South Carolina Department of Social Services Office of Child Care Licensing

INSPECTION VISIT FORM FOR REGISTERED FAMILY CHILD CARE HOMES

Operator Name: Lila Lewis Ann	Type of Inspection: Annual	Date of Inspection; 313	5172	Time of Inspection:	4:10 _a m
Permit #: 9052	Type of Inspection: Annual	□ Complaint □Renewal	Follow	Up (original inspection	date)
8.7				w up: pending deficie	
Address: 564 Pruitt Road SENECA, S	C 29678	Hour	rs of Operat	ion: M-F6:30a-5:00p	•
Telephone #: 864-882-2805	Any changes in contact info (F	Phone/Email/Fax)? □ Yes	⊵ No	Overnight Care? - \	res ₩No
Change in address? Yes No	Zoning restrictions Yes INO				
Total Capacity: 6	Items to be posted: Kegistration	on		/	
Verify the following: Verified Liability In	surance 63-13-210 🛮 Yes 🗹 No If	no, verify signed statement	ts from parer	nts. 1 Yes 🗆 No	
		•	•		

HOME INSPECTION (HEALTH, SANITATION, & SAF	ETY)					
	C	T	N	N/A		
Kitchen (sharp objects, cleaning supplies, etc. inaccessible to children)						
Living room (no excessive clutter, etc.)			D.			
Bedrooms (no children unsupervised, guns or drugs, etc)			0			
Sleep Arrangements (no Pack-N-Plays)				. 🗆		
Cribs meet CPSC requirements	W	才		Ö		
Bathrooms (no visible mold, etc.)	<u>u</u>	7				
Garage/Shed (secured if harmful items inside)				Ò		
Outside/Playground (sharp edges, rusty points, fence if ditches, accessible to street)						
Multiple floor levels?			Pes VNo			
No suffocation /Poisonous hazardous materials around the house			0			
No major structural damages (Holes in floors or walls, etc.)			0			
Pets/Animals? ☐ Yes ☑ No Up to date vaccination records?				\		
Smoke Detectors/Fire Extinguishers? If not, TA provided ☐ Yes ☐ No				0		
Any serious injuries requiring medical attention?			□ Yes 1211√10			
Any fatalities?		□ Y	es 🗷	No		
		□ Y	es e	No		
Any fatalities?		_ Y	es e	√No N/A		
Any fatalities?		OY	Party.			
Any fatalities? DOCUMENTATION DSS 2909 completed for all enrolled children? Emergency Preparedness Plan?	C	- Y	N	N/A		
Any fatalities? DOCUMENTATION DSS 2909 completed for all enrolled children?	C Vd	- Y	N D	N/A		
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 好	- Y	N O	N/A		
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Supervision: 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:

Date:

Signature of Child Care Licensing Specialist: