South Carolina Department of Social Services Office of Child Care Licensing

erator Name: Shannon Whitten Pressley

Signature of Operator/Emergency Persons

Signature of Child Care Licensing Specialists

rmit #: 21715

INSPECTION VISIT FORM FOR REGISTERED FAMILY CHILD CARE HOMES Date of Inspection: Line of Inspection: Il: 02 YTM

Type of Inspection: ☐ Annual ☐ Complaint ☐ Renewal ☐ Follow Up (original inspection date_

Reason for Follow up: pending deficiencies self-report

Overnight Care?

Yes No

Hours of Operation: M-F5:00p-12:00a

HOME INSPECTION (HEALTH, SANITATION, & SAFETTY		N	N/A
HOME INSPECTION (HEALTH, SANITATION, & SAFETY)	c		IV/
Kitchen (sharp objects, cleaning supplies, etc. inaccessible to children)	- 8	0	0
Kitchen (sharp objects, cleaning supplies, etc.)	1		
Living room (no excessive clutter, etc.) Bedrooms (no children unsupervised, guns or drugs, etc)	1		
Bedrooms (no children unsupervised, guno o			Z
Sleep Arrangements (no Pack-N-Plays)	1		0
Cribs meet CPSC requirements		+	0
Bathrooms (no visible mold, etc.)		1 0	
Garage/Shed (secured if harmful items inside) Outside/Playground (sharp edges, rusty points, fence if ditches, accessible to street)		□ Yes	No.
			0
Multiple floor levels? No suffocation /Poisonous hazardous materials around the house		_	
No suffocation /Poisonous nazardous materials or walls, etc.)			1
No suffocation /Poisonous hazardees No major structural damages (Holes in floors or walls, etc.) No major structural damages (Holes in floors or walls, etc.) Up to date vaccination records?		_	
Pets/Animals?		□ Yes	r∡No
Smoke Detectors/Fire Extinguishers: 11 Hos, top		□ Yes	
Any serious injuries requiring medical attention?	ALERA TELEVISION		
Any fatalities? DOCUMENTATION		N	N/
	A STATE OF THE PARTY OF THE PAR		- [
Il annelled children?		-	, (
DSS 2909 completed for all enrolled children?] [
Emergency Preparedness Plan? Is medication administered? Yes No If yes, is the medication expired? Is medication administered?] [, 1
			3
Permission forms from parents signed and dated? Permission forms from parents signed and dated? Field Trips? If yes, signed parental permissions forms? STAFFING & SUPERVISION	2 - 1 TO TOTAL	W 1757	
Field Trips? If yes, signed parental permission STAFFING & SUPERVISION		C	N
		- + -	
Staff observed were qualified?			s a No
Training hours up-to-date? 63-13-825			と
Is provider over capacity?			
Is provider over capacity? Number of children observed:			ALYZHUNUN.