## South Carolina Department of Social Services Office of Child Care Licensing

## VIRTUAL INSPECTION VISIT FOR REGISTERED FAMILY CHILD CARE HOMES DUE TO THE COVID19 EMERGENCY

or Name: Lora Duvall #: 5896	Dai Type of Inspection: Menewal		15-2 Time of Ins	spection: _	10.	00
	Type of moperation Enteriorist	Bronow op (ong	ina inspection date			
s: 734 N. Fishtrap Rd. EASLE one #: 864-385-9930 in address? □ Yes Ye No apacity: 6	Any changes in contact info (Phone/ Zoning restrictions = Yes = No Items to be posted: = Registration	Email/Fax)?   Yes		Care? DY	es to	No
he following: Verified Liability In	surance 63-13-210 Pes Mo If no, ve	erify signed statements	s from parents. MarYes □	No		
A CONTRACTOR OF THE STATE OF TH	IOME INSPECTION (HEALTH, SANITA	TION, & SAFETY)	15 to 150	<b>***</b>	81 J A	MAL.
				С	N	N/A
Kitchen (sharp objects, cleaning supplies, etc. inaccessible to children)				19/		
Living room (no excessive clutter, etc.)				<b>V</b>		0
Bedrooms (no children unsupervised, guns or drugs, etc)				10/	0	
Sleep Arrangements (no Pack-N-Plays)				10/	a	0
Cribs meet CPSC requirements				13/		p
Bathrooms (no visible mold, etc.)				12/		
Garage/Shed (secured if harmful items inside)						ov.
Outside/Playground (sharp edges, rusty points, fence if ditches, accessible to street)				8		0
Multiple floor levels?				□ Yes to No		
No suffocation /Poisonous hazardous materials around the house				60/	Ġ	
No major structural damages (Holes in floors or walls, etc.)				₩/		
Pets/Animals? ☐ Yes No				D.	0	V
Smoke Detectors/Fire Extinguishers? If not, TA provided 🗆 Yes 🗇 No				Ď.		
Any serious injuries requiring medical attention?				□ Yes □√No		
Any fatalities?				□ Yes ou/No		
	DOCUMENTATION	ALUCY TO STATE				
				C	N	N/A
DSS 2909 completed for all enrolled children?				ù/		
<b>Emergency Preparedness Pla</b>				8		
Is medication administered?		expired?		В		S/
Permission forms from paren						<b>5</b>
Field Trips? If yes, signed parental permissions forms?						10
Average of States Printer	STAFFING & SUPERVISIO	N		S. R. Liller		
				C	N	
Staff observed were qualified	?			N/	Ď	
Training hours up-to-date? 63-13-825				4	0	
Is provider over capacity?					Yes 🚾	Ńο
Number of children observed	:	<del></del>		1	<del>\</del>	
	N = Noncompliant with Regulation No	violations noted at the				

Signature of Director/Operator/Designee: (no signature required due to virtual inspection completed)

Signature of Child Care Licensing Specialist: