies, etc. inaccessible to children) | | | 4 | | | |
| Living room (no excessive clutter, etc.) | | | 5/ | | | |
| Bedrooms (no children unsupervised, guns or drugs, etc) | | | V | | | |
| Sleep Arrangements (no Pack-N-Plays) | | | 0 | 0 | 13 | |
| Cribs meet CPSC requirements | | | 3/ | | | |
| Bathrooms (no visible mold, etc.) | | | ₽/ | - | 0 | |
| Garage/Shed (secured if harmful items inside) | | | 0/ | 0 | O | |
| A COMPANY OF THE PARTY OF THE P | ges, rusty points, fence if ditches | , accessible to street) | | 3/ | . 0 | , D |
| Multiple floor levels? | | | | res p | No | |
| No suffocation /Poisonous hazardous materials around the house | | | U/ | 0 | 0 | |
| No major structural damages (Holes in floors or walls, etc.) | | | 14/ | | | |
| Pets/Animals? Tyes No Up to date vaccination records? | | | W/ | | | |
| Smoke Detectors/Fire Extinguis | | Yes 🗆 No | | 12/ | | |
| Any serious injuries requiring medical attention? | | | □ Yes □/No | | | |
| Any fatalities? | | | 7. 17 S-2 17 - 17 A 2 20 17 17 18 17 18 | | res dv | NO |
| | DOCUMENTALI | | | С | N | N1// |
| DSS 2909 completed for all enrolled children? | | | 7 | | N/A | |
| Emergency Preparedness Plan? | | | 10/ | 0 | 0 | |
| | | ation expired? | | | 0 | 0 |
| Is medication administered? Yes No If yes, is the medication expired? Permission forms from parents signed and dated? | | | 0 | 0 | 0 | |
| Field Trips? If yes, signed parental permissions forms? | | | | | b | |
| ricia riips: ir yes, signed pare | STAFFING & SUPER | | | ENVALUE: | NEW TO | 42050 |
| | | | | С | N | |
| Staff observed were qualified? | | | 1.7 | | | |
| Training hours up-to-date? 63-13-825 | | | 1 | | | |
| Is provider over capacity? | | | | n) | res 🖬 | No. |
| Number of children observed: | | | 3 | | | |
| | | | | | | |
| | | No violations noted at th | a standard and and and and and and and and and an | 250 | MEST | H2167 |
| C = Compliant with Regulation - N | m Managementions with Description | | | | | |

Signature of Child Care Licensing Specialist: ___