## South Carolina Department of Social Services Office of Child Care Licensing INSPECTION VISIT FORM FOR REGISTERED FAMILY CHILD CARE HOMES

Operator Name: Darlene Bush Permit #: 25284	Type of Inspection: 🗹 Annual	Date of Inspe	ction: <u>04</u> ⊐ <b>Renewal</b>	27/22 1	Time of Inspection: o (original inspection	<u> 3_0/</u> )
Address: 809 Wickham Lane COLUMB	IA, SC 29229		Reaso Hours	n for Follow of Operation	<b>up: □pending d eficie</b> n:	ncies aself-report
Change in address? D Yes 121No	Any changes in contact info (P. Zoning restrictions & Yeş D No		)? □ Yes	∎no (	Overnight Care? DY	es 🛯 No
Total Capacity: 5 Verify the following: Verified Liability Insu	Items to be posted: @ Registratio			<i>c</i>		

verify the following: Verified Liability Insurance 63-13-210 🗆 Yes 🗹 No. If no, verify signed statements from parents. 🗹 Yes 🗆 No.

## HOME INSPECTION (HEALTH, SANITATION, & SAFETY) С Ν N/A Kitchen (sharp objects, cleaning supplies, etc. inaccessible to children) ď D Living room (no excessive clutter, etc.) ď D Bedrooms (no children unsupervised, guns or drugs, etc) 0^ Sleep Arrangements (no Pack-N-Plays) ø D **Cribs meet CPSC requirements** ď Bathrooms (no visible mold, etc.) Garage/Shed (secured if harmful items inside) **P** Outside/Playground (sharp edges, rusty points, fence if ditches, accessible to street) Multiple floor levels? res ⊡ No No suffocation /Poisonous hazardous materials around the house • Π No major structural damages (Holes in floors or walls, etc.) Pets/Animals? Yes No Up to date vaccination records? П 0-Smoke Detectors/Fire Extinguishers? If not, TA provided Pres D No 0 Any serious injuries requiring medical attention? □ Yes iz No Any fatalities? D Yes prilo DOCUMENTATION С Ν N/A DSS 2909 completed for all enrolled children? ฮ์ D 0 **Emergency Preparedness Plan?** ď Is medication administered? Yes Vo If yes, is the medication expired? Ο i۳ Permission forms from parents signed and dated? Ċ **0**^ Field Trips? If yes, signed parental permissions forms? È Ö **STAFFING & SUPERVISION** С Ν Staff observed were gualified? Þ Training hours up-to-date? 63-13-825 d d Is provider over capacity? □ Yes 🖬 No Number of children observed: C = Compliant with Regulation - N = Noncompliant with Regulation No violations noted at the time of visit Iz

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: A. Marlene, U. Bush	Date: X 4 27 22  Refused to sign
Signature of Operator/Emergency Person: A. Marlene, U. Bush Signature of Child Care Licensing Specialist: <u>Rebecca Wordward</u>	Date: 14/27/22

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