South Carolina Department of Social Services Office of Child Care Licensing

INSPECTION VISIT FORM FOR REGISTERED FAMILY CHILD CARE HOMES

perator Name: Ethel Deloris Mack

Signature of Child Care Licensing Specialist:

ermit #: 9896

Type of Inspection: Annual Complaint Renewal Follow Up (original inspection date_____)

Reason for Follow up: pending deficiencies eself-report

	HOME INSPECTION (HEALTH, SANITATION, & SAFETY)	
	The state of the s	C N N
Kitchen (sharp objects, clean	ing supplies, etc. inaccessible to children)	
Living room (no excessive clu	- ii	10/10
Bedrooms (no children unsup		
Sleep Arrangements (no Pack		2
Cribs meet CPSC requirement		1
Bathrooms (no visible mold, o		S
Garage/Shed (secured if harm		
	dges, rusty points, fence if ditches, accessible to street)	
Multiple floor levels?		□ Yes ♂No
	azardous materials around the house	b ∕ □
<u>'</u>	(Holes in floors or walls, etc.)	V
Pets/Animals? ☐ Yes ☑ No		
	uishers? If not, TA provided 👿 Yes 🗆 No	V -
Any serious injuries requiring medical attention?		□ Yes WNo
Any fatalities?		□ Yes No
	DOCUMENTATION	Market Control of the Control
		CNN
DSS 2909 completed for all e	enrolled children?	
Emergency Preparedness Plan?		
Is medication administered? ✓ Yes ☐ No If yes, is the medication expired?		10/ 0
Permission forms from parents signed and dated?		8 0
Field Trips? If yes, signed parental permissions forms? Yes No		
	STAFFING & SUPERVISION	THE RESERVE OF THE PERSON OF T
		C N
Staff observed were qualified]?	
Stall observed were dualilled		4/
·		
Training hours up-to-date? 63		⊓ Yes ₁₽₄Ño.
Training hours up-to-date? 63 Is provider over capacity?		□ Yes op No
Training hours up-to-date? 63		□ Yes n No