South Carolina Department of Social Services Office of Child Care Licensing

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

Operator Name: Judy Ann Noble Permit #: 18153	Type of Inspection: ©Renewal	Date of Inspection: 10 Follow Up (original)	inal inspect	Time of Inspection:	Dam
Address: 337 Babington Way COLUME Telephone #: 803-834-5137 Change in address? Yes No	Any changes in contact info (Ph Zoning restrictions □ Yes ☑ No _	one/Email/Fax)? □ Yes	s of Operation	on: M-F7:00a-4:∃0p Overnight Care? □ Yes	₩ No
Total Capacity: 6	Items to be posted: Registration				
Verify the following: Verified Liability Insu	ırance 63-13-210 □ Yes ⊡Ño If n	o, verify signed statements	from parent	ts., □ Yes □ No	

HOME INSPECTION (HEALTH, SANITATION, & SAFETY)			
	C.	N	N/A
Kitchen (sharp objects, cleaning supplies, etc. inaccessible to children)	N/		
Living room (no excessive clutter, etc.)	9/	-	-
Bedrooms (no children unsupervised, guns or drugs, etc)	<u> </u>		
Sleep Arrangements (no Pack-N-Plays)	9/		-
Cribs meet CPSC requirements		<u> </u>	
Bathrooms (no visible mold, etc.)			
Garage/Shed (secured if harmful items inside)		7 -	
Outside/Playground (sharp edges, rusty points, fence if ditches, accessible to street)		70	0
Multiple floor levels?		Yes 🗆	No
No suffocation /Poisonous hazardous materials around the house	V	- 0	$\overline{}$
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	7		Q /
Any serious injuries requiring medical attention?		Yes 📭	
Any fatalities?		Yes d	
DOCUMENTATION		100 1	NO
	С	N	N/A
DSS 2909 completed for all enrolled children?	OP/	70	
Emergency Preparedness Plan?	d√		
Is medication administered? Yes No If yes, is the medication expired?			
Permission forms from parents signed and dated?	12	. 0	
Field Trips? If yes, signed parental permissions forms? Tyes No	17/	, <u>u</u>	
STAFFING & SUPERVISION			
	С	. Al	
Staff observed were qualified?		> N	ł
Training hours up-to-date? 63-13-825	i iz		1
Is provider over capacity?			<u> </u>
Number of children observed:		Yes 🖈	<u> 100 </u>
	+	\bigcirc	
C = Compliant with Regulation - N = Noncompliant with Regulation No violations noted at the time of visit		_	

<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 in	spection completed)
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