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

Address: 106 Blackfoot Rd, NINETY SIX, SC 29666 Felephone #: 803-597-8848 Any changes in contact info (Phone/Email/Fax)? Yes No Overnight Care? Yes Yes No Items to be posted: **License 114-528 D(2) Menu III D(1)(c) // Arify the following: Verified Liability Insurance 63-13-210 Yes No If no, verify signed statements from parents. Yes No MA HEALTH: SANITATION & SAFETY - SUGGESTED STANDARDS	Reason for Follow up: c clear up pending deficiency color. Self-Report Hours of Operation: M-F; 6:00am-7:00pm Overnight Care? color. Self-Report Hours of Operation: M-F; 6:00am-7:00pm Overnight Care? color. Self-Report Policiense 114-528 D(2) color. Menu III D(1)(c) Yes color. If no, verify signed statements from parents. color. Yes color. No and ANITATION & SAFETY - SUGGESTED STANDARDS C N N/A (a) color. A Medicine labeled & stored property III A(4) color. Children's faces/hands clean III A(2)(b) color. Children's faces/hands clean III A(1)(b) colo	Operator Name: Dion Permit #: 26116		ual	□ C	Date ompla	of Inspection: 1/15/25 Time of Inspection: 9:3			- }		
HEALTH, SANITATION & SAFETY - SUGGESTED STANDARDS C N N/A	ANITATION & SAFETY - SUGGESTED STANDARDS C N N/A (a)	Felephone #: 803-597- Change in address? □ Y	t Rd, NINETY SIX, SC 29666 -8848 Any changes in contact info es No Zoning restrictions preserved.	(Pho	ne/E	mail/F	Reason for Follow up: clear up pending deficiency		_	_/ port		
Did you observe proper diaper changing practices III A(2)(a)	C N N/A (a)		fied Liability Insurance 63-13-210 & Yes 🗆	No I	lf no,	verify s	signed statements from parents. Yes No N/A					
Did you observe proper diaper changing practices III A(2)(a)	(a)											
First aid supplies in home III A (5-6) Any pets/animals? IV B(1)(g) Type of animal (Dog, cat, etc.) Lighting & ventilation sufficient IV B(1)(f) Carpet, ceiling, floors, & rugs are clean & secure IV B(1)(d) Soap & single service towels in restrooms IV B(3)(c) Sink area has hot & cold water IV B(2)(a-b) Sink area has hot & cold water IV B(2)(a-b) Strangulation, choking, or suffocation hazards IV A(3)(a) By Colden are a sequence of glass, paper & other litter IV B(1)(b) Any serious injuries requiring medical attention? PROGRAM—SUGGESTED STANDARDS C N N/A Daily schedule-developmentally appropriate activities for children III C(1) Straff loserved were qualified? 63-13-830 (C) Proper supervision observed? Training hours up-to-date? 63-13-830 (C) Training hours up-to-date? 63-13-830 (C) Training hours up-to-date? 63-13-825	Children's faces/hands clean III A(2)(b) Yes No Have pets/animals been vaccinated? IV B(1)(g) Outdoor toys & equipment in safe, good condition IV A(3)(b) Outdoor toys & equipment IV A(3)(b)	Did you observe prop	er dianer changing practices III A/2Va)		_		Modining labeled 9 stored granady IN A44)	_		+ -		
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Suggested Standards are mandated requirements for Family Child Care Home operators who elect to be licensed												
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 ne and having ready access to children in order to intervene when needed.	is and accountability for their care. Adequate supervision also requires the operator and/or staff being near	child, knowledge of a and having ready acc	ctivity requirements and children's needs and a	accoul	dequa ntabil	ite supe	heir care. Adequate supervision also requires the operator and/or sta	ff being	g nea			

Signature of Child Care Licensing Specialist: _

Date: _