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

## INSPECTION VISIT FORM FOR REGISTERED FAMILY CHILD CARE HOMES

Operator Name: Helen Hopkins	/	Date of Inspec	tion: 10)	18/21	Time of Inspectio	n: 10	1:45Am
Permit #: 18296	Type of Inspection: Annual	□ Complaint □	Renewal	□ Follow (	Up (original inspec	tion dat	te '
Address: 2408 Sharpeshill Road Gasto	in, SC 29053		Reaso Hours	n for Follows of Operati	w up: opending de ion: 24 hours M-F	ficienci	es uself-repor
Change in address?   Yes by No	Any changes in contact info (Pi Zoning restrictions - Yes - No	hone/Email/Fax)?	?   Yes		Overnight Care?		<del>□ N</del> o
Total Capacity: 6 Verify the following: Verified Liability Insu	Items to be posted: Registration	n	statements	from parer	nts. ☑ Yes □ No		

HOME INSPECTION (HEALTH, SANITATION, & SAFETY)					
	C	N	N/A		
Kitchen (sharp objects, cleaning supplies, etc. inaccessible to children)			0		
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			9/		
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)	9	-			
Multiple floor levels?			440		
No suffocation /Poisonous hazardous materials around the house					
No major structural damages (Holes in floors or walls, etc.)			0		
Pets/Animals? ☐ Yes ☑ No Up to date vaccination records?			3		
Smoke Detectors/Fire Extinguishers? If not, TA provided □Yes □ No			-		
Any serious injuries requiring medical attention?					
Any fatalities?			□ Yes ■ No		
DOCUMENTATION		100 🗅	110		
	С	N	N/A		
DSS 2909 completed for all enrolled children?					
Emergency Preparedness Plan?					
Is medication administered? ☐ Yes ☐ Ho If yes, is the medication expired?					
Permission forms from parents signed and dated?			8		
Field Trips? If yes, signed parental permissions forms? ☐ Yes → No			D'		
STAFFING & SUPERVISION			, <u>,</u> ,		
	С	N			
Staff observed were qualified?					
Training hours up-to-date? 63-13-825					
Is provider over capacity?			4.		
Number of children observed:			□ Yes 🗷 No		
C = Compliant with Regulation - N = Noncompliant with Regulation   No violations noted at the time of violations					

<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: 10 - 18 - 202 | Refused to sig

Signature of Child Care Licensing Specialist:

Date: 10/12/202