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

perator Name: Marian L Smalls	Type of Inspection: L Annual	Date of Inspection: 03	13/2024	Time of Inspection	n: 10:30	am
ermit #: 9965	Type of Inspection: L Annual	□ Complaint ✓ Renewal	6 Follow U	Jp (original inspec	tion date_)
		Reaso	on for Follow	v up: □pending de	ficiencies	□self-repor
.ddress: 1404 Witter Street Charleston	, SC 29412			on: M-F7:30a-5:30		
	Any changes in contact info (P Zoning restrictions □ Yes ➡No					Nо
	Items to be posted: Registration	n		_		
erify the following: Verified Liability Insu	rance 63-13-210 Yes - No If	no, verify signed statement	s from parent	ts. Yes No		

HOME INSPECTION (HEALTH, SANITATION, & SAFETY)	ď.,	15 7	FFE S		
	С	. N	N/A		
Kitchen (sharp objects, cleaning supplies, etc. inaccessible to children)					
Living room (no excessive clutter, etc.)					
Bedrooms (no children unsupervised, guns or drugs, etc)					
Sleep Arrangements (no Pack-N-Plays)					
Cribs meet CPSC requirements					
Bathrooms (no visible mold, etc.)			0		
Garage/Shed (secured if harmful items inside)			V		
Outside/Playground (sharp edges, rusty points, fence if ditches, accessible to street)					
Multiple floor levels?		Yes M	No		
No suffocation /Poisonous hazardous materials around the house					
No major structural damages (Holes in floors or walls, etc.)					
Pets/Animals? ☐ Yes ☐ No Up to date vaccination records?			9		
Smoke Detectors/Fire Extinguishers? If not, TA provided ☐ Yes ☐ No	5		_ []		
Any serious injuries requiring medical attention?		Yes 📭	No		
Any fatalities?		Yes 😼	No		
DOCUMENTATION					
	С	N	N/A		
DSS 2909 completed for all enrolled children?					
Emergency Preparedness Plan?					
Is medication administered? ☐ Yes ☐ No If yes, is the medication expired?			V		
Permission forms from parents signed and dated?					
Field Trips? If yes, signed parental permissions forms? ☐ Yes ☐ No					
STAFFING & SUPERVISION					
	С	N			
Staff observed were qualified?					
Training hours up-to-date? 63-13-825			/		
Is provider over capacity?			□ Yes ☑ No		
Number of children observed:			5		
			$\neg\neg$		
C = Compliant with Pagulation N = Nancompliant with Pagulation No violations nated at the time of violation	00.000000				

C = Compliant with Regulation - N = Noncompliant with Regulation	No violations noted at the time of visit 🗹
Supervision: Care provided to an individual child or group of children. Adequa	te supervision requires awareness of and responsibility for the ongoing activity of each
	ity 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 helded	(0)
	1100 Nhlls 3-13-24
Signature of Operator/Emergency Person:	Refused to sign
Signature of Child Care Licensing Specialist:	Date: 0311312024