

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015DR045			
Name of Service:	Sharavogue School			
Address of Service:	Upper Glenageary Road, Glenageary, Co. Dublin			
Eircode:	A96 KF80			
Name of Registered Provider:	Betty Allen			
Service type:	Full Day, Part Time, Sessional			
Date 1 of Inspection:	11/07/2023			
Date 2 of Inspection:	12/07/2023			
No of pre-school children:	AM	126	PM	118
Address of the Early Years Inspectorate:	Early Years Inspectorate, Tusla Child and Family Agency, Loughlinstown Health Centre, Loughlinstown Drive, County Dublin			
Inspection undertaken by:	Olivia Quill and Sarah Quigley			
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			

Description of service

Sharavogue School was first established in 1983. The early years service is privately operated and is registered to provide full day, part time and a sessional care service for pre-school children. The age range of children catered is 0-6 years. The service operates Monday to Friday between the hours of 07:45 and 18:30.

The early years service operates from a three storey Victorian house in a residential area of Glenageary County Dublin. Care is delivered across eleven rooms. In the main building the Baby, Wobbler, Toddler, Pre-School, and Romper rooms are located on the ground floor. The first floor caters for Montessori 1, 2 and Pre-Montessori. Three of the care rooms are based in two separate log cabins which are located to the rear of the service. These rooms are called T1, T2 and Montessori 3. The children were allocated to different rooms depending on their age and stage of development. A separate sleep room is provided off the Baby room.

An outdoor play area equipped with a variety of suitable play equipment and defined areas of interest were available for the children to use on the premises.

Staffing

On the 11 July 2023 thirty adults, not including the designated person in charge, worked directly with the children. The designated person in charge provided relief cover for staff breaks at lunchtime. The service employed a chef to prepare meals. The registered provider does not work in the service.

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 and safety. The inspection included a review of practice from the last inspection under Regulation 19 (1)(a) Health, welfare and development of child and Regulation 23 - Safeguarding health, safety and welfare.

The inspection focused on an examination of compliance under Regulations 9(2) and (4) –Management and Recruitment, 11 – Staffing levels, 16(h), (i), (j), and (k) – Record in relation to pre-school service.

However, on inspection additional non-compliance was identified under Regulation 29 Premises and Regulation 30 Minimum space requirements. These findings are outlined within the relevant regulations within this report.

A sampling process was used to assess compliance under regulation 16 (h),(j) and (k) – Record in relation to pre-school service, 19(1)(a) – Health, welfare and development of child, 23 - Safeguarding health, safety and welfare. As a result, the scope of the inspection included the Baby, Wobbler, Toddler, Preschool and Romper rooms and did not include Montessori 1, 2, Pre-Montessori, T1, T2 and Montessori 3 rooms.

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 on 12 July 2023 for non-compliance with Regulation 23 safe sleep and general safety. The temperatures in the rooms where children were sleeping exceeded the required temperature of 16°C -20°C.

A written record of the physical checks on sleeping children was not maintained by staff in the Baby, Wobbler, Toddler, Preschool, and Romper rooms.

In the sanitary area used by the Toddler room the temperature of the water in the wash hand basin used by the children was recorded @ 60.2 degrees Celsius. Please refer to Regulation 23 for details.

The registered provider responded on the 12 July 2023 outlining immediate actions taken to reduce the risks identified and a plan to maintain the sleep room temperatures. A receipt was submitted as evidence to confirm maintenance work completed in the Toddler sanitary area to rectify the water temperature.

Acknowledgments

The inspectors wish to acknowledge the cooperation of the 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

(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,

(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

The inspection focused on the recruitment records of twelve adults who had commenced working in the service since the previous inspection dated 4 July 2022 for regulations 9(2)(a), (b) and (d), (3) and (4). Through discussion with staff and review of recruitment records it was evident that ten adults started working in the service since that date. Regulation 9(2)(c) was inspected in relation to all staff employed by the service.

- (2)
- (a) Twenty validated, written references available were provided from a past employer.
 - (c) Garda vetting disclosures from the National Vetting Bureau of An Garda Síochána were available for all adults employed in the service.
 - (d) In total police vetting was required for nine adults. Police vetting was available for eight adults who had lived outside the state as an adult for a period of longer than six consecutive months.
- (4) A record was available evidencing that eight staff members who were employed to work directly with the children held the required qualification.

Non-Compliance Information

- (2) (d) Police vetting was not available for one adult who lived outside the state as an adult for a period of longer than six consecutive months as an adult.
- (3) The registered provider did not ensure that Garda vetting disclosures were obtained for two adults prior to them commencing work in the service, contrary to the National Vetting Bureau (Children and Vulnerable Persons) Act 2012. One staff member commenced working in the service on 3 April 2023 and Garda vetting was obtained on 24 May 2023. A second staff member commenced working in the service on 3 January 2023 and Garda vetting was obtained on 5 January 2023.
- (4) There was no evidence available to show that two staff members working in the service directly supervising the children had achieved a full relevant major award in Early Childhood Care and Education on the National Framework of Qualifications.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(2)(d) Police vetting has since been received. Police vetting is requested from all staff commencing with us who have lived outside the country for longer than 6 consecutive months. Staff members will be unable to commence with us until this has been received.

(3) All staff members working in Sharavogue now have Garda and Police Vetting. No staff members will commence in the service without Garda Vetting first being obtained.

(4) These 2 staff members are fully qualified with Level 6 qualifications now. Transcripts of results or Certificates will be required before staff can work directly supervising the children.

Supporting documentation submitted

Written evidence including police vetting and a copy of qualification transcripts.

Summary Comment

Supporting evidence was submitted in keeping with the actions submitted under Regulation 9 (2)(d), (3) and (4). The regulatory requirement has been met.

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) An adequate number of adults were working directly with the children at all times during the inspection.
- (2) The minimum ratio of adults to children for full day care services was adhered to at all times during the inspection. On the first day of inspection there were one hundred and twenty-six children attending the service being supervised by thirty adults. On the second day of inspection there were one hundred and eighteen children being cared for by thirty adults.
- (8)(a) The staff roster demonstrated that there are at least two adults on the premises at all times.

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.*

Compliance Information

- (h) Details of the attendance of each child in the service were recorded at the time of entering and leaving the service.
- (i) The staff roster was available.
- (j) Documentation was available to demonstrate that signed parental consent was required prior to administering medication to a pre-school child.
- (k) A sample of accident and incidents records were reviewed. These records were completed as required.

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

(1)(a)

Staff reported that all meals are provided by the service. The service had a healthy eating policy in place and meals were provided at regular intervals. Children in the Baby room were served a lamb stew with mashed potatoes and older children were offered lentil bolognese with cheese for dinner. An afternoon snack of wraps served with ham or tuna and sweetcorn and cheese slices was also provided. Children were offered water with their food and drinking water was accessible to the children throughout the day.

Bibs were provided for younger children at mealtime. Staff in the Baby, and Toddler rooms were observed supporting children to clean their faces after dinner.

The atmosphere in the care rooms was observed to be calm and staff demonstrated a good awareness of the needs of each child in their care and responded to children’s cues promptly. Children were encouraged and observed to use the toilet independently. Younger children’s nappies were changed as needed. During this time staff engaged the children in conversations and songs which helped to put the children at ease. Staff were observed to use distraction, gentle tones and praise when promoting positive behaviour. Throughout the inspection staff interacted warmly with the children in their care and they were observed supporting children in their play.

The care rooms facilitated a range of developmentally appropriate play experiences for the children and were adequately resourced with a variety of materials. Designated cosy areas were available in each of the care rooms to allow children to rest as required. Suitable low-level tables and chairs were provided for meals and table-top activities.

All children were observed to spend time in the outdoor area throughout the day. The outdoor area was divided into different areas depending on the age of the children and was enclosed with a fence and gates. Each of the areas were well resourced with a variety toys and equipment including ride on toys, push along toys, a sensory wall, playhouses, climbing frame and slide.

Non-Compliance Information

(1)(a)

1. In the outdoor area at approximately 11.15am the sleep needs of one of the children from the Wobbler room were not met in a timely manner. The child was observed to fall asleep on a staff member’s lap. Staff were observed to lift the child and asked the child if they were tired but proceeded to get up and the child was then observed lying on a mat rubbing his eyes and closing them on and off. Throughout this time staff members were observed to comment on how tired the child was. The child was not provided with an opportunity to sleep until the scheduled sleep time with the other children after dinner at approximately 12.10pm.
2. In the Baby room there was no opportunity provided for babies to feed themselves suitable to their stage of development. This non-compliance was found on last inspection dated 4 July 2022. The corrective and preventive actions submitted by the registered provider following that inspection had not been carried out.

3. In the Wobbler room there was no chair for staff to sit and comfort a child. This non-compliance was found on last inspection dated 4 July 2022. The corrective and preventive actions submitted by the registered provider following that inspection had not been carried out.

4. In the Pre Montessori sanitary area two child size toilets were positioned side by side and therefore did not afford children privacy. This non-compliance was found on last inspection dated 4 July 2022. The corrective and preventive actions submitted by the registered provider following that inspection had not been carried out.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

1. The staff members on this occasion were spoken to directly after this incident. In addition, the Policy about observing the individual sleep needs of children and fulfilling them as required, was reinforced verbally and by email to all staff members in the Creche. The importance of observing the individual sleep needs of every child will be strongly stressed during staff induction and the Policy reinforced frequently.

All rooms have dedicated sleep areas and facilities for children to sleep at regular sleep times or at any time during the day should a child exhibit tiredness and require time to sleep. Staff regularly do this for children in our care and are aware of the facilities available.

2. As a rule, we always encourage self-feeding for the children particularly with finger food throughout the day and also offer them utensils to feed themselves. We have revised our dispensing of medication times to later in the lunchtime period for other groups, to alleviate the pressure at feeding time and enable staff to always be in a position to provide self-feeding options to the children at all mealtimes. Dispensing of medication times have been revised, ensuring all Babyroom staff are on hand and in a position to offer self-feeding options to children at mealtimes.

3. A soft chair has been purchased by the service which enables staff to use when comforting children as required. This chair and a low-level couch will remain in this room allowing a place for children to sit and staff to comfort children.

4. The toilet area has now been completely revamped. The plumber moved both toilets further apart and installed new sinks. The surrounding area was repainted. New lino was laid on the floor area and a higher-level divide has been installed ensuring complete privacy for children. All toilet facilities now provide privacy for the children.

Supporting documentation submitted

Written and photographic evidence submitted

Summary Comment

The actions outlined as stated by the registered provider will address the non-compliance. The care practice will be reviewed on next inspection. The regulatory requirement has been met.

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 entrance door to the service was adequately secured to ensure the safety of the children within and to avoid unauthorised persons accessing the service or children exiting unsupervised. The gates in the outdoor area were safely secured.
- The toys and play equipment observed in use by the children on the day of inspection were safe and in good working order.
- The kitchen was inaccessible to children.
- All flexes and cables were in good condition and safely secured.

Infection Control:

- Children were supported to wash their hands at regular intervals including following outdoor play and using the toilet and before meals.
- A system was in place for effective sterilisation of soothers which were appropriately stored in individual labelled containers.

- Individual bed linen was provided for children. Staff stated that all bed linen is laundered weekly or as required.
- Waste was managed appropriately with the use of pedal bins.

Administration of Medication:

- All medication was kept in their original containers and clearly labelled. Medication was stored safely out of reach of children.

Fire Safety:

- All fire exits were clearly labelled and unobstructed.
- Staff were familiar with the fire drill and maintained a written record of monthly fire drills completed. The procedure to follow in the event of a fire was clearly displayed.

Non-Compliance Information

General Safety:

1. In the Toddler sanitary area, the water temperature recorded in the children's wash hand basin was 60.2°C posing a scalding risk. This temperature is above the required temperature of 43°C. An immediate action notice was issued on the 12 July 2023. The registered provider responded on the 12 July 2023 and submitted a receipt as evidence of maintenance work completed to address the risk.
2. In the Pre-School room one of the children was wearing an amber bead necklace posing a potential choking or inhalation hazard.

Infection Control:

3. Nappy changing practice observed was inconsistent and the nappy changing policy was not followed by all staff. In the Baby room staff did not wash children's hands after nappy changing posing an infection control risk.

Administration of Medication:

4. A sample of medication records were reviewed in the Baby room. Written consent was provided by parents for the administration of prescribed antibiotics. However, staff had not completed the medication record forms as required detailing medication given, time, dose and evidenced a second staff member checked the medication given. This is at variance with the policy and associated procedure in place in the service for the administration of prescribed medications. This non-compliance was found on last inspection dated 4 July 2022. The corrective and preventive actions submitted by the registered provider following that inspection had not been carried out.

Safe Sleep:

5. The temperature of sleep rooms on the day of inspection exceeded the required range of 16- 20°Celsius as outlined in the table below;

Room Name	Air Temperature °C and Time recorded	Number of children sleeping
Toddler Room	23.1 °C at 12:30	8 children aged 2 years.
Pre-School room	22 °C at 12:35	18 children aged 2 years.
Baby cot room	21.7°C at 12:25 22°C at 15:30	12 children aged 18 months-2years. 3 children aged over 1 year.
The Romper room	21.7°C at 12:37	1 child aged 22 months and 3 children aged 2 years.

6. Staff in the Baby, Wobbler, Toddler, Pre-School and Romper rooms were not maintaining a written record of the any checks on sleeping children as per the safe sleep policy posing a safe sleep risk. During discussions with staff members it was noted that written records had not been maintained in the service on sleeping for some time.

An Immediate Action Notice was issued on 12 July 2023 for non-compliance with regulation 23 safe sleep.

The registered provider responded on the 12 July 2023 outlining immediate actions taken to reduce the risks identified and a plan to maintain the sleep room temperatures.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1. Immediate action was taken by our plumber at 7.30am on the 12 of July 2023. The thermostat was faulty and was replaced immediately. Staff in each room test the water temperature daily and inform the Office if there is a problem. The Plumber is then requested to make a call out if we cannot sort ourselves.
2. The service has informed the parent that the child can no longer wear amber bead jewellery in our care. Parents will be informed on their introductory visit that such amber necklaces cannot be worn in the service.

Infection Control:

3. The nappy changing policy is explained to everyone regularly and displayed on the wall above each change unit. It is standard practice in Sharavogue to wash all children's hands after nappy change. All staff, in particular the staff in the Babyroom, have been individually shown the Nappy Changing procedure again and reminded about the importance of washing the children's hands after each nappy is changed. The service has a Compliance Manager employed in Sharavogue whose role is to visit each room and help ensure the Early Years Regulations are being adhered to, using the Quality Regulatory Framework. This role has been extended and the Compliance Manager will now spend 12 hours weekly, inspecting rooms, checking procedures and guiding and educating the staff.
As part of her role, our compliance Manager will observe nappy changing in each room and ensure that all new staff, in particular are trained in nappy changing.

Administration of Medication:

4. Dispensing of medication will now take place at a quieter time, which will allow a calmer environment, with time to fill in medication record forms fully. The Compliance Manager has included a daily review of medication signed forms to ensure all are completed correctly. Our Creche Manager and Deputy Manager administer the medication daily. The Managers have had a meeting and gone through the importance of the second staff member signing. Now that the medication dispensing time has changed, this will allow the Creche Manager and Deputy Manager more time to ensure that the medication record forms are fully completed and double signed.

Safe Sleep:

5. The following day additional standing floor fans were purchased for use in the Toddler and preschool rooms and additional windows and doors were opened to increase the flow of cool air during Sleep time reducing the temperature to within the guidelines (16 - 20 degrees). Air Conditioning contractors were contacted immediately to review the situation and within a week installed new permanent air conditioning units in the Baby Cot Room and the Romper room. The pre-school and the Toddler rooms have fans and use the windows to create air flow and the temperatures have been managed. All wall thermometers were replaced in each of the Creche rooms. Rooms now have new thermometers to measure and record the temperature more effectively. Now that the new air conditioning units have been installed, the rooms are kept very cool. The service will continue to record temperatures daily during sleep time to ensure they are within the recommended temperature guidelines.

6. Sleep sheets are filled in every 10 minutes during sleep time. The service has now reintroduced the paper-based checking system which was immediately reinstalled in every room in the Creche. The Compliance Manager will check daily to ensure these checks are taking place and sheets filled accordingly.

Supporting documentation submitted

General Safety:

Written evidence submitted.

Infection Control:

Written evidence submitted.

Administration of Medication:

Written evidence submitted.

Safe Sleep:

Written and photographic evidence submitted.

Summary Comment

The actions outlined as stated by the registered provider will address the non-compliance. The care practice will be reviewed on next inspection. The regulatory requirement has been met.

Part VII - Premises and Space Requirements

Regulation 29 - Premises

A registered provider shall ensure that the premises of the service are-
(d) cleaned, maintained and repaired, as required, and

Non-Compliance Information

(d) The registered provider did not ensure the premises of the service was cleaned and maintained as required evidenced by the following findings;

1. In the Toddler room at 10.45am cleaning schedules had been completed and signed by staff for the morning and afternoon. However, on inspection the following was found;
 - There was a thick layer of dust on the surface of some shelves and a visible build-up of dirt and debris. Loose toys were behind the radiators covers and under the kitchen unit. The shelves of the kitchen unit were dusty.
 - Areas of the flooring, skirting boards and ledges had heavy accumulations of dust, dirt and debris in the crevices. The paint on the door was heavily stained.
 - There was a build-up of dust and dirt on the top of bins, in the corners of the flooring, and at the side of the nappy changing mat in the sanitary area used by the children.
2. In the Baby, Wobbler and sanitary areas an accumulation dust clogged the ventilation units on the wall.
 - In the Wobbler sanitary area cobwebs were hanging from area of the ceiling and corners.
 - In the Pre Montessori sanitary area paint had chipped off the wall and part of the internal wall was exposed. The countertop around the sink was not finished. The wooden surface was not fully painted and had no lacquered surface so could not be adequately cleaned.
3. In the Pre-School room the cleaning check list available was for the week of the 12-16 June 2023.
 - There was a build-up of dirt and debris down the back of the changing mat in the sanitary area.
 - There was a build-up of dust on the floor and in some of the shelving units and under the kitchen unit.
4. In the Romper room the cleaning schedule was not signed.
 - There was a build-up of dirt/ debris on the windowsills under the kitchen unit and around the skirting boards.

5. In the Baby room the top of the radiator cover was broken.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(d)

1. Contract cleaners are employed daily to ensure the floors and surface areas are regularly cleaned and disinfected, the cleaning of the shelving units etc. form part of the staff daily and weekly schedule. Cleaners were informed of built-up accumulations on flooring areas, corners and skirting and have rectified the build-up and noted daily attention is to be included in their schedule. A staff meeting was called to reiterate the importance to all staff of keeping the shelving, units, radiator covers, toys and surrounding areas in their room, clean at all times. All areas identified have been thoroughly cleaned and where necessary repainted. The compliance Manager will check the environments daily and will also include cleaning schedule record checks as part of her internal inspections going forward.

2. Cleaners have been notified to do a weekly high clean in all rooms to remove the possibility of cobweb build up. Clogged ventilation units have been thoroughly cleaned and are now included as a cleaning item on the weekly room cleaning list. The Pre-Montessori sanitary area has been completely revamped, it has been painted, new toilets and sinks installed, new floor lino and a new painted divide between toilets. The compliance Manager will check the environments daily and will also include cleaning schedule record checks as part of her internal inspections going forward.

3. All staff have been reinforced of the importance of keeping accurate and timely cleaning records and have been provided with ample cleaning templates for daily and weekly cleaning tasks. All areas of dust accumulation noted and rectified with a deep clean immediately. The compliance Manager will check the environments daily and will also include cleaning schedule record checks as part of her internal inspections going forward.

4. Romper room staff reminded of the importance of maintain accurate and timely cleaning records including staff signatures. The accumulation of debris noted has been removed and thoroughly cleaned, skirting boards also have been repainted. The compliance Manager will check the environments daily and will also include cleaning schedule record checks as part of her internal inspections going forward.

5. As part of the building blocks grant, all radiators are being replaced in the Creche and Montessori Departments. This work is commencing on 23d September 2023 and will be finished by the beginning of November. This heater is the first to be replaced. Indoor and outdoor environments are risk assessed daily and any repairs or renewals required are reported immediately to the Office. Repairs are completed in a timely manner, those with the greatest safety risk being carried out first.

Supporting documentation submitted

Written evidence submitted.

Summary Comment

The actions outlined as stated by the registered provider will address the non-compliance. The care practice will be reviewed on next inspection. The regulatory requirement has been met.

Part VII - Premises and Space Requirements

Regulation 30 - Minimum space requirements

(1) Subject to paragraphs (2) to (6), a registered provider shall ensure that adequate clear floor space is available in the premises for the work, play and movement of children attending the pre-school service.

(2) A registered provider of a full day care service or a part-time day care service shall ensure that the minimum amount of clear floor space specified in column (3) of Schedule 7 opposite a particular reference number specified in column (1) of that Schedule in respect of the age range of children specified in column (2) thereof at that reference number is available for each child in that age range attending the service.

Non-Compliance Information

(1) & (2) The minimum clear floor space requirement was not maintained in the Wobbler room and overcrowding occurred. Eleven children aged 1 year attended the Wobbler room requiring a minimum of 30.8 square metres clear floor space when only 24.31square metres was available. The clear floor space available allowed for nine children of this aged group to attend on full day care basis.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The service is reducing the number of children to 9 in the Wobbler room which will comply with the clear floor space requirement. The service will reduce the number of entrants to the Creche going forward in order to reduce the numbers in this room

Supporting documentation submitted

Written evidence submitted.

Summary Comment

The actions outlined as stated by the registered provider will address the non-compliance. The care practice will be reviewed on next inspection. The regulatory requirement has been met.