

# Early Years Inspectorate Regulatory Report

## Pre School

**TUSLA Identifier:** TU2015DL014

**Name of Service:** Bomany Nursery & Montessori School

**Address of Service:** Bomany, Letterkenny, Co. Donegal

**Eircode:** F92 P983

**Name of Registered Provider:** Pallavi Srivastava, Ritesh Srivastava

**Service type:** Full Day, Part Time, Sessional

**Date(s) of Inspection:** 11/12/2025

|                                   |    |    |    |    |
|-----------------------------------|----|----|----|----|
| <b>No of pre-school children:</b> | AM | 29 | PM | 17 |
|-----------------------------------|----|----|----|----|

|   |   |
|---|---|
| <b>Address of the Early Years Inspectorate:</b> | Early Years Inspectorate,<br>TUSLA Child & Family Agency,<br>Markievicz House,<br>Barrack St, Sligo, F91 XC84 |
| <b>Inspection undertaken by:</b>                | L Costello, N McEndoo.  |
| <b>Title:</b>                                   | 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).

|                                 |                |
|---------------------------------|----------------|
| <b>Conditions if applicable</b> | Not Applicable |
|---------------------------------|----------------|

### Description of service

Bomany Nursery & Montessori School is a privately owned and operated pre-school service located in a rural setting on the outskirts of Letterkenny. The service is registered to provide a full day, part-time and sessional care to children aged 0 - 6 years. The service is also registered to provide school age care. The hours of operation are from 8.00am to 5.30pm with the sessional service operating from 9.00am to 12.00md. The service operates from two adjacent buildings located on an elevated site in a residential setting. There are four care rooms, namely Montessori 1, Montessori 2, Montessori 3 and the toddler/wobbler room. There is a kitchen on site and other facilities include storage areas, a staff room and sanitary accommodation for both staff and children. There are four outdoor areas available which feature a variety of surface types including paving, natural grass, artificial grass and soft pour surfaces. The outdoor spaces have been sub-divided into distinct areas for use by different groups of children at any one time

### Staffing

There are two registered providers in the service, who were present on the day of the inspection. On the day of inspection there were seven adults working directly with the preschool children. The two registered providers provided relief and break cover. One adult worked in the Kitchen and one adult was employed as a cleaner and provided school aged care in the afternoon.

### 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/ health, welfare and development of child/ safety/ premises and facilities. The inspection may also focus on other areas as required.

The inspection focused on an examination of compliance under regulations 9, 11, 16, 19, 23, 25, 29 and 32 however, on inspection additional non-compliance which posed a risk was identified under Regulation 10 and 20. These findings are outlined within the relevant regulations within this report.

A sampling process was used to assess compliance under regulation 16 (j) (k). As a result, the scope of the inspection included Montessori 1, Toddler room and Montessori 3.

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

- Due to the significant level of non-compliances identified on inspection on the 19 September 2025 and 24 September 2025 and the registered providers inability to achieve compliance this service was escalated to the National Registration & Enforcement Panel (NREP) on the 22 September 2025.
- A regulatory enforcement meeting was held on the 08 October 2025 with the registered provider. A letter was issued to the registered provider by NREP on 14 October 2025 outlining all outstanding actions required to achieve regulatory compliance.
- The Registered provider responded to the outstanding actions on the 21 October 2025.
- A follow up letter was issued to the service by National Registration & Enforcement Panel. (NREP) on the 20 November 2025.
- On 11 December 2025 a follow up inspection took place to assess the implementation of the representations and associated evidence submitted by the registered provider and to assess the current level of compliance within the service. The findings of this inspection are outlined in this report.
- An Immediate Action Notice (IAN) was issued to the registered provider on the 11 December 2025 in relation to Regulation 23, where it was found on inspection that adults were entering the premises unauthorised posing a risk to the preschool children. A response received from the registered provider on the 12 December 2025 outlined temporary measures to reduce this risk. Please refer to Regulation 23 in this report.
- Further correspondence was issued to the registered provider on the 17 December 2025 due to immediate action notice issued and non-compliance found on inspection.
- The non compliances identified in respect to each regulation were brought to the attention of the registered provider at the closing meeting on the day of inspection.
- The registered provider received two opportunities to respond to this report in the CAPA process on the 19 January 2026 and the 27 January 2026. Despite these two opportunities some regulations remain outstanding.
- The service remains under consideration by NREP at the time of publication of this 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.

### Part III – Management and Staff

#### Regulation 9 – Management and recruitment

*(1) A registered provider shall ensure that-*

- (a) the service has a designated person in charge and a named person who is able to deputise as required,*
- (b) at all times during the period when the pre-school service is being carried on, the designated person in charge or the named person referred to in subparagraph (a) is on the premises, and*

*(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.*

*(7) A registered provider shall ensure that all employees, unpaid workers and contractors are appropriately supervised and provided with appropriate information, and where necessary training, including in relation to the following:*

- (a) the policies, procedures and statements of the service specified in Schedule 5;*
- (b) Part VIIA (inserted by section 92 of the Child and Family Agency Act 2013 (No. 40 of 2013)) of the Act, and*
- (c) these Regulations.*

### Compliance Information

(1) (a)

There was a designated person in charge and a named person to deputise as required.

(1) (b)

The person in charge or deputy person in charge was on the premises for the duration of the inspection.

Following a review of previous inspection information, information available on inspection and discussion with the person in charge it was determined that two new staff members had been employed since the previous inspection on the 24 September 2025.

(2) (a) (b).

These two new staff members work directly with the children and both files were reviewed.

Four written and verified past employer references were available for the two staff members.

(c)

Garda vetting disclosures were available for the two new staff members, and these disclosures had been received prior to the adults having access to preschool children. The garda vetting disclosures were in date.

(4)

The two new staff members had attained major awards in Early childhood care and education at level 5 or above on the national framework of qualifications, or qualifications deemed by the Department of Children, Disability and Equality (DCDE) to meet the regulatory requirement.

### Non-Compliance Information

(2) (d)

It could not be determined if international police vetting was required for one adult as the employment history had a gap from June 2019 to May 2023.

(3)

A review of documentation evidenced that the requirements of Regulation 9(2) had not been completed prior to one staff member being appointed, assigned, or allowed access to or contact with a child attending the preschool service as outlined above under point 2(d). This noncompliance was identified on a previous inspection on the 24 September 2025. The registered provider failed to submit an action to reduce this risk reoccurring.

(7)

The registered provider did not demonstrate that they had taken all reasonable measures to provide staff members with the appropriate policies and procedures and time to review these procedures as part of the induction process. This was evident on review of induction documentation where one adult employed since October 2025, had not the opportunity to review all policies in the service. At the time of inspection on the 11 December 2025, five policies including child safeguarding were not signed as completed. Similarly, a return-to-work plan for one adult failed to demonstrate that they had been given time to review all updated policies and procedures with evidence of fourteen policies not signed.

### Corrective & Preventive Action submitted by the Registered Provider

#### **Corrective and Preventive Action**

In a written response the registered provider stated:

(2) (d)

We have clarified the employee's employment history and employment record has been updated to include no gaps in employment history. The registered provider stated that they are going to recruit inhouse staffing officer (Supervisor) who will be responsible for staff and recruitment files. In the interim the registered provider will be taking responsibility for reviewing staff files.

(3)

The employment record has been updated, and no international police vetting is required. The preventive action does not address the non-compliance found on inspection.

(7)

The registered provider will ensure that all new hires will finish reviewing their policies within their two-week induction period. The staff induction policy has been updated. The two new staff members have reviewed all of our policies.

I will ensure to complete a return-to-work plan following a protracted illness or suspension. All staff are reviewing their policies on a bi- annual basis and signing a policy review checklist accordingly. This will be monitored by the registered provider.

#### **Supporting documentation submitted**

- Updated employment history submitted.
- Updated induction checklist submitted.
- Updated induction policy submitted.

### Summary Comment

The corrective action in relation to regulation (9) (2) (d) and (9) (3) has been accepted. The preventive action does not address the non-compliance and remains outstanding.

The corrective and preventive action in regulation (9) (7) has been accepted and will be reviewed on next inspection.

### 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.*

*(8) Without prejudice to paragraphs (2) to (7)-*

*(a) a registered provider of a pre-school service other than a child-minding service or a sessional pre-school service shall ensure that there are at least 2 adults on the premises at all times,*

### Compliance Information

(1)  
There were an adequate number of adults working directly with children attending the preschool service. There were seven adults working directly with 29 children on the morning of the unannounced inspection and six adults working directly with 17 children in the afternoon. The registered provider and person in charge covered breaks throughout the day.

(2)  
The minimum ratio of adults to children were provided on the day of the inspection in accordance with the required ratio considering the ages of the children and the length of time each child spent in the service.

(8)(3)

On the inspectors unannounced arrival to the service at 08:05am, two adults were on the premises. Throughout the day as observed by the inspectors there was at least two adults always present.

### 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:*

*(h) details of attendance by each pre-school child on a daily basis;*

*(i) details of staff rosters on a daily basis;*

*(j) details of any medication administered to a pre-school child attending the service with signed parental consent;*

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

*(3) A record referred to in paragraph (1) shall be open to inspection on the premises, and the documents and records referred to in paragraph (2)(a) shall be open to inspection whether on the premises or elsewhere, by an authorised person.*

*(4) A record referred to in paragraph (1) shall be open to inspection on the premises by a parent or guardian of a child but only in respect of information concerning that child.*

#### Compliance Information

(1)

(h) Details of children’s attendance were available in hard and soft copy.

(i) Details of the staff’s daily roster and attendance were available in hard and soft copy.

(3)

These records were made available to the inspectors on the day.

#### Non-Compliance Information

(1) (j)

A random sample of four medication administration records which had occurred since the service was last inspected on the 24 September 2025 were reviewed.

- Two had no parent signature which poses a risk of overdose should the parent administer without knowledge of previous administration. This was identified as a non-compliance on the last inspection on the 24 September 2025, where actions put in place by the registered provider failed to address the non-compliance and prevent a reoccurrence.
- Four did not have evidence of two members of staff witnessing the administration.

This is at variance with the service policy on safe administration of medication.

(1) (k)

Eleven accident and incidents which had occurred in the service since the last date of inspection on 24 September 2025 were reviewed.

- Two of these records did not contain the staff members signature which is at variance with the accident and incident policy in place in the service.
- Photographic evidence was available for one accident in which a child had a large abrasion to the chest after 'knocking against a shelf'. The service had no evidence of any remedial action taken place to reduce this risk and ensure any other child would not be injured from this piece of furniture. This was identified as a non-compliance on a previous inspection on the 27 February 2025 and the 24 September 2025 and actions put in place by the registered provider failed to prevent a reoccurrence.

## Corrective & Preventive Action submitted by the Registered Provider

### Corrective and Preventive Action

In a written response the registered provider stated:

(1) (j)

We have made the decision to introduce an administration of medication record book. This will make it easier going forward to track and record all medication administrations., it will be a responsibility of the staff member who wrote the report to ensure staff signature (including a witness)/ parental consent are filled in appropriately at all times.

(1) (k)

We reminded staff to ensure signatures were always present on forms and all our steps have been followed closely. We clarified this during a staff meeting

I will ensure I keep record of these risk assessments that are completed following incidents. We will ensure all staff accurately fill in 'Remedial Action Taken to Prevent Re-Occurrence' & 'Follow Up' steps.

## Supporting documentation submitted

- Team meeting minutes.
- New medication record.

## Summary Comment

The corrective action in relation to (1)(j) has been accepted. The preventive action does not give assurances that there will be management oversight to ensure these records are accurate and remains outstanding.

The corrective and preventive actions in relation to regulation 16 (k) have been accepted and will be reviewed on next inspection.

## 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

(1) (a) (b)

### Basic Needs:

- The service operated a four-week meal plan which provided breakfast dinner and snacks for the children. On the day a main meal of Christmas dinner with Turkey, ham, potato, carrot and sprouts was provided to the children. Snacks on the day included fruit, crackers and toast.
- Drinking water was freely available throughout the day and stored on shelving easily accessible to children in all care rooms. Milk was served with the meals.
- Nappy changing was observed to be engaging, and staff interacted positively with the children. The older children who were toileting independently were prompted to do so and supervised from a distance.
- The sleep needs of the younger children were met; this was observed on the day by children sleeping at a time of their choosing or need. One sleep room was in use in the service and cots were assigned to individual children. Sleep was monitored by physical checks from staff a minimum of every ten minutes

## Physical and Material Resources:

- All rooms were adequately resourced with sufficient materials and resources.
- Children were encouraged to direct their own sense of play and materials were available on low level shelving.

## Supporting Relationships:

- Staff members were observed to be kind and supportive in their interactions. Staff were observed crouching down to ensure they were at the child's eye level when interacting. Practises were observed to be respectful and inclusive.
- On the day of the inspection the service had made efforts to provide a Christmas dinner experience. Rooms were decorated, tables were set and Christmas music was playing. Christmas dinner was provided, and children appeared to enjoy this experience with their peers.

## Programme of Activities:

- Children had journals of their preschool learning in place. These journals included individual observations and goal settings.
- Evidence of the curriculum planning both short- and long-term goals were evident in all care rooms.

## 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

### General Safety:

- Materials and resources were maintained in a good state of repair.
- The kitchen was inaccessible to the preschool children on the day of inspection.
- All waste bins had the required foot operated pedal.
- Windows were fitted with the required restrictors.

### Infection Control:

- There was adequate handwashing facilities provided throughout the service with warm water, liquid soap and paper towels.
- Tables were observed to be cleaned prior to mealtimes and after messy play and snack times in all care rooms.

- The materials and resources throughout the service were visually clean, with cleaning schedules displayed and up to date in each care room.
- Children were observed to wash their hands regularly including before snacks and meals.

### Non-Compliance Information

#### General Safety:

The registered provider did not take sufficient measures to ensure that children attending the service were safe as demonstrated by the following:

1. An immediate action notice was issued on the day of inspection as the registered provider did not demonstrate that no person could gain entry to the premises unauthorised. This was observed on the morning of inspection from 08:05 am to 10:00, where adults were observed to let themselves onto the premises without authorisation. This was identified on a previous inspection on the 24 September 2025 and assurances made by the registered provider failed to address a reoccurrence. A response from the registered provider on the 12 December 2025 implemented temporary measures to secure the premises.
2. The registered provider assured the inspectorate on the previous inspection that all chemicals in the Kitchen will be stored in a locked cabinet. On a morning walk around, inspectors observed bleach and disinfectant spray on the windowsill and not in the locked cabinet in the kitchen. An immediate action notice was issued on the last inspection on the 19 and 24 September 2025 where chemicals were left out and no remedial action taken following a serious incident where a child ingested chemicals in the kitchen and required hospitalisation.
3. An aerosol can was observed on the window of the staff toilet which was accessible to the preschool children. Aerosol chemicals if ingested pose a serious health risk to children. The service policy on the 'safe storage of chemicals' state that all chemicals will be stored securely out of reach of children when not in use and the storage area will be kept locked at all times.
4. On review of learning journals, a picture of a child stuck in a toy kitchen demonstrated that appropriate safety measures were not in place to prevent unsafe use of equipment. The toy was being used contrary to the manufacturers guidance potentially creating a risk of injury to the preschool child.
5. Christmas tree lights in the toddler room were not secure, and leads were accessible to the young children posing a risk of strangulation if they became entangled.
6. In the baby and toddler sleep room an air condition unit lead was not secured to the wall and posed a risk of strangulation should a child become entangled.

7. In the baby and toddler sleep room a CD player lead was not secured to the wall, posing a risk of strangulation should a child become entangled.
8. In the baby and toddler sleep room a large chest of drawers full of clothing and blankets was not secured to the wall and posed a safety risk if it toppled over.

### Infection Control:

9. On the day of inspection, a staff member was observed not to remove their dirty gloves and apron after removing a dirty nappy and disposing of it, dressing the child in soiled gloves. This practice poses a risk of contamination.

### Action submitted by the Registered Provider

#### Corrective & Preventive Action

#### General Safety:

The registered provider in a response to an immediate action notice stated:

1. I have instructed all staff to assist parents, and no one should be allowed into the premises without staff supervision.
  - I have sent a message to all parents instructing them that a staff member will let them in to the premises.
  - I have put a sign on the gate to remind parents that they need to be let in by staff members.
  - The codes on the gate have been changed.
  - I will increase the size of the gate to prevent access as soon as possible.
2. The kitchen staff has a risk assessment which is on the wall to ensure that all the chemicals are stored correctly as per guidelines. They also complete a daily risk checklist twice daily- at start of service, and end of service to ensure this is being adhered to. These will be kept in a folder on record in the kitchen, which the registered provider will check to ensure their being done.
3. Aerosol can has been removed and staff advised not to use this product.
4. We have removed that kitchen from use. We have instructed staff to use play materials for their instructed use only.
5. Christmas tree lights have been removed. We have reminded staff to ensure all leads are out of reach of children.

6. Air conditioning unit has been removed from the sleep room. If the air condition unit is required then we will keep this in mind and ensure the wire is fixed to wall to ensure no risk to children.
7. CD player has been removed, and wireless blue tooth speakers will be used instead.
8. The chest of drawers has been secured to the wall. A review of all chest of drawers has been completed to ensure safety.

### Infection Control:

9. The nappy changing policy has been updated to ensure dirty gloves are removed when dressing a child. This policy has been circulated to staff.

### Supporting documentation submitted

#### General Safety:

1. Photographic evidence submitted.
2. Risk assessment submitted.
3. Photograph submitted.
4. Photograph submitted. Team meeting minutes submitted.
5. Photograph submitted.
6. Photograph submitted.
7. Photograph submitted.
8. Photograph submitted.

### Infection Control:

9. Nappy changing policy submitted.

### Summary Comment

The corrective and preventive actions received on the 19 January 2026, and 27 January 2026 have been reviewed and accepted by the inspectorate. This regulation is now complaint and will be reviewed on next inspection.

## 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)

The registered provider demonstrated that four adults employed in the service have been trained in first aid for children and are accessible to the preschool child, during hours of operation.

(2) (a) (b)

Suitably stocked first aid boxes are available in the preschool rooms and available to the children as required.

## Part VI - Safety

### Regulation 27 – Supervision

*A registered provider shall ensure that pre-school children attending the service are supervised at all times.*

#### Compliance Information

Supervision was observed to be adequate on the day of inspection.

Mealtimes were observed to be a pleasurable experience with staff members sitting alongside the children engaged in conversation and supervising them while they ate.

Indoor play was observed to be managed well, and rooms were set up to ensure the children were in sight at all times. In the rooms that had a staff team, communication between staff members was observed to be effective, with staff informing each other if they had to leave the room for a nappy change, what children they had with them etc.

Outdoor play included head counts from transition from indoors to outdoors and the staff members strategically placed themselves in the outdoor area to ensure all children were in sight.

## Part VIII - Notifications and Complaints

### Regulation 32 – Complaints

- (1) A registered provider shall ensure that the complaints policy of the service specifies-
- (a) the procedure to be followed by a person for the purposes of making a complaint in relation to the service,
  - (b) the manner in which such a complaint shall be dealt with, and
  - (c) the procedures for keeping a person who makes such a complaint informed of the manner in which it is being dealt with.
- (2) A registered provider shall ensure that-
- (a) a record in writing is kept of a complaint made to the provider in respect of the pre-school service, and
  - (b) the complaint is duly dealt with in accordance with the provider's complaints policy.

### Compliance Information

(1) (a) (b) (c)

The service has a complaints policy in place which outlines the necessary procedures to be followed if a person wishes to make a complaint, it outlines how the service will respond and how the complainant will be kept informed.

(2) (a)

The service has received one complaint since the service last inspection, and a record of this complaint was available.

### Non-Compliance Information

(2) (b)

The registered provider could not demonstrate that the policy on complaints was followed in relation to the one complaint received since last inspection. There was no documented evidence of an acknowledgment of this complaint, the investigation or how the outcome was communicated to the complainant.

### Corrective & Preventive Action submitted by the Registered Provider

#### **Corrective and Preventive Action**

In a written response the registered provider stated:

The Incident outcome was communicated and fully discussed with parent and after that the document as signed

and now a copy of outcome has been provided to the parent, and a feedback communication has been signed and provided to parent. We will ensure we follow our comments and complaints procedure in future.

### **Supporting documentation submitted**

Documentary evidence submitted.

### **Summary Comment**

The corrective and preventive actions submitted by the registered provider have been reviewed and accepted by the inspectorate. This regulation is now compliant.

### **Part V - Care of Child in Pre-school Service**

#### **Regulation 20 – Facilities for rest and play**

*(1) Subject to this regulation, a registered provider shall ensure that-*

*(b) there are adequate and suitable facilities for a pre-school child to rest during the day, and in the case of an overnight pre-school service, during the day and the night.*

### **Non-Compliance Information**

(1) (b)

The registered provider did not demonstrate that they had provided adequate and suitable facilities for a child to rest during the day.

- Montessori One, had no rest area identified that provided soft furnishings where a child could rest or opt out of an activity.
- Montessori Two had a rest area that comprised of two soft cushions. This is insufficient for the eight children that use this room.

The impact of no rest area for preschool children may affect the children's ability to concentrate and learn throughout the day.

### **Corrective & Preventive Action submitted by the Registered Provider**

#### **Corrective and Preventive Action**

In a written response the Registered provider stated:

All staff in Montessori 1&2 understand the importance of a rest area for all the children, they will review their areas and ensure adequate facilities are always there.

Moving forward Staff will engage with better start, when they return to our service to enhance their rest areas accordingly. Staff in both areas have again read our sleep policy.

**Supporting documentation submitted**

Photographic evidence submitted.

**Summary Comment**

The corrective and preventive actions received on the 19 January 2026, and 27 January 2026 have been reviewed and accepted by the inspectorate. This regulation is now complaint and will be reviewed on next inspection.

**Part III – Management and Staff**

**Regulation 10 - Policies, procedures etc. of pre-school service**

*A registered provider of a pre-school service shall ensure that the written policies, procedures and statements specified in Schedule 5 are in place for the service.*

**Non-Compliance Information**

The service nappy changing policy required to be updated as the procedures outlined posed a risk of contamination by not removing dirty gloves and apron after removing a soiled nappy.

**Corrective & Preventive Action submitted by the Registered Provider**

**Corrective and Preventive Action**

In a written response the registered provider stated.

The nappy changing policy has been updated and circulated to staff.

**Supporting documentation submitted**

Nappy changing policy submitted.

**Summary Comment**

The corrective and preventive actions received on the 19 January 2026, and 27 January 2026 have been reviewed and accepted by the inspectorate. This regulation is now complaint and will be reviewed on next inspection.