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 ermit#: | Name: Vanessa Montgomery 8094 | Type of Inspection: Renewal | Date of Inspection: 8 | 23/21 ginal inspect | Time of Inspection: | 4:30 pm |
|------------------------|----------------------------------|---|----------------------------|------------------------|--|---------|
| elephone hange in | address? To res I No | Any changes in contact info (Pho Zoning restrictions Yes | one/Email/Fax)? □ Yes | rs of Operation | on: M-F7:00a-9;00p Overhight Care? □ Ye | es etto |
| otal Capa erify the | | Items to be posted: Registration rance 63-13-210 □ Yes No If no | o, verify signed statement | s from parent | s. auxes - No | · |

| HOME INSPECTION (HEALTH, SANITATION, & SAFETY) | | an la | 100 | |
|--|--|------------|---------------|--|
| MED TO SELECT OF SECURITIES AND SECURITIES AND SECURITIES. | C | N | N/A | |
| Kitchen (sharp objects, cleaning supplies, etc. inaccessible to children) | 0 | 0 | - | |
| Living room (no excessive clutter, etc.) | 0/ | 0 | 0 | |
| Bedrooms (no children unsupervised, guns or drugs, etc) | | | 0 | |
| Sleep Arrangements (no Pack-N-Plays) | 0 | - | 0 | |
| Cribs meet CPSC requirements | | 0 | | |
| Bathrooms (no visible mold, etc.) | 9/ | - 0 | | |
| Garage/Shed (secured if harmful items inside) | | В | | |
| Outside/Playground (sharp edges, rusty points, fence if ditches, accessible to street) | | | 0 | |
| Multiple floor levels? | | | No | |
| No suffocation /Poisonous hazardous materials around the house | - 2 | 0 | | |
| No major structural damages (Holes in floors or walls, etc.) | 1 | 0 | 0 | |
| Pets/Animals? ☐ Yes ☐ No Up to date vaccination records? | | - | 0 | |
| Smoke Detectors/Fire Extinguishers? If not, TA provided | | - | - | |
| Any serious injuries requiring medical attention? | | | | |
| Any fatalities? | | □ Yes □-No | | |
| DOCUMENTATION | | 100 6 | ING | |
| | C | N | N/A | |
| DSS 2909 completed for all enrolled children? | 1 | - | | |
| Emergency Preparedness Plan? | - 2 | 0 | | |
| Is medication administered? Tyes No If yes, is the medication expired? | | 0 | | |
| Permission forms from parents signed and dated? | | | 0 | |
| Field Trips? If yes, signed parental permissions forms? ☐ Yes ☐ No | | 0 | 0 | |
| STAFFING & SUPERVISION | | | | |
| | C | N | -0.000 | |
| Staff observed were qualified? | .0 | _ | | |
| Training hours up-to-date? 63-13-825 | | - | į | |
| Is provider over capacity? | | /95.5 | NI-P | |
| Number of children observed: | | □ Yes □ Ho | | |
| | | _ | $\overline{}$ | |
| C = Compliant with Regulation - N = Noncompliant with Regulation No violations noted at the time of vielt TV | AND STREET, SANS OF STREET, ST | Part and | | |

Supervision: Care provided to an individual child or group of children. Adequate supervision requires awareness of and responsibility for the engoing 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.

| Signatu | re of Director/Operator/Designee | : (no signature r | equired due to | virtual inspection | completed) |
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Signature of Child Care Licensing Specialist: Hamle from Date: 8/23/2021