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

## INSPECTION VISIT FORM FOR REGISTERED FAMILY CHILD CARE HOMES

perator Name: Laketha Nechel Wigg	ins	Date of Inspe	ection: <u>니</u>	B/2022	Time of Inspectio	n: 10'.0	lam	
ermit #: 25297	Type of Inspection:   Annual	□ Complaint						
			Reaso	n for Follov	v up: □pending d €	ficienci	es uself-repor	
.ddress: 9060 Parlor Drive LADSON, SC 29456		Hours of Operation:						
elephone #: 854-206-2898	Any changes in contact info (Pi	hone/Email/Fax	)? 🗆 Yes	<b>∠</b> No	Overnight Care?	□ Yes	<b>d</b> No	
hange in address?   Yes   No	Zoning restrictions - Yes / No			<u> </u>				
otal Capacity: 6	Items to be posted:   Registratio	n						
erify the following: Verified Liability Ins	urance 63-13-210 - Yes /No If	no, verify signed	l statements	s from parent	ts. of Yes □ No			
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HOME INSPECTION (HEALTH, SANITATION, & SAFETY)	50 10		- ***			
	С	N	N/A			
Kitchen (sharp objects, cleaning supplies, etc. inaccessible to children)	<b></b>					
Living room (no excessive clutter, etc.)			0			
Bedrooms (no children unsupervised, guns or drugs, etc)						
Sleep Arrangements (no Pack-N-Plays)						
Cribs meet CPSC requirements						
Bathrooms (no visible mold, etc.)			0			
Garage/Shed (secured if harmful items inside)			0			
Outside/Playground (sharp edges, rusty points, fence if ditches, accessible to street)	<i>D</i> /					
Multiple floor levels?			∡Yes □ No			
No suffocation /Poisonous hazardous materials around the house	ø					
No major structural damages (Holes in floors or walls, etc.)	7					
Pets/Animals? ✓ Yes □ No Up to date vaccination records?			0			
Smoke Detectors/Fire Extinguishers? If not, TA provided						
Any serious injuries requiring medical attention?		Yes 🗷				
Any fatalities?			□ Yes 🗷 No			
DOCUMENTATION						
	С	Ν	N/A			
DSS 2909 completed for all enrolled children?						
Emergency Preparedness Plan?						
Is medication administered? ☐ Yes ☑ No If yes, is the medication expired?			J22			
Permission forms from parents signed and dated?						
Field Trips? If yes, signed parental permissions forms? 🗹 Yes 🗆 No						
STAFFING & SUPERVISION						
	С	N				
Staff observed were qualified?			İ			
Training hours up-to-date? 63-13-825			1			
Is provider over capacity?			□ Yes 🗷 No			
Number of children observed:			5			

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:

Date:

Signature of Child Care Licensing Specialist: