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

## INSPECTION VISIT FORM FOR REGISTERED FAMILY CHILD CARE HOMES

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Operator Name: Jessica Hairston	Date of Inspection: 1/8-24 Time of Inspection:
Permit #: 25866	Type of Inspection:   Annual  Complaint  Fenewal  Follow Up (original inspection date)
	Reason for Follow up: pending deficiencies pelf-report
\ddress: 57 Pine Creek Court Ext GRi	EENVILLE, SC 29605 Hours of Operation:
Telephone #: 864-305-0298	Any changes in contact info (Phone/Email/Fax)? □ Yes 💆 No Overnight Care? □ Yes 🖼 🕊 🗸
Change in address? □ Yes • No	Zoning restrictions   Yes DAO
Total Capacity: 6	Items to be posted: 🕳 Registration
/erify the following: Verified Liability Ins	urance 63-13-210   Yes No If no, verify signed statements from parents. Yes No
elephone #: 864-305-0298 Change in address?   Yes Violation Yes Violation Yes Violation Yes	Any changes in contact info (Phone/Email/Fax)? □ Yes 🗷 No Overnight Care? □ Yes 🖼 🕶

HOME INSPECTION (HEALTH, SANITATION, & SAFETY)					
	С	N	N/A		
Kitchen (sharp objects, cleaning supplies, etc. inaccessible to children)					
Living room (no excessive clutter, etc.)	<b>1</b>	Ü.	0		
Bedrooms (no children unsupervised, guns or drugs, etc)	9/		0		
Sleep Arrangements (no Pack-N-Plays)					
Cribs meet CPSC requirements			1		
Bathrooms (no visible mold, etc.)	0				
Garage/Shed (secured if harmful items inside)		0			
Outside/Playground (sharp edges, rusty points, fence if ditches, accessible to street)	18				
Multiple floor levels?	D	r Yes □ No			
No suffocation / Poisonous hazardous materials around the house	10/	0			
No major structural damages (Holes in floors or walls, etc.)	V				
Pets/Animals? ☐ Yes ☐ Wo Up to date vaccination records?			196		
Smoke Detectors/Fire Extinguishers? If not, TA provided ☐ Yes ☐ No			0		
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?	13/				
Is medication administered? ☐ Yes ▼ No If yes, is the medication expired?			10		
Permission forms from parents signed and dated?		0	F. Salar		
Field Trips? If yes, signed parental permissions forms? ☐ Yes ☐ No	W				
STAFFING & SUPERVISION		7 61			
	С	N			
Staff observed were qualified?	1		1		
Training hours up-to-date? 63-13-825					
Is provider over capacity?			□ Yes ► No		
Number of children observed:		5			
	1		-		
C = Compliant with Regulation - N = Noncompliant with Population   No violetions noted at the time of viets			1,0100		

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.

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Signature of Operator/Emergency Person:	Jerr	a Hough	Date:	71934	☐ Refused to sign
Signature of Child Care Licensing Specialist					