

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015DR136
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Name of Service:	Little Feat
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Address of Service:	Farranboley House, Clonskeagh Village, Clonskeagh, Dublin 14, Co. Dublin
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Eircode:	D14 XW22
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Name of Registered Provider:	Nicola Darling
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Service type:	Full Day, Part Time, Sessional
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Date(s) of Inspection:	22/04/2024
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Date 2 of Inspection:	23/04/2024
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No of pre-school children:	AM	42	PM	37
Day 2	AM	43	PM	42

Address of the Early Years Inspectorate:	1st floor Trinity Building, IDA Business Park, Southern Cross Road, Bray, Co. Wicklow
Inspection undertaken by:	Sarah Quigley & Fiona Carty
Title:	Early Years Inspectors

Authority to Inspect

The Tusla Early Years Inspectorate carries out inspections of Early Years Services under Section 58(J) of the Child Care Act 1991 (as inserted by Section 92 of the Child and Family Agency Act 2013).

Conditions if applicable	Not applicable
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Description of service

Little Feat is a full day care service which is located in an urban, residential area of Clonskeagh, Dublin 14. A part time and sessional service is also available. A service is currently provided to children aged between 6 months and 6 years and is open from Monday to Friday between 08:00 and 18:00 hours. The premises operates from the ground floor of a period domestic dwelling which has been purposely adapted for use as an early years service. The service consists of five care rooms, four of which are in the main building, and a purpose-built room to the rear of the premises. A large outdoor play area is available to the rear of the premises.

Staffing

The service currently employs 12 adults, including the registered provider and a cook. On the 1st day of inspection 11 adults were present including an adult on a work placement programme and an adult employed to provide relief cover through an external agency. The registered provider arrived subsequent to the inspectors to facilitate the inspection. On the 2nd day of inspection, 11 adults were present including the registered provider.

Methodology

Tusla's Early Years Inspectorate is the independent statutory regulator of early years services in Ireland. The Child Care Act 1991 (Early Years Services) Regulations 2016 define the duty of a registered provider to ensure the safety and well-being of children and to comply with these regulations. This Act also gives Tusla the authority to assess compliance with the regulations. The purpose of regulation in relation to early years services is to ensure that the care, safety, and well-being of children attending such services is upheld. Inspections of early years services are planned based on the following:

- Previous inspection history
- Any information received in relation to the service

The findings on inspection are based on:

- Information obtained through examination of documentation
- Direct observation
- Discussion with relevant staff

This inspection was unannounced and focused on the area of governance/ Information and records/ health, welfare and development of child/ safety/ premises and facilities. The inspection may also focus on other areas as required.

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Inspection findings are documented in the inspection report which is first issued in draft format to the service with an opportunity to respond to any findings. Where statutory requirements are identified as not being met, the registered provider must demonstrate how they have rectified the non-compliance and will prevent any non-compliance from re occurring. The Corrective Action and Preventive Action plan (CAPA) will be used to inform decisions about compliance with regulatory requirements. Where the registered provider fails to meet the statutory requirements an escalation process may be commenced.

The inspectorate reserves the right to edit responses received for reasons including clarity, completeness and compliance with administrative and legal processes.

The contents of the report are compiled by the inspectorate body.

Additional Information

An immediate action notice was issued to the registered provider on the 23rd of April 2024 following the 2nd day of inspection in respect of Regulation 9(2)(c), Garda Vetting. An adult present on the 1st day of inspection was working directly with the children in the service and a Garda Vetting disclosure had not been obtained for the adult. A response was received from the service on the 23rd April 2024 which sufficiently mitigated the risk identified.

On the 31st July 2024 a regulatory compliance meeting was convened with the registered provider to discuss corrective and preventive actions submitted in response to non-compliant findings identified on inspection and outline outstanding non compliances which did not meet the requirements of regulation. The registered provider was afforded a further opportunity to provide a response to the outstanding non-compliant findings the details of which are outlined in the inspection report.

Acknowledgments

The inspectors wish to acknowledge the cooperation of the registered provider, person in charge, staff and children who were present on the day of the inspection.

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Part III – Management and Staff

Regulation 9 – Management and recruitment

(2) A registered provider shall ensure that each employee, unpaid worker and contractor is suitable and competent taking into consideration the nature of the needs of children, including by-

(a) consideration of references from the person's past employers, if any, and in particular the most recent employer, if any,

(b) consideration of references from reputable sources in the case of a person who has no past employers,

(c) consideration of the vetting disclosure received from the National Vetting Bureau of the Garda Síochána in accordance with the Act of 2012 in respect of the person, and

(d) ensuring, insofar as is practicable, that where a person has lived in a state other than the State for a period of longer than 6 consecutive months, he or she provides police vetting from the police authorities in that state.

(3) The procedures specified in paragraph (2) shall be carried out prior to any person being appointed, assigned or allowed access to or contact with a child attending the pre-school service.

(4) A registered provider shall ensure that, without prejudice to the generality of paragraph (2) and subject to paragraphs (5) and (6), each employee working directly with children attending the service holds at least a major award in Early childhood Care and Education at Level 5 on the National Qualifications Framework or a qualification deemed by the Minister to be equivalent.

Compliance Information

(2) Documentation was reviewed in respect of the 13 adults currently working in the service. The following records were available for the adults:

(a) (b)

The registered provider demonstrated that they had verified the references obtained from 2 sources for 8 of the adults, and from one source for 3 of the adults.

(c) Garda vetting disclosures had been obtained for 12 staff. However, the service did not adhere to the re-vetting timeframes as outlined in the Early Years Inspectorate Regulatory Notice, requiring services to renew Garda vetting every three years. Please refer to the information outlined under regulation 23 of this report.

(d) International police vetting was available for 3 of the 7 adults who required it.

(4) Nine of the adults held a relevant major award in Early Childhood Care and Education on the National Framework of Qualifications. Two of the adults did not require a relevant qualification.

Non-Compliance Information

(2)

(a) (b) (c) (d)

The registered provider did not ensure that each employee, unpaid worker and contractor is suitable and competent taking into consideration the nature of the needs of children as follows:

- There were no references available for one of the adults.
- There was no 2nd validated reference available for 3 of the adults.
- Two of the references available for one adult has not been translated by a verified translation service, therefore could not be verified by the registered provider.
- International police vetting was not available for 4 adults who required it.
- A Garda Vetting disclosure was not available and had not been obtained for one adult.

An immediate action notice was issued to the registered provider on the 23rd April 2024 in respect of Regulation 9(2)(c), Garda Vetting.

(3) A review of documentation evidenced the registered provider had not taken the required steps as outlined in Regulation 9(2)(a)(b)(c)(d) to ensure that new recruits were suitable and competent before allowing them access to children, as detailed above.

(4) There was no evidence available to show that 2 of the adults who were working directly with the children held a relevant major award in Early Childhood Care and Education on the National Framework of Qualifications.

The corrective and preventive actions submitted by the registered provider following the previous inspection of the service on the 11th January 2023 did not prevent the re-occurrence of the non-compliance identified under Regulation 9(2)(a)(b)(3) and (4).

Corrective & Preventive Action submitted by the Registered Provider

The registered provider submitted the following response:

Corrective and Preventive Action

(2)

(b) (b) (c) (d)

- Garda vetting applied for immediately and the adult in question was only permitted return upon receipt of vetting.
- A 2nd reference for three adults now available and validated. The adult with no references has now left the service.

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- Two references in Spanish have been translated by an official translator.
- Two of the staff members requiring international vetting are no longer working in the service. The international vetting for the two other adults has been obtained.

(3) Staff relevant documentation list to be used to ensure all relevant paperwork on file. New staff will not be permitted to commence employment prior to reference validation. Staff recruitment policy re-issued to relevant Managers. Check list to be completed/checked before start date given to new staff.

(4) One of the adults is still awaiting their full award qualification. The other adult could not get their qualification recognized by the department and therefore will no longer be working directly with the children in the service.

To ensure that the service eliminate all non-compliances in relation to new staff required paperwork, the following has been implemented.

- updated the recruitment policy which outlines all requirements prior to a staff commencing employment
- created an in-depth checklist highlighting all paperwork to be in place prior to commencement
- added a note/reminder to the internal google calendar 2 weeks before start date to double check everything in place.
- at interview stage new staff will be notified that until all full paperwork in place as per checklist they are not in a position to commence employment

Supporting documentation submitted

Supporting documentation was submitted and reviewed by the early years inspector.

Summary Comment

The corrective and preventive actions as stated by the registered provider will address the non-compliances identified under Regulation 9(2)(3) as detailed above. These actions will be assessed on the next inspection of the service.

As one staff member is still awaiting their full award qualification, the requirements of Regulation 9(4) remain outstanding. The regulatory requirement has not been met.

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Part III – Management and Staff

Regulation 11 - Staffing levels

(1) Subject to this Regulation, a registered provider shall ensure that there is at all times an adequate number of adults working directly with the children attending the pre-school service.

(2) Subject to paragraphs (4) and (5), a registered provider of a full day care service or a part-time day care service shall ensure that at all times the minimum ratio of adults to children specified in column (3) of Part 1 of Schedule 6 opposite a particular reference number specified in column (1) of that Part in respect of the age range of the children specified in column (2) thereof at that reference number is satisfied.

Compliance Information

- (1) An adequate number of adults were working directly with the pre-school children attending the service during the inspection.
- (2) The registered provider ensured that the minimum ratio of adults to children was maintained in the service on the day of inspection. There were 42 children present in the service being supervised by 9 adults during the 1st day of inspection and 43 children present being supervised by 10 adults on the 2nd day.

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Part IV – Information and Records

Regulation 16 – Record in relation to pre-school service

(1) A registered provider shall ensure that a record in writing is kept of the following information in relation to the service:

(k) details of any accident, injury or incident involving a pre-school child attending the service.

Compliance Information

- (1)
- (h) A record was available in each care room detailing the attendance of each preschool child on the day of inspection.
 - (i) An accurate staffing roster was available in the service detailing hours of work for each staff member on the day of inspection.
 - (j) Written records of medication which was administered in the service were available on the day of inspection.
 - (k) Written records of accidents and incidents which occurred in the service were available on the day of inspection. A sample reviewed on the day of inspection documented necessary details.

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Part V - Care of Child in Pre-school Service

Regulation 19 - Health, welfare and development of child

(1) A registered provider shall, in providing a pre-school service, ensure that-

- (a) each child's learning, development and well-being is facilitated within the daily life of the pre-school service through the provision of the appropriate activities, interaction, materials and equipment, having regard to the age and stage of development of the child, and*
- (b) appropriate and suitable care practices are in place in the pre-school service, having regard to the number of children attending the service and the nature of their needs.*

Compliance Information

The inspectors observed some appropriate care practices in place in the service during the inspection.

Children were observed using the toilet independently as required, and staff promptly changed children's nappies when required. Staff engaged warmly with the children when providing personal care and availed of opportunities for one on one conversations with the children, demonstrating an awareness of the individual care needs of the children in their allocated rooms. The routine and play experiences in the service were observed to be child-led and children were observed to be content in their play-based activities throughout the inspection. Staff encouraged children to be independent in the classroom and assist with activities such as cleaning up following play and preparing for mealtimes.

All children were provided with the opportunity for outdoor play and were dressed appropriate to the weather. Staff provided comfort to children where required when going to sleep, offering reassurance sitting beside them and speaking softly. Rest areas were available in each of the care rooms for children to take time away from the group if desired.

Non-Compliance Information

Some practices were observed which may negatively impact children's learning and development, and did not promote the positive health and wellbeing of the children in attendance as follows;

1. The individual sleep needs of a child aged 1 year attending the Caterpillar room were not met on the first day of inspection. A child was observed at 14:25pm asleep in the care room on a staff members shoulder. Staff stated the child had not been offered a sleep that day despite the routine displayed in the care room stating they sleep at 14:00pm. Staff stated during discussions with the inspector that there was no cot available for the child at 14:00, and a cot was still not available. The child remained asleep until 14:50pm in the staff members arms. This is at variance with the safe sleep policy in place in the service.

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2. Drinking water was not made available to the children at all times in the 4 care rooms on either day of inspection. Water and cups were taken into care rooms and offered to the children after mealtimes. This non-compliance was identified on the last inspection of the service. The corrective and preventive actions submitted by the registered provider did not prevent the re-occurrence of the non-compliance.
3. Privacy was not afforded to a number of children whilst using the toilet and having their nappy changed as follows;

There was no door available on one of the toilet cubicles and the nappy changing unit was not self-contained. Groups of children were taken to the sanitary area at the same time during the inspection. Children having their nappies changed and children who did not require toileting assistance were in view of other children and staff who were washing hands or waiting their turn.
4. Some practices were observed in the Montessori room at mealtimes which were inappropriate and at variance with the healthy eating and behaviour management policies in place in the service as follows;
 - For a 40-minute period, staff told children who repeatedly expressed they disliked the dinner to remain seated and try it. No alternative food was offered to the children as required.
 - Fruit and yogurt were offered to some children after dinner. Children who did not eat the food after expressing they disliked it were not offered this. Staff members informed children if they did not eat the dinner they could not have the fruit or yoghurt.
 - A child expressed they did not want to participate in a numbers lesson prior to snack time. A staff member was observed taking the child's snack plate from them as they would not participate, resulting in the child becoming upset and distressed prior to an inspector intervening.
5. A child was denied access to the toilet when they informed staff members they required it posing a risk of a toileting accident which could negatively impact the well-being of the child. At 12:18pm in the Montessori room, a child asked staff members if they could use the toilet. During this time the child was observed showing signs of discomfort. The child was informed they had to wait until after circle time, which finished 42minutes later at 1pm.
6. Children in the caterpillar room were provided with small bibs during snack and dinner time. One child's clothing became heavily soiled with milk and food residue. The child was not changed during the inspection and was placed to sleep in the soiled clothing.
7. There was no opportunity for self-feeding for a child aged 1 year in the Caterpillar room. A staff member was observed holding the bowl and spoon away from the child spoon feeding during dinner.

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8. In the small Caterpillar room, two of the chairs' children sat on to eat were too big and not at an appropriate height for the table. This resulted in children's knees being at table height and children finding it difficult to eat, having to lean down uncomfortably to the table to eat.
9. The water in the children's bathroom was not warm to provide comfort to children and allow for effective handwashing. The water was recorded to be 12.7°Celsius during the inspection.

The corrective and preventive actions submitted by the registered provider following the last inspection of the service 11th January 2023 did not prevent the re-occurrence of the non-compliances identified under point 2.

Corrective & Preventive Action submitted by the Registered Provider

The registered provider submitted the following response:

Corrective and Preventive Action

1. The service accept that a cot should have been made available by us. To this end, staff in caterpillar room have been asked to be more conscious of scheduling sleep times and ensuring all children can nap when required. Copy of safe sleep policy to be issued to all staff. Staff to be more conscious of scheduling naps and ensure child is put down prior to falling asleep in a staff member's arms.
2. Labelled personal re-fillable water bottles have been requested and received for the two older groups. Cups are now available beside the sink for the butterfly and caterpillar rooms. The service will ensure each morning that clean cups are available and remind children that water is there should they need a drink outside of mealtimes.
3. One child to have their nappy changed at a time with one staff member when bathroom empty and no Montessori children using toilet. Montessori children may use bathroom two at a time when no nappies are being changed. When a staff member is changing a baby, they will place a "Busy" cone outside the bathroom door visible to the Montessori children. There will be two toilet flags placed in the Montessori room and each child may place their flag in relevant pocket when they need to use bathroom. This ensures only two children may go to bathroom at any one time. The service are allowing two children per visit which leaves the small "training toilet" free should a child training or who has had an accident need the bathroom. Montessori circle time has focused on how the new rules will apply and the importance of toilet hygiene. - children loved the idea of the "busy cone".
4. Staff have been asked to limit the time children have their meal in front of them and the service have increased our weekly grocery shop to ensure that additional fruit/yogurt may be offered to those who do not like their meal. It was noted that a child's snack was taken away from them, which was seen as a

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punishment. Staff have been spoken to in relation to this incident and re-issued with the service behavior policy. The healthy eating policy has been re-issued to all staff.

5. Staff spoken to in relation to a child's request to use the bathroom and it was explained that irrelevant to the time of day, all children should be given permission to use the bathroom.
6. Staff in caterpillar room were spoken to in relation to mealtimes and ensuring all children have a suitable bib. However, if a child is soiled/wet after mealtime or throughout the day their clothes should be changed, placed in bag for parents and replenishment requested.
7. It was also discussed that children should be encouraged to eat by themselves.
8. At the time of inspection, the wrong chairs for the children to have at mealtime were in the front baby room. This has been amended and suitable height chairs are now stored in babyroom.
9. Thermostat in bathroom has been raised to ensure warm water available for handwashing.

The service will purchase larger bibs to ensure less chance of children's clothes getting soiled. The service will keep lower chairs out in baby room, stored safely at all times.

Supporting documentation submitted

Supporting documentation was submitted and reviewed by the early years inspector.

Summary Comment

The corrective and preventive actions as stated by the registered provider will address the non-compliance. The actions outlined will be assessed on the next inspection of the service. The regulatory requirement has been met.

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Part VI - Safety

Regulation 23 - Safeguarding health, safety and welfare of child

A registered provider shall ensure that all reasonable measures are taken to safeguard the health, safety and welfare of a pre-school child attending the service and that the environment of the service is safe.

Compliance Information

The inspectors found by observation of practice, review of documentation, discussion with staff and inspection of the premises that the registered provider had taken the following steps to safeguard children attending:

General Safety:

The toys and play equipment observed in use by the children on the day of inspection were safe and in good working order. Cleaning products were stored securely out of reach of the children.

Infection Control:

Schedules were in place and maintained to ensure the service, equipment and materials are regularly cleaned. Staff stated appropriate exclusion periods for adults and children with infectious illnesses were implemented in the service as per the policy.

Safe Sleep:

Sleep logs were maintained in the dedicated sleep room and the younger care rooms, and individual children's observations recorded room temperature, breathing, colour, and position every ten minutes. The temperature of the rooms where children slept were maintained at the required temperature ranges.

Fire Safety:

The designated fire escape routes were clearly indicated and free from obstruction on the day of inspection. Staff members adequately outlined the evacuation procedures in place in the event of a fire.

Non-Compliance Information

General Safety:

1. The entrance gate to the service was left unlocked and accessible on both days of the inspection for a period of 5 minutes when a staff member left on their lunch. The gate led from outside the service directly into an internal courtyard where doors into the main building and the Treehouse room were unlocked and accessible posing the risk of unauthorised access to the service. The inspectors informed the person in charge at the time of the incidents.

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2. The service did not adhere to the re-vetting timeframes as outlined in the Early Years Inspectorate Regulatory Notice, requiring services to renew Garda vetting every three years. 3 staff members working in the service did not have a Garda Vetting disclosure which was dated within the last 3 years.

Infection Control:

Some practices observed were ineffective for infection control purposes, and posed the risk of cross contamination as outlined below;

3. The handwashing practices observed during the inspection were inconsistent and at variance with the handwashing and nappy changing policies in place as follows;
 - Some children's hands were not routinely washed after toileting, after nappy changing, after outdoor play, and before meals.
 - Some staff members did not wash their hands prior to assisting with food preparation, after nappy changing, and after assisting children with toileting. One staff member was observed changing 5 children's nappies with no handwashing in between.
 - Staff members were observed in the Caterpillar and the Butterfly room using a communal towel to dry all children's hands after handwashing. The towels were not changed throughout the inspection day.
4. The nappy changing practices observed were inconsistent and at variance with the policy in place as follows;
 - Children were re-dressed by staff members using the soiled gloves which were worn during the nappy change.
 - Staff members did not routinely clean the nappy changing mat between uses.
5. Plates or bowls were not provided to children for fruit snack. Sliced fruit was placed directly onto the table during mealtimes for children to eat.
6. The bins in place in the service for disposal of waste were inappropriate;
 - Some lidded bins were in place in the service which were not pedal operated.
 - Some of the pedal operated bins in place were broken.
 - Unlidded bins were in use in some care rooms for the disposal of waste and nasal tissues.
 - Despite a pedal operated bin being in place for nappy changing, staff were observed repeatedly handling the bins lid to dispose of nappies.

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7. Four of the shared cot mattresses in place did not have a waterproof covering or a waterproof sheet to prevent cross contamination.
8. The children's bathroom in the treehouse room had a play kitchen and toys being stored in it, adjacent to the children's toilet.
9. The children's play kitchen in the Montessori room was heavily chipped and worn in parts and could not be effectively cleaned.
10. Two soft play cushions in the Caterpillar room and a mat in the Treehouse room were torn with internal foam exposed and could not be effectively cleaned.
11. The straps on three of the children's feeding chairs were heavily stained, soiled and discoloured and required a deep clean.
12. Groups of children were taken to the communal bathroom/nappy area for toileting and nappy changing which created a number of infection control concerns as follows;
 - Staff members were observed placing younger children on the floor of the bathroom to wait for their turn for nappy changing.
 - During this time children aged one year were observed walking in and out of toilet cubicles touching toilet seats and lids and playing with the lid of the nappy bin.

Administration of Medication:

13. There was no documented care plan in place for a child attending the service who required an auto adrenaline injector for a severe allergy. A review of documentation also evidenced that no pre-consent or written instruction for administration had been obtained by the service to administer the emergency medication to the child if required. This posed a risk of the child not receiving emergency medication in a timely manner or the incorrect administration of the medication to the child.
14. The record available for the administration of a prescribed medication to a child in the service was incomplete and did not contain the required details to ensure safe administration to the child as follows;
 - There was no documented consent recorded for the administration of the medication to the child posing a potential risk of the incorrect dosage being administered to the child.
 - The record contained only the name of the medication given to the child. Details of the child, the required and the administered dose, and the required frequency of the medication was not recorded.

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Safe Sleep:

15. A standard cot mattress was not in use in one of the cots where a child sleep during the inspection. The mattress in use had no covering around the layered foam material and did not have a recognised safety which may pose a risk of harm to a child.

Fire Safety:

16. Fire drills had not been completed monthly in the service as required. Staff members stated an evacuation drill had not been completed since January 2024. This may impede the safe evacuation of children and staff in the event of a fire.

The corrective and preventive actions submitted by the registered provider following the last inspection of the service 11th January 2023 did not prevent the re-occurrence of the non-compliances identified under points 2, 3, 5, 9, and 15.

Action submitted by the Registered Provider

The following response was received from the registered provider:

Corrective & Preventive Action

General Safety:

1. Front gate has been replaced with higher and more secure option. A new fence/gate has been erected with "Please close gate" signs in place. Gate is spring loaded with automatic closing and therefore should be no issues with being left open
2. Updated vetting has been submitted. No preventive action submitted.

Infection Control:

3. Discussed at staff meeting, along with training and re-issue of hand washing policy which is also on display in bathroom. Managers to supervise/random check staff's adherence to policies.
4. New policy placed on bathroom wall above nappy changing unit, and as a preventative method an additional staff member will be employed from September 1st to assist with cover for nappy changing but also allow time for managers to supervise/random check staff's adherence to policies.
5. When children have finished their snack, instead of collecting their empty plates, staff will use this plate to put their fruit on if suitable, otherwise fresh plates/bowls will be given. Additional children's plates have been purchased and signs placed in each eating area as a reminder for staff in addition to above, manager will now be in a position ratio wise with additional staff to carry out spot checks at mealtimes, which will be logged on google calendar

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6. Bins used in each classroom/bathroom have all been replaced with pedal operated bins. The service have placed a "no hands" sign on the top of each lid as a reminder to staff/children. Regular monitoring will take place.
7. Waterproof mattress now purchased for all 5 cots.
8. Treehouse has been cleared out of all toys stored there.
9. Toy kitchen has been removed.
10. Ripped sponges have been disposed on in caterpillar room.
11. Highchair straps have been removed and deep cleaned with a disinfectant.
12. See corrective actions outlined under regulation 19(3).

Administration of Medication:

13. Meeting was held with relevant parent and care plan now in place for child who may require epi-pen. Copy of plan now on display in each room.
14. Administration of medicine - discussed at staff meeting and all staff issued with copy of procedures.

Safe Sleep:

15. The mattress has been replaced.

Fire Safety:

16. It was felt that aside from Manager we should delegate a fire drill officer. This monthly task has been delegated to a full-time member of staff. To ensure the fire drills are carried out monthly, the fire drill officer will have access to google calendar with monthly reminders in place. Manager will oversee completion of task- reminders set in google calendar which will be checked daily by manager.

Supporting documentation submitted

Supporting documentation was submitted and reviewed by the early years inspector.

Summary Comment

The corrective and preventive actions as stated by the registered provider will address the non-compliance. The actions outlined will be assessed on the next inspection of the service. The regulatory requirement has been met.

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Part VI - Safety

Regulation 25 - First aid

(1) A registered provider shall ensure that a person trained in first aid for children is, at all times, immediately available to the children attending the pre-school service.

(2) A registered provider shall ensure that a suitably equipped first aid box for children-

(a) is safely stored in an easily accessible and conspicuous position on the premises, and

(b) is available to the children attending the pre-school service at all times.

Compliance Information

- (1)
An adult trained in First Aid Responder (FAR) training was available in the service at all times during the opening hours of the service on the day of inspection.
- (2)
(a)(b)
A suitably equipped first aid box was observed to be immediately accessible to the children within the service and was stored in a conspicuous location on the day of inspection.

Part VI - Safety

Regulation 26 - Fire safety measures

(1) A registered provider shall ensure that a record in writing is kept of-

(a) any fire drill that takes place in the premises, and

(b) the number, type and maintenance record of fire fighting equipment and smoke alarms in the premises.

(4) A notice of the procedures to be followed in the event of fire shall be displayed in a conspicuous position in the premises.

Compliance Information

- (1)
(a) A written record was available detailing fire drills that had taken place in the service. The record showed that the last fire drill had taken place on the 15th January 2024.
(b) There was a record to show that the firefighting equipment had been serviced in October 2023 and the smoke alarm system had been serviced in November 2023.

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Non-Compliance Information

(4)

The procedures to be followed during a fire drill and in the event of a fire were not displayed in a conspicuous location within the service. Procedures were not displayed throughout the service which could impede the safe evacuation of children and adults.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

A copy of fire evacuation procedures are now in place in each room/area. Fire Drill officer will check to ensure the fire evacuation procedures are still available in each room prior to carrying out monthly fire drill.

Supporting documentation submitted

Supporting documentation was submitted and reviewed by the early years inspector.

Summary Comment

The regulatory requirement has been met.

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Part VII - Premises and Space Requirements

Regulation 29 - Premises

A registered provider shall ensure that the premises of the service are-

- (c) kept adequately lit, heated and ventilated*
- (d) cleaned, maintained and repaired, as required, and*

Non-Compliance Information

- (c)
- There was a malodour present in the children's bathroom which was also the nappy changing room throughout both days of inspection indicating the ventilation in place was inadequate.
- (d)
- The linoleum flooring in the Caterpillars, Treehouse, and Montessori room was heavily stained in parts with areas of black discolouration, indicative of a potential presence of mould.
 - There was no toilet seat on one of the children's toilets in use. A second toilet seat was loose and moving while children were trying to use the toilet.

The corrective and preventive actions submitted following the previous inspection of the 11th January 2023 did not prevent the reoccurrence of the non-compliance under point 2 above.

Corrective & Preventive Action submitted by the Registered Provider

The registered provider submitted the following response:

Corrective and Preventive Action

- Instructions have now been placed on nappy changing sheet to remind staff each morning to ensure bathroom window open.
- The linoleum floor in the caterpillar room will be completely replaced. The dark areas of discoloration on the linoleum in the treehouse will be removed and replaced. The dark areas of discoloration on the linoleum in the Montessori classroom will be removed and replaced. Fitting to be completed within the next week. A dehumidifier will be rotated periodically among the relevant rooms to ensure no damp within the building.
- New toilet seat purchased and loose one fixed by maintenance.

Supporting documentation submitted

Supporting documentation was submitted and reviewed by the early years inspectors.

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Pre School

Summary Comment

The corrective and preventive actions as stated by the registered provider will address the non-compliance. The actions outlined will be assessed on the next inspection of the service. The regulatory requirement has been met.