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

Operator Name: Teresa Childers		Date of Inspection:	12021	Time of Inspection: 5	CO 11/1.
Permit #: 9146	Type of Inspection: Annual	□ Complaint □Renewal	Follow L	p (original inspection dat	(e)
		Reaso	on for Follow	v up: pending dieficienci	es pself-report
Address: 76 Leahs Loop GREELEYVI		Hour	rs of Operati	on: M-F5:00p-9:00n	•
Telephone #: 843-382-9247	Any changes in contact info (P)	none/Email/Eax\? □ Yes	rak No	Overnight Care? - Vos	- New
Change in address? □ Yes ►No	Zoning restrictions - Yes A	TOTAL TOTAL TOTAL	2 140	Overlight oate: 1165	UDINO
Total Capacity: 8 6	Items to be posted: d-Registratio	n			
Verify the following: Verified Liability In:	surance 63-13-210 - Yes to No If	no, verify signed statement	ts from paren	ts. to Yes 🗆 No	

HOME INSPECTION (HEALTH, SANITATION, & SAFETY)	NE.	100	ju ² uvl	
	С	N	N/A	
Kitchen (sharp objects, cleaning supplies, etc. inaccessible to children)				
Living room (no excessive clutter, etc.)			0	
Bedrooms (no children unsupervised, guns or drugs, etc)	D	0	0	
Sleep Arrangements (no Pack-N-Plays)			0	
Cribs meet CPSC requirements			- n	
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)	9	0	0	
Multiple floor levels?			Yes to No	
No suffocation /Poisonous hazardous materials around the house	0	D		
No major structural damages (Holes in floors or walls, etc.)	0	0		
Pets/Animals? Yes Vo Up to date vaccination records?	0	0	0	
Smoke Detectors/Fire Extinguishers? If not, TA provided □ Yes □ No	•	-0	0	
Any serious injuries requiring medical attention?	_	Yes g		
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?			0	
Permission forms from parents signed and dated?				
Field Trips? If yes, signed parental permissions forms? Yes No			0	
STAFFING & SUPERVISION	175		State St	
	С	N		
Staff observed were qualified?				
Training hours up-to-date? 63-13-825			Í	
Is provider over capacity?			Yes R No	
Number of children observed:			8	
C = Compliant with Regulation - N = Noncompliant with Regulation No violations noted at the time of visit (AND P	U3 8 T 195	5+F1K0281	

<u>Supervision</u>: 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: Quisa (MUMUS	Date: 7/6/202/ Refused to sign
Signature of Child Care Licensing Specialist:	1/ men	Date: 7/6/2026
	<i>J</i>	1-10-1-