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

## INSPECTION VISIT FORM FOR REGISTERED FAMILY CHILD CARE HOMES

erator Name: Ashley Campbell mit #: 24489	Type of Inspection: Annual Complaint Renewal Follo	Time of Inspection:	945	îm
Iress: 210 Cherry St. BELTON, SC ephone #: 864-392-1000 nge in address? Yes No al Capacity: 6 ify the following: Verified Liability Ins	20627 Keason for Fo	llow up: □pending defici ration: M-F7:00a-4:00p Overnight Care? □	iencies	□self-re
н	OME INSPECTION (HEALTH, SANITATION, & SAFETY)	er and the second	y Mer	
Kitchen Johann ahianta alaa t		C	N	N/A
Kitchen (sharp objects, cleaning supplies, etc. inaccessible to children)  Living room (no excessive clutter, etc.)				
Bedrooms (no children unquine in a				
Bedrooms (no children unsupervised, guns or drugs, etc) Sleep Arrangements (no Pack-N-Plays)			0	
Cribs meet CPSC requirements				
Bathrooms (no visible mold, etc.)			0	
Garage/Shed (secured if harmful items inside)				-
Outside/Playground (sharp edges, rusty points, fence if ditches, accessible to street)				
Multiple floor levels?			□ Yes ⊅ No	
No suffocation /Poisonous hazardous materials around the house				
No major structural damages (Holes in floors or walls, etc.)				<u> </u>
Pets/Animals? ☑ Yes ☐ No Up to date vaccination records?			-	
Smoke Detectors/Fire Extinguishers? If not, TA provided ☐ Yes ☐ No			-	
Any serious injuries requiring medical attention?			□ Yes ¬No	
Any fatalities?			□ Yes 교 No	
	DOCUMENTATION			STORY
DSS 2909 completed for all en	olled children?	С	N	N/A
and an em	anea cilial cit;		, ,	4

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.

If yes, is the medication expired?

STAFFING & SUPERVISION

Y

2

N

□ Yes □ No

☐ Refused to sign

Signature of Child Care Licensing Specialist:

Signature of Operator/Emergency Person

Emergency Preparedness Plan?

Staff observed were qualified?

Number of children observed:

Is provider over capacity?

Training hours up-to-date? 63-13-825

Is medication administered? ☐ Yes ☑ No

Permission forms from parents signed and dated?

Field Trips? If yes, signed parental permissions forms? ☐ Yes ☐ No