South Carolina Department of Social Services

Office of Child Care Licensing VIRTUAL INSPECTION VISIT FOR REGISTERED FAMILY CHILD CARE HOMES DUE TO THE COVID19 EMERGENCY

perator Name: Margaret McElwee ermit #: 23743	Type of Inspection: ARenewal	Date of Inspection:	Time of Inspection date	ction: _3	3:100	<u></u>
ddress: 111 Mcelwee Estates Road if elephone #: 843-784-3068 hange in address? Yes No otal Capacity: 6 erify the following: Verified Liability Ins	Any changes in contact info (Ph Zoning restrictions = Yes = No _ Items to be posted: Registration	one/Email/Fax)? Yes	<u> </u>	e? ¬Y		Ńo
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Н	OME INSPECTION (HEALTH, SAN	JITATION & SAFETY)		100	71	
Section 19 to the second		ination, a saferry				NUA
Kitchen (sharp objects, cleanin	g supplies, etc. inaccessible to chi	ildran)		С	N	N/A
Living room (no excessive clutt	er, etc.)	iluren)				
Bedrooms (no children unsupervised, guns or drugs, etc)				Ø		
Sleep Arrangements (no Pack-N-Plays)				2		
Cribs meet CPSC requirements						
Bathrooms (no visible mold, etc.)					<u> </u>	
Garage/Shed (secured if harmful items inside)				2		
Outside/Playground (sharp edges, rusty points, fence if ditches, accessible to street)				Ø		
Multiple floor levels?				<u> </u>		
No suffocation /Poisonous hazardous materials around the house				□ Yes ☑ No		
No major structural damages (e		
Pets/Animals? ☑ Yes □ No	Up to date vaccination reco	rds?		B /		
Smoke Detectors/Fire Extinguis		es □ No		2		
Any serious injuries requiring medical attention?						
Any fatalities?				□ Yes □ No		
	DOCUMENTATIO	DN .		- 0	162 L	VU
STATE OF THE PARTY				С	NI.	ALIA
DSS 2909 completed for all en	rolled children?				_N	N/A
Emergency Preparedness Plan?				4		
Is medication administered? ✓ Yes □ No If yes, is the medication expired?				10		
Permission forms from parents signed and dated?						
Field Trips? If yes, signed parental permissions forms? ☐ Yes ☐ No						
STAFFING & SUPERVISION						
					N. T	
Staff observed were qualified?			The 100, 255 Miles	C/	_N_	
Training hours up-to-date? 63-1	13-825			6		
Is provider over capacity?						10
Number of children observed:					es er	NO -
C = Compliant with Pagulation M	Management and the Property of	THE HOUSE WAS AND THE PARTY		A CAPACILIA		
C = Compliant with Regulation - N	- Noncompliant with Regulation	No violations noted at the	time of visit 🗆 💮 💮			
<u>Supervision</u> : Care provided to an individe child, knowledge of activity requirements and having ready access to children in or	and children's needs and accountabilit rder to intervene when needed.	y for their care. Adequate su	pervision also requires the opera	ongoing ator and/c	activity or staff b	of each eing near
Signature of Director/Operator/Desi	gnee: (no signature required due to	virtual inspection comple	ted)			
Signature of Child Care Licensing S	Specialist:		Date: 5 /20/21			