South Carolina Department of Social Secuses Office of Child Care Licensing

VIRTUAL INSPECTION VISIT FOR REGISTERED FAMILY CHILD CARE HOMES DUE TO THE COVID19 EMERGENCY

| Permit #: 18412 | Type of Inspection: defense Date of Inspection: 6/30/2022 Time of Inspection: 8:42am - 9:05am Follow Up (original inspection date) |
|---|---|
| Total Capacity: 6 | Any changes in contact info (Phone/Email/Fax)? Yes No Overnight Care? Yes No Items to be posted: Special to the contact info (Phone/Email/Fax)? |
| Verify the following: Verified Liability Insu | rance 63-13-210 Yes No If no, verify signed statements from parents. Yes No |

| HOME INSPECTION (HEALTH, SANITATION, & SAFETY) | - Termina | a e | |
|--|------------|-------------|----------|
| White the state of | С | N | N/A |
| Kitchen (sharp objects, cleaning supplies, etc. inaccessible to children) | | | |
| Living room (no excessive clutter, etc.) | | | <u> </u> |
| Bedrooms (no children unsupervised, guns or drugs, etc) | | | |
| Sleep Arrangements (no Pack-N-Plays) | | 0 | |
| Cribs meet CPSC requirements | | <u> </u> | |
| 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) | <i>d</i> | | |
| Multiple floor levels? | | | <u> </u> |
| No suffocation / Poisonous hazardous materials around the house | | □ Yes tz No | |
| No major structural damages (Holes in floors or walls, etc.) | i⊠′ ,⊠′ | | |
| Pets/Animals? Yes No Up to date vaccination records? | | | ū |
| Smoke Detectors/Fire Extinguishers? If not, TA provided by es T. No. | | | |
| Any serious injuries requiring medical attention? | | | |
| Any fatalities? | | □ Yes மz No | |
| DOCUMENTATION | | □ Yes ta∕No | |
| | С | N | |
| DSS 2909 completed for all enrolled children? | | | N/A |
| Emergency Preparedness Plan? | | | |
| Is medication administered? (A Yes (1) No If yes, is the medication expired? | | | |
| Permission forms from parents signed and dated? | | | |
| Field Trips? If yes, signed parental permissions forms? Yes No | | | 0 |
| | | 0 | |
| STAFFING & SUPERVISION | | | |
| Staff observed were qualified? | C | N | |
| Training hours up-to-date? 63-13-825 | | | |
| Is provider over capacity? | | | 1 |
| | | □ Yes ŁrNo | |
| | | | |
| Number of children observed: | | 2 | |
| | | 2 | |

<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 Director/Operator/Designee: (no signature required due to virtual inspection completed) | | | | | | |
|--|------|------------------------|--|--|--|--|
| Signature of Child Care Licensing Specialist: | whip | Date: <u>6/30/2022</u> | | | | |