

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015DL065
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Name of Service:	Little Acorns Montessori Playschool
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Address of Service:	Gaelic Park, Carndonagh, Co. Donegal
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Eircode:	F93 WD62
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Name of Registered Provider:	Jennifer Grant, Sarah Quigley-Burns
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Service type:	Full Day, Part Time, Sessional
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Dates of Inspection:	11/06/2024
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Date 2 of Inspection:	28/06/2024
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No of pre-school children:	AM	136	PM	128
Day 2	AM	109	PM	-

Address of the Early Years Inspectorate:	Donegal Early Years Inspectorate, St. Conal's Campus, Letterkenny, Co. Donegal. F95 XK94
Inspection undertaken by:	L Mc Glynn and Y Coyne
Title:	Early Years Inspector and Inspection and Registration Manager

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

This privately operated early years' service is located in the town of Carndonagh on the Inishowen peninsula in County Donegal. The service offers full day, part time and sessional preschool care from 7.00hrs to 19.00hrs Monday to Friday. The service is registered to care for children aged 6 months -6 years. The service is also registered to provide a school aged programme with a breakfast club, afterschool programme and holiday camps. The service operates from 10 ground floor commercial units. One of the units is solely used for the provision of school age care. There is a kitchen on site where meals and snacks are prepared and served. There are outdoor play areas on both sides of the premises.

Staffing

There are two registered providers, one of which was present on the day of inspection. The childcare manager is the named person in charge and there are persons appointed to deputise in the event of her absence. There were 52 staff members working in the service inclusive of one of the registered providers. Of the 52 staff members, 37 were employed to work directly with pre-school children, 6 were employed to work solely in the school age service and 5 were employed to work in the kitchen, as maintenance or on cleaning duties. Additionally, there were 2 adults in the service on educational placement and 2 adults contracted to the service to provide additional activities for children.

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. The inspection may also focus on other areas as required.

A sampling process was used to assess compliance under regulation 19 Health Welfare and Development of the Child and regulation 23 Safeguarding Health, Safety and Welfare of the child. As a result, the scope of the inspection included unit 10, 12 and 13.

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.

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
- (c) there is a clear management structure in the service that identifies the lines of authority and accountability in the service and the specific roles and responsibilities of each employee and unpaid worker.

(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.

(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

- (1)
1. The service manager was the designated person in charge and there was a named person in each room to deputise in the event of her absence.
 2. The staff roster demonstrated that the designated person or named deputies were present at all times during the operation of the service.
 3. Information on the service's management structure was provided during the inspection identifying the lines of authority, roles and responsibilities of employees.

- (2) At the time of inspection, the registered provider confirmed that there were 52 named adults who worked in the service. A review of records demonstrated that the vetting documentation for 27 of the adults had been reviewed during previous inspection and were found to be compliant under this regulation. With reference to the above listed elements of Regulation 9, recruitment records in respect of 25 adults were reviewed and the following information was available:
- (a) (b) Written and validated references were on file for 24 adults from a past employer or in cases where there were no past employers, a source other than a previous employer. A second reference was on file for one adult which was outstanding from the previous inspection on 26 and 27 September 2023.
 - (c) Garda vetting disclosures had been obtained for all adults. The service also demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years.
 - (d) International police vetting was on file for one adult who required it. International police vetting was also on file for a second adult which was outstanding from the previous inspection on 26 and 27 September 2023.
- (4) Evidence of completion of a major award in Early Childhood Care and Education at level 5 or above on the National Framework of Qualifications or a qualification deemed by the Minister to be equivalent was on file for the staff members who required it. Evidence of completed qualifications outstanding from the previous inspection on 26 and 27 September 2023 were also on file.

Non-Compliance Information

- (2) (a) (b) The two references on file for one staff member could not be accepted as they were not dated or signed and did not contain the address, phone number, logo or headed paper of the referee to validate their source. It also could not be determined from the information provided, in what capacity one of the referees knew the staff member.
- (d) International police vetting was not available for one adult which was outstanding from the previous inspection on 26 and 27 September 2023.
- (4) Evidence of completion of a major award in Early Childhood Care and Education at level 5 or above on the National Framework of Qualifications was not available for one staff member employed to work directly with the preschool children.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

- (2)(a)(b) Both of the referees did not provide letter headed references. One was a current employer and another was a character reference. The person is no longer with our service. Before a new placement student or staff

member commences at our service a checklist is completed. Correct QRF Governance protocols will be met prior to induction.

(d) Management instructed this facilitator that all classes with his company would be suspended until the certificate was provided. All visiting facilitators will have to produce ICPC certificates along with all governance documents to ensure compliance in future.

(4) The certificate is attached. Management will control this by carrying out monthly audits of staff files. An electronic record of each staff member's qualifications will also be kept after validation is confirmed prior to a staff member commencing employment.

Supporting documentation submitted

References, qualifications and evidence of an application for ICPC were submitted with the CAPA response.

Summary Comment

The documentation and evidence submitted by the registered provider has been accepted in meeting the requirements of this regulation.

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

(8) (a) There were at least two adults present at all times during the unannounced inspection. A sample of staff rosters reviewed showed that at least two adults were rostered to be present during the hours of operation.

Non-Compliance Information

(1) (2) The registered provider did not ensure that the minimum ratio of adults to children was maintained at all times on both days of inspection as evidenced by the following:

Day 1:

Time	Room	Number of children present	Age range	Required ratio	Number of staff present	Number of staff required
12.48pm	Room 17	18	3-4 years	1:8	2	3
12.50pm	Room 16	17	3-4 years	1:8	2	3
12.55pm	Room 14a	17	3-5 years	1:8	2	3
12.57pm	Room 13	8	1-2 years	1:5	1	2
12.57pm	Room 12	8	2 x 0-1 year 6 x 1-2 year	1:3 1:5	1	2

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(1) (2) Following the inspection, management met with all Room Leaders in Rooms 10 to 17 to inform them of their responsibility to ensure that correct ratios were in place during staff breaks. Room Leaders were provided with a clear management instruction on how to determine compliance at the beginning of each day. Clarification was sought in relation to staffing ratios for children who are transitioning to national school. The service now understands that EY children who have not yet started National School come under EY regulations rather than SAC regulations. Management will ensure that regular reference to updated QRF documents are clearly understood. Any clarification needed will be directed to the EY Inspectorate should questions be raised.

Supporting documentation submitted

A sample attendance record was submitted.

Summary Comment

The actions detailed by the registered provider are deemed to address the non-compliance. Evidence of their implementation will be reviewed on the 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

Compliance Information

Meals and snacks were prepared on site for children and were observed to be adequately nutritious with a rolling menu plan providing variety each week. Children appeared to enjoy their meal on the day and additional portions were provided to those who requested more. Children in room 10 and 13 were observed to be given the opportunity to feed themselves and staff were nearby to provide assistance if required. Appropriate crockery was provided to children to enable them to eat their meal independently. Low level tables and chairs were provided in this room for children who had developed beyond the use of highchairs.

Children in rooms 12 and 13 were observed to have the freedom to move around the room independently and engage with the range of play materials available. There was space in both rooms for children to crawl, roll and learn to walk with a range of supportive play equipment available to aid their development in this area such as soft mats and push along toys.

Children in rooms 12 and 13 were placed to sleep for a scheduled period of rest in the afternoon. Each room had a designated sleep room which provided an opportunity for restful sleep away from busier play environments. Staff informed the inspectors that, despite the observed scheduled rest period, when a child requires sleep outside of this time, it is facilitated.

Staff in rooms 12 and 13 were observed to be warm, caring and responsive in their interactions with children. Staff were observed sitting on the floor alongside children while at play and engaging children in positive, playful interactions. Observations taken while moving through the building demonstrated that staff were equally as caring in their interactions with children in other rooms and appeared to be responsive to children's individual needs.

Rooms 12 and 13 contained a range of play materials to support children's learning and development. Items were displayed on low level shelving or on the floor to provide easy access to children. The younger children were

provided with a range of opportunities to develop their fine and gross motors skills as well as sensory experiences. A range of wall displays evidenced the art and craft activities provided to younger children and there was a water tray in the room for children's use. There was also a range of shape sorters, connectors, cause and effect items and musical toys. Soft floor mats, stable props and wall mounted fiddle toys were readily available in the rooms also. Children's language development was supported with print rich wall displays, age-appropriate books and staff regularly signing and engaging in conversation with children.

Non-Compliance Information

1. There was a laptop playing music and showing characters dancing in room 12 while children were eating their meal. The volume of the music was very loud and distracting. The volume of the music paired with the visual images, did not provide an appropriate atmosphere for mealtimes. There was also a television in the rest area of room 10. Screen time does not support the learning, development and wellbeing of children.
2. Staff did not maintain the dignity and privacy of children while nappy changing in room 10. Staff were observed leaving the door between the nappy area and the care room open while children's nappies were being changed exposing the child to the other children and staff in the room.
3. Children in rooms 10 and 13 were not given free access to drinking water throughout the day. Children's cups were observed out of reach and passed to them at staff discretion. Drinking water should be readily accessible to children at all times.
4. The range of play items in the outdoor area did not provide meaningful play opportunities for children. The equipment available to children was not adequately resourced to allow children to actively engage, for example, mud kitchens did not have play items such as pots, pans, bowls or similar to allow children the opportunity to use them.
5. Children on the morning of inspection did not have access to each area of room 10. The doors were closed and should remain open to allow children to move freely between each area of this room.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

1. Laptops and computers have been removed from all care rooms following the inspection. Routine play area reflective observations will be carried out by Room Leaders, together with close management support and supervision, will ensure that mealtimes are collaborative and relaxing. Each year staff will take part in the voice of the child training to reflect on practice to ensure that music is not used in excess. Regular daily supervision by management will ensure that staff understand the importance of the voice of the child.

2. Following the inspection, discussion with staff highlighted the observation that children were able to open the nappy changing door as the door handle was within reach of children. By increasing the height of the handle this prevented children opening the door either from inside the nappy changing room or outside the nappy changing room. Although the nappy changing room does not have to be locked when in use, we have observed that this ensures that staff engaging in nappy changing are aware of the need to keep the door closed. The lock is easily opened from both sides if needed by staff inside and outside of the nappy changing room. The installation of a high handle on this door has prevented children from being able to open the door.
3. Water bottles are now provided at all times throughout the day for all children in all care rooms. These are washed after use and refilled. Daily inspections by designated care room supervisors will ensure best practices are observed
4. All play areas have been restocked and childcare staff monitor garden stocks. Photographic evidence supplied. Our service has engaged in Better Start support to enable staff to implement the Aistear/Siolta practice more robustly across care rooms. This will ensure child centred play areas are developed more holistically.
5. Management provided supervision and support in Room 10 following the inspection. Observations of care practices were found to be contrary to our service's established practices which would have maintained compliance in this regard. Management are providing daily leadership and supervision of this room to ensure quality of care. Following the inspection management has decided to temporarily close Room 8 and have reduced registered children in Room 10 to carefully manage the care practices of Room 10. Regular performance reviews will be carried out to enable practitioners to develop the care skills and provide them the opportunity to reflect on areas of their practice that need to be improved.

Supporting documentation submitted

A daily routine for room 10 was submitted with the CAPA response.

Summary Comment

The assurances provided by the registered provider in the CAPA response have been accepted in addressing the non-compliances identified on inspection. The implementation of these actions will be reviewed on the next inspection.

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:

- The main entrance into each unit were found to be secure upon the inspector’s arrival to the service and throughout the day. Staff were vigilant when opening and closing doors to ensure they were secured to prevent a child from exiting the premises unsupervised. Visitor access was controlled in each unit by staff.
- The outdoor areas were secured by perimeter fencing and gates. Each of the gates contained opening and closing mechanisms on each side to deter unauthorised access.
- Cleaning products in use in the playrooms were stored on high shelving out of the reach of children. Cleaning equipment such as floor brushes were secured out of children’s reach.
- The kitchen was inaccessible to the preschool children on the day of inspection.
- The tables used for feeding younger children were equipped with five-point safety harnesses and a stable footrest.
- Leads and flexes were secure and inaccessible to children.

Infection Control:

- The premises materials and resources throughout the preschool were visibly clean with cleaning schedules in place. Tables were observed to be cleaned prior to and after mealtimes.
- The care rooms were adequately ventilated with openable windows and doors.
- Foot operated pedal bins were in place throughout the service for the hygienic disposal of waste.
- Hand washing facilities were provided with a supply of water, liquid hand soap and disposable paper hand towels.

Administration of Medication:

- The service had a policy on the administration of medication and staff provided evidence of records maintained following the administration of non-prescription antifebrile medication.

Non-Compliance Information

Fire Safety:

1. The emergency exit route from room 10 was blocked by staff when children were placed to sleep. The room was also overcrowded with floor beds and cots making it impossible to safely evacuate children in

the event of an emergency. Staff members were instructed by inspectors to take immediate action to reduce the number of children in the room and unblock the exit route which staff did immediately.

Infection Control:

2. In conflict with the Food Safety Authority of Ireland's Guidance Note no. 22 which states that powdered infant formula be prepared at home and transported to the service, staff in rooms 12 and 13 were preparing infant formula in the care room. Staff also placed the made-up formula in the cots in preparation for sleep time. Bottles should be refrigerated immediately prior to being consumed by children. These practices did not ensure that harmful bacteria which can be present in reconstituted powdered infant formula were destroyed.
3. Children's hands were not routinely washed at appropriate intervals throughout the day including on return from outdoor play and prior to eating.
4. A child in room 10 dropped a spoon during meal time and staff member picked it up from floor and gave it back to the child. In preparation for sleep time a number of soothers which were kept in children's bags along with their blankets for sleep fell on the floor and staff picked them up and did not wash them or have them stored correctly.
5. The nappy changing procedures observed in the service did not support effective infection control practices and increased the risk of spreading harmful germs in the setting as follows:
 - a. Protective aprons were worn by staff into the care room to collect and return children.
 - b. Staff did not routinely wash their hands after changing a child's nappy.
 - c. Children's hands were not routinely washed after having their nappies changed.
 - d. One child in room 10 brought food with them into the nappy-changing area which they ate during the changing procedure.
6. The mechanical ventilation system was not functioning in the sanitary accommodation in room 10. All care rooms and sanitary accommodation are required to be adequately ventilated to prevent the spread of infection.

Safe Sleep:

7. Bottles of infant formula were placed in cots in advance of children's sleep time. Infants are required to be held while bottle-feeding. Toys were also added to cots and beds in some cases. Unnecessary items in children's sleeping areas increase the risk of an accident in sleeping children.
8. Each of the 20 cots provided in the service's sleep rooms were fitted with mattresses which were unsuitable as they were missing the required safety label and 15 of them were not adequately covered with waterproof material.
9. The layout of the sleeping equipment in room 10 provided insufficient spacing between the cots/beds. Cots and beds are required to be spaced at least 50cm apart for infection control purposes. Some of the cots or beds in room 10 were touching.
10. An appropriate sleep log was not maintained recording all of the required details of physical observations made every 10 minutes for each child who slept in the service. When recording the physical check carried out, staff record the colour breathing and position of the child on one occasion. Each check after that, only the time of the check was recorded. There was also no record of staff checking the air temperature in the room.

General Safety:

11. Children were not signed in and out when moving between rooms to reflect accurate arrival and departure times. Children were visiting room 8 from another room and when requested by inspectors, staff provided a list of names with no arrival time. Similarly, children from room 8 moved to room 10 for sleep and were not signed in as attending this room with an accurate arrival time. This poses a risk that children may be unaccounted for or overlooked in the event of an emergency evacuation.
12. There were a number of hazards in the outdoor play area to the rear of the football pitch posing a risk to children including rusted nails protruding from a wooden pallet and debris in and behind the wooden play structure.

Administration of Medication:

13. The written record used by the service to record the administration of medication to a child in the service was incomplete. The records reviewed indicated that a parental signature had not been routinely

obtained following the administration of medication, to document that a parent or guardian had been informed and were aware of what medication was given to their child during the course of the day.

Action submitted by the Registered Provider

Corrective & Preventive Action

Fire Safety:

1. As care practices in Room 10 have become closely monitored and supervised by management, sleep routines are carried out in both play areas allowing for adequate space and relaxation for our children. The glass of the windows on exit doors are covered by a light extruder which is fixed to the window at nap time and taken off afterwards. Quarterly audits of fire safety procedures will be carried out by management. Observations and assessments will be communicated to all staff during staff training days.

Infection Control:

2. Following the inspection, close supervision of the room has ensured that children drink their bottles in the dining room before going to sleep. Bottles are provided now by parents/guardians and are placed directly in the dining room fridge at drop off. Bottles are not prepared by staff. Parents will be informed prior to enrolment of our services policy with regards to powdered infant formula.
3. Close supervision of this room has ensured that children have now developed the routine of washing hands after nappy changing, before meals times or upon returning from the garden. Children also engage in washing their faces after they eat. Regular mock inspections of care room routines by management will ensure that practices are maintained.
4. Soothers are now kept in the class and are sterilised after use and stored in the children's bags at the end of each session. Staff have been given a clear management instruction to ensure that items dropped on the floor have to be rewashed or a clean replacement provided. Staff will engage in annual infection control practices. This will ensure best practice.
5. Nappy changing practices that were not supervised correctly have now been incorporated in the daily practices of the room. Children are not permitted to bring toys or food into the nappy changing room and staff ensure that they wash their hands and the children's hands after each nappy change. Staff will engage in annual nappy changing training to ensure best practice.
6. This vent has been fixed. Care practitioners engaged in nappy changing procedures will carry out training on ensuring that nappy changing rooms are fully functioning.

Safe Sleep:

7. This practice has been strictly forbidden. Management ensure that this observed daily through supervision and signs posted outside sleep room. Staff supervising sleep routines will take part in a review of safe sleep practices of the service.
8. New mattresses were purchased. Mattress protectors have also been replaced with encasement mattress protectors. Staff Supervising sleep routines will take part in a review of safe sleep practices of the service.
9. The daily programme of care shows that our children sleeping in cots are transitioned to the first sleep room. This is followed by the toddlers sleeping in toddler beds in the second sleep room. The number of children sleeping in this care room has reduced. Close monitoring and supervision by management will ensure that the highest of standards are practised by all childcare practitioners engaged in sleep supervision.
10. New sleep check templates are being used by staff in sleep rooms to ensure best practice and recording of room temperature. Weekly audits by care room leaders will ensure that staff recording sleep do so correctly

General Safety:

11. Care room 8 has now temporarily closed to ensure that all children napping in this room are dropped off to Room 10 each morning. Management will regularly review movement of children between care rooms to ensure best practice and compliance.
12. Access to the back of the outdoor classroom has now been fenced off. Pallets have been removed. Debris have been also removed. Outdoor play risk assessments will be carried out on a weekly basis. Care Room staff will also review garden safety on a daily basis and email concerns or notify management of hazards as they appear. This will ensure that best practices are followed to ensure safety and security in gardens.

Administration of Medication:

13. All care room Leaders have received a clear management instruction on the administration of medication procedure. Management will record a video of our service's administration of medication practice. All staff working directly with children will take part in yearly training to ensure best practice.

Supporting documentation submitted

An invoice, purchase receipt, sleep record template, image and staff notice were submitted.

Summary Comment

The actions taken by the registered provider address 12 of the 13 non compliances identified. The findings documented at point 10 remain non-compliant as the registered provider's response did not provide adequate assurance that the non-compliance had been rectified.

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) Documentation was available to evidence that there was an appropriately trained person on the premises at all times.

(2)(a)(b) There was a suitably equipped first aid box stored in an easily accessible position in each room and available to the staff at all times.

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 of fire drills carried out in the service was maintained. The record indicated that fire drills occur regularly with the most recent dated in April 2024.
- (b) A record of the number, type and maintenance of the firefighting equipment and smoke alarms was maintained. The most recent maintenance record for the firefighting equipment and smoke alarms was dated July 2023.
- (4) A notice of the procedures to be followed in the event of fire was displayed in each room.