

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2015DR083
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<b>Name of Service:</b>	Giraffe Childcare Cherrywood
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<b>Address of Service:</b>	Cherrywood Science & Technology Park, Cherrywood, Loughlinstown, Co Dublin
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<b>Eircode:</b>	D18 K7W4
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<b>Name of Registered Provider:</b>	Dearbhala Cox Giffin
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<b>Service type:</b>	Full Day, Part Time
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<b>Date 1 of Inspection:</b>	09/02/2026
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<b>Date 2 of Inspection:</b>	10/02/2026
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<b>No of pre-school children:</b>	AM	92	PM	91
<b>Day 2</b>	AM	91	PM	96

<b>Address of the Early Years Inspectorate:</b>	Level 7, Brunel Building, Heuston South Quarter, Kilmainham Dublin 8
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<b>Inspection undertaken by:</b>	R Phillips E Mulhern
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<b>Title:</b>	Early Years Inspectors
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### 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>	N/A
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### Description of service

This privately operated childcare facility is one of 25 services run by the registered provider. The service operates from a purposely adapted ground floor premises in a business park in south county Dublin.

There are nine care rooms, currently in operation, three cot rooms and a kitchen.

The service currently operates from 07:30-18:00hrs Monday to Friday, providing full day care for children from 0-6 years of age.

- Baringo room, catered for children from one to two years old.
- Acacia room for children under one year, and one-year olds.
- Zambezi room facilitated children who are one and two years of age.
- Safari room accommodated one and two-year-olds.
- Serengeti room catered for two year olds.
- Masai Mara room provided care for two- and three-year-olds.
- Kenya room facilitated children who were three and four years old.
- Madagascar room facilitated three- and four-year-olds.
- Kilimanjaro room accommodated two and three year olds.
- Karenga room is currently closed.

### Staffing

The service employs a total of twenty-eight adults, including a centre manager, a deputy manager, one chef, two housekeeping staff and twenty-three childcare practitioners.

There was an area manager present on both days of inspection, their office is within the setting.

### 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 may also focus on other areas as required.

The inspection focused on an examination of compliance under regulations:

- 9(1)(2)(3)(4) Management and recruitment,
- 11(1)(2) Staffing levels
- 19(1)(b) Health, welfare, development of child
- 23 Safeguarding health, safety and welfare of child,
- 25 First Aid.

These findings are outlined within this report.

A sampling process was used to assess compliance under regulation 19(1)(b) and 23. As a result, the scope of the inspection included Safari, Acacia, Serengeti and Masai Mara 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.

### Acknowledgments

The inspectors wish to acknowledge the cooperation of the person in charge, deputy person in charge, area managers, staff and children who were present on the days 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.*

*(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

- (1)
- (a) There was a designated person in charge and a named person to deputise as required.
- (b) The person in charge was present when the inspectors arrived unannounced for the inspection. The named person in charge and deputy were present in the service on both days of the inspection.
- (c) There was a clear management structure in place. The managers and staff demonstrated an awareness of their roles and lines of authority within the service.
- (2) Following discussion with the service manager it was confirmed that six new staff had commenced employment since the last inspection on 25 February 2025. Documentation was reviewed in respect of all six adults employed and met regulatory requirements as follows:
- (a)(b) Twelve references had been sourced from past employers and all had a record of verification as required.
- (c) Garda vetting had been sourced for all adults. The service also demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years for all adults employed.
- (d) Police vetting had been sourced for five of the new employees who had lived outside of Ireland for six months or longer as adults.
- (4) A record was available evidencing that the adults working directly with the children held at least a major award in Early Childhood Care and Education at level 5 on the National Qualifications Framework or equivalent.

### Non-Compliance Information

- 2(d) One employee who had lived for a period of six months or more as an adult in another jurisdiction outside of Ireland required a police vetting certificate that was not available on the day of inspection.
- (3) The registered provider did not take appropriate measures to ensure that all adults were suitable to work in an early years' service prior to their commencement as outlined above.

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

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

After the inspection the service immediately initiated the process to obtain the required police vetting documentation. Both the staff member and Giraffe Childcare are actively working to secure this certificate and the process has been started to receive same.

The service has reviewed its recruitment and onboarding procedures to ensure that any periods of residence outside Ireland exceeding six months are clearly identified and cross-checked across application forms and CVs to ensure the appropriate international vetting documentation is obtained prior to employment.

The service remains committed to full compliance with all vetting requirements and will retain the police clearance documentation on the staff member's file once received.

### **Supporting documentation submitted**

The manager of the service submitted evidence of application for the police vetting certificate.

### **Summary Comment**

2(d) The regulatory requirement remains unmet. It is acknowledged that the service provider has taken steps to address the noncompliance.

(3) The actions stated by the registered provider have been deemed to address the noncompliance.

## **Part III – Management and Staff**

### **Regulation 11 - Staffing levels**

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

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

### **Compliance Information**

(2) On both days of inspection, the inspectors initial overview of the service, the minimum ratio of adults to children was observed in each care room.

### **Non-Compliance Information**

(1) The registered provider did not ensure that there was an adequate number of adults working directly with the children at all times, as outlined under regulation 11(2) below.

(2) When carrying out observations in sampled rooms on Day 1 of the inspection the inspectors observed that the minimum ratio requirement was not always maintained when staff took their lunch breaks:

At 12:57 in Safari room one adult was present with nine children. Eight of whom were two years old, and one of whom was one. In conversation with the staff member, he stated he had been caring for the children while his colleague was on her break since 12:15.

At 13:09 The same adult was caring for eight children alone in the same care room. His colleague returned at 13:15 and he went on his break, and she remained alone with eight children. This staff member was still alone at 13:35 caring for the eight children, seven of whom are two years and one of whom was a year old. The same staff member was still alone with eight children aged one and two years at 14:08. Four of the children were awake and four were still asleep.

The inspectors carried out an overview of the ratios across all rooms in the service during lunch breaks on Day 2 and observed four rooms to be non-compliant with the requirement. This information is outlined in the chart below. The inspectors asked the staff members who they could call for assistance and they reported they could call the managers. However, the inspectors observed that neither of the managers were available as one was in a meeting with a parent and one was directly caring for a child in the sensory room.

Room Name	Time	Number of adults present	Number and age of children (in years) present	Minimum ratio requirement (adult:child)
Serengeti	12:49	1	7 aged two 3 aged three	1:6 1:8
Safari	13:06	1	1 aged one 8 aged two	1:5 1:6
Zambezi	13:11	1	3 aged one 3 aged two	1:5 1:6
Kilimanjaro	13:16	1	10 aged two 2 aged three	1:6 1:8

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

#### Corrective and Preventive Action

Following the inspection, the service has undertaken a review of staffing arrangements, rosters and break cover procedures. As a corrective action, the service provider has recruited additional staff members, including both full-time educators and part-time staff specifically scheduled to support the service during lunch break periods.

This ensures that staff breaks can be covered without impacting the required adult-to-child ratios within the rooms.

The updated staffing structure increases the number of educators available during peak break periods and ensures that rooms remain compliant while staff take their scheduled breaks.

The registered provider has also reviewed rostering procedures to ensure lunch breaks are staggered and appropriate cover is allocated in advance. These measures will ensure that the required adult-to-child ratios are maintained at all times going forward.

The service has committed to maintaining full compliance with Regulation 11 and ensuring that appropriate staffing levels are consistently in place to support the safety, supervision and wellbeing of all children in the service.

### **Supporting documentation submitted**

A roster has been submitted. Further details of newly recruited staff and proposed break cover by staff specifically rostered to float/cover breaks was submitted.

### **Summary Comment**

The actions taken and the documentation submitted has been reviewed by the Early Years Inspectorate and deemed to address the non-compliance.

## 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-*

*(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**

There was drinking water available to the children in all the care rooms.

The children in Safari and Acacia rooms were given regular meals and snacks. They were encouraged to feed themselves and assisted where required. Staff put bibs on the younger children and changed outer clothing where they got soiled eating dinner.

The adults were observed speaking kindly to the children and were gentle in their approach to provide personal care or assist the children.

Staff were observed getting down to the children's level to comfort them when they were upset.

Staff helped the children put on coats and suitable clothing to play outside.

Staff assisted the children to remove outer clothing and shoes for sleep and gave soothers and comforters to those who used them. The children in Acacia room were put to sleep in cots when they showed signs of tiredness.

Staff remained in the cot room comforting them as they settled to sleep.

### Non-Compliance Information

On Day 1 of the inspection the inspectors observed inadequate care practices as follows:

1. Mealtime practice was observed in the Serengeti room where there were eleven children aged two and three years. The children were served a main meal of pasta, vegetable sauce and cheese. Two children – one aged three years and one aged two years declined to eat it stating they did not like cheese. The staff advised them they would be offered it without the cheese and requested this from the kitchen. The alternative option was not provided, and the children were placed to sleep. Upon waking, the first child was offered pasta, without the vegetable sauce and with cheese. The child again refused it. The meal was not provided for the second child, however the electronic communication record for parents completed by staff indicated she had eaten it all. The service's healthy eating policy states that parents will be advised if their child is not eating well and that alternatives will be offered to the children who refuse meals. Failure to provide and accurately record meals places children at risk of hunger, distress and unmet nutritional needs.

2. Nappy changing practices were observed in the Acacia room where there were nine children aged one year, and one child under one. During the observation period, one child was noted to have a visibly full, sagging nappy from 12:06 to 14:11. Staff engaged with the child during this period, bottle-feeding and changing their outer clothes. However, despite the apparent need, the child was placed to sleep, and the child's nappy was not changed. When queried, staff stated that nappies are changed according to the set schedule. Failure to change visibly full nappies promptly places children at risk of discomfort and skin breakdown.

3. Sleep practices were observed in the Serengeti room, where there were eleven children aged two and three years. During the observation period, five children were woken by staff. Staff reported that three of these children were woken in line with parental instructions: one after 30 minutes, one after 40 minutes and one after 60 minutes. No rationale was provided for waking the remaining two children. Several of the children displayed signs of tiredness upon waking, including crying and resisting attempts to get up. One child was supported to return to sleep for a longer period as staff failed to wake him. There were no documents of agreed sleep plans with parents, nor documents evidencing review or monitoring of the impact of waking children at set times on their wellbeing

and individual needs. Waking children without a documented, regularly reviewed plan may negatively impact their emotional wellbeing, behaviour and ability to engage in learning due to unmet rest needs.

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

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

##### 1. Mealtime practice:

Following the inspection, the service provided refresher training to the team on the healthy eating policy and mealtime practices. Staff have been reminded of the importance of ensuring that alternative meal options are provided when children refuse a meal and that communication with the kitchen is clear and followed through.

Management have also worked alongside the chef to ensure that alternative meal options are available and can be prepared promptly when required. In addition, staff have received further guidance on accurately recording children's meals within the electronic communication system so that parents receive correct information that reflects their child's day. Handover and recording procedures have also been reviewed with staff to reinforce the importance of accurate documentation and communication with parents.

In addition to the above actions, management have reviewed the deployment of staff across the service to ensure appropriate support is available where needed. Staff members have been redeployed to strengthen teams in rooms where additional support was required. Experienced educators and supervisors have also been paired with newer or less experienced staff to provide guidance, mentoring and oversight of daily practices.

The service's management will continue to monitor practice through room supervision, staff meetings and ongoing support to ensure that the standards outlined within their policies are consistently implemented and that the health, welfare and development of the children remain a priority.

##### 2. Nappy changing practices:

Following the inspection, refresher training was carried out with staff on their nappy changing policy and procedures. Staff were reminded that children's comfort, hygiene and wellbeing must always take priority over routine schedules and that nappies should be checked and changed whenever required. Management have reinforced the expectation that staff respond to children's cues and ensure that hygiene practices are carried out promptly.

##### 3. Sleep Practices:

Following the inspection, the service introduced documented sleep plans for children where parents request that their child is woken after a specified period of sleep. These plans are now agreed with parents and recorded to

ensure staff have clear guidance and that children’s individual rest needs are considered. These arrangements will also be reviewed with parents regularly to ensure they continue to support each child’s wellbeing.

**Supporting documentation submitted**

Documentation evidencing that training was provided and attended was submitted.

Sample Sleep plans were submitted.

**Summary Comment**

The actions taken and documentation provided were reviewed by the Early Years Inspectorate and deemed to address the non-compliances.

**Part VI - Safety**

**Regulation 23 - Safeguarding health, safety and welfare of child**

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

**Compliance Information**

The following are examples of the measures undertaken by the management and staff members to safeguard the health, safety and welfare of the children attending the service.

**General Safety:**

All toys examined were in good condition and equipment was suitable, age appropriate and in good working order.

The outdoor area was enclosed, with soft fall material covering the ground.

**Infection Control:**

Soothers were stored in individually labelled boxes until used for sleep.

Staff were observed wiping down tables before meals.

The cots had clean linen which staff said was washed weekly or as required.

Staff were observed washing their hands prior to serving food at mealtimes.

**Administration of Medication:**

Staff demonstrated an awareness of how to administer medicine safely if required.

Emergency medication was available for a child who staff reported was at risk of anaphylaxis due to allergies.

Supporting documents were provided including parental consent and the procedure to follow should the medicine be required.

All medicines were in original packaging, in date and stored safely out of reach of children in the rooms sampled.

### Safe Sleep:

The children were observed to be facilitated to sleep in cots or low-level beds as appropriate.

Children were physically monitored while sleeping and sleep checks were carried out and documented every 10 minutes.

### Fire Safety:

Fire exits were clearly signposted and unobstructed throughout the service.

Fire action signs were displayed in prominent positions throughout the building.

### Outing:

The manager of the service informed the inspectors that the service did not take the children on outings.

## Non-Compliance Information

### General Safety:

Sterilising tablets and cleaning materials were stored in a low-level cupboard in the Safari room, which did not have a child safety lock in situ. The inspector informed the staff in the room, who acknowledged the lock was missing. The inspector asked the staff member to place the materials out of the children's reach, which they did. Cleaning materials within small children's reach puts them at risk of ingestion of poisonous substances.

### Infection Control:

#### 1. Inadequate systems in place for sterilising mouthed toys:

There was a sterilisation box in Safari room and Acacia room, and no sterilisation box in use in Serengeti room. There was an inadequate system in place to sanitise mouthed toys in these rooms. The inspectors did not witness any toys being added to the boxes and taken out of circulation after children mouthed them, or mouthed toys being washed or sterilised as required, while the inspection was in progress. This was in contravention to the services infection control policy.

The services infection control policy states that:

Toys that have been in the mouths of children should be wiped down using a cleaning agent and immediately sterilised after use of the individual child.

This practice of allowing the children to mouth toys that have been in other children's mouths, without cleaning or sterilising them, increases the risk of spread of infection, which can negatively impact on children's health.

### 2. Inadequate Nappy Changing practices:

Inspectors observed that children’s nappies were changed in a manner that posed a risk of cross infection as outlined below. All these observations were at variance with the service’s documented nappy changing procedure.

- Adults and children’s hands were not consistently washed after nappy changes. When handwashing did occur, this was inadequate as soap was sometimes not used. Children and adults were also observed pushing paper towels used for drying their hands into the bin containing used nappies.
- Adults did not consistently remove gloves after removing nappies. Inspectors observed an adult assisting a child with handwashing, handling the tap and paper towels with gloves that had been used to change the child’s nappy. On one occasion a child’s nose was wiped by the adult with gloves used to remove their nappy.
- Inspectors observed children with a soother and a toy in the nappy changing areas. Neither of these were cleaned afterwards with one of the toys being handed back to a child after it fell on the floor and being subsequently placed back on shelf within the pre-school room.
- A cloth was re-used for cleaning the changing mat between nappy changes in the Serengeti room. Re-using the same cloth, which had not been cleaned contravenes the services infection control policy and leads to cross contamination and risk of infection.

### 3. Handwashing:

The children’s hands were not washed before eating dinner in the Serengeti room. This cross contamination poses a risk to the children’s health. This was in contravention to the services infection control policy as discussed with the centre manager and reviewed. The handwashing policy of the service includes before eating as a time when hands must be washed.

This regulation was non-compliant on the previous two inspections dated 2 July 2024 and 25 February 2025. The corrective and preventive actions submitted by the registered provider following those inspections had not been effective in addressing the non-compliance.

### Action submitted by the Registered Provider

#### Corrective & Preventive Action

##### **General Safety:**

Following the inspection, the safety lock was immediately replaced on the cupboard to ensure that cleaning materials and sterilising tablets are securely stored and not accessible to children. Management carried out a full safety audit across all rooms within the service to ensure that all cupboards containing cleaning products or potentially hazardous materials have appropriate child safety locks in place and are securely maintained. This review ensured that the same risk was not present elsewhere in the service.

Management have also reminded staff of the importance of regularly checking that safety locks remain secure and reporting any maintenance issues immediately so they can be addressed without delay.

Management will continue to monitor storage practices as part of our routine room safety checks to ensure that all hazardous materials remain safely stored and that the environment is safe for all children in our care.

##### **Infection Control:**

##### 1. Handwashing:

Management carried out an immediate review of handwashing practices across the service with the staff team. Staff were reminded of the service's infection control and handwashing policies, which clearly outline that children's hands must be washed before meals, after toileting or nappy changes, after outdoor play, and whenever required to maintain good hygiene practices.

Refresher training was provided to all staff on correct handwashing procedures and the importance of embedding these practices into daily routines to reduce the risk of cross contamination and infection. To ensure this practice is consistently implemented going forward, management have introduced additional monitoring and accountability measures within the service. Room leaders and supervisors are now responsible for ensuring that handwashing routines are embedded into the daily schedule, particularly during transitions such as before mealtimes.

Management have also introduced routine hygiene checks carried out by room leaders and management to ensure that infection control practices, including handwashing, are consistently being followed in each room.

These checks will support staff in maintaining good practice and ensure that any issues are addressed immediately.

In addition, management will continue to provide ongoing support, supervision and guidance to staff to reinforce the importance of infection control practices and ensure that our policies are consistently implemented in practice.

The service remains committed to maintaining high standards of hygiene and infection control within the service and will continue to monitor practice closely to ensure that children's health and wellbeing are protected at all times.

### 2. Nappy Changing Procedure:

The services management team immediately reviewed the nappy changing procedures with the staff team and provided refresher training to reinforce correct infection control practices.

This training included:

Proper handwashing procedures for both adults and children, including the use of soap and correct drying methods.

Correct glove use and the requirement to remove gloves immediately after completing a nappy change before touching other surfaces or assisting children.

Ensuring that soothers, toys and other items are not present in the nappy changing area during nappy changes.

The correct cleaning procedure for changing mats between each nappy change, including the use of appropriate disposable materials or freshly cleaned cloths to prevent cross contamination.

Management have also reinforced the importance of ensuring that paper towels used for hand drying are disposed of appropriately and not placed into nappy bins.

To support consistent implementation of these procedures, management have strengthened their monitoring systems within the service. Room leaders and supervisors are carrying out regular checks of hygiene and infection control practices throughout the day. Management will continue to monitor these practices through room supervision, staff support and ongoing training where required.

In addition, management have paired experienced staff members and supervisors with team members where additional guidance is required to ensure that correct procedures are followed at all times.

The service provider is committed to maintaining high standards of hygiene and infection control within the service and will continue to support staff to ensure that our policies and procedures are consistently implemented in practice.

### 3. Sterilisation of mouthed toys:

Management reviewed the procedure with all staff and provided refresher training on infection control practices, with a particular focus on the correct management of mouthed toys. Sterilising boxes are now clearly in place and in use in all relevant rooms within the service. Staff have been reminded that toys which have been mouthed must be removed from circulation immediately and placed in the designated sterilising container to be cleaned and sterilised before being returned for use.

### Supporting documentation submitted

#### **General Safety:**

Documentation evidencing audit of safety measures in place submitted.  
 Photographs of a safety lock was submitted.

#### **Infection Control:**

Documents evidencing training was provided and attended was submitted.  
 Photographs of the mouthed toys box was submitted.

### Summary Comment

The actions taken and documentation submitted was reviewed by the Early Years Inspectorate and was deemed to address the non-compliances.

## 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) It was confirmed by review of staff files, and discussion with the registered provider that three staff held in date First Aid Responder (FAR) training certificates. The roster evidenced that one or more were available to the children at all times of opening.

(2)(a) Adequately equipped first aid boxes were safely stored in conspicuous locations that were easily accessible throughout the service.

(b) The first aid boxes were available to the children in the service at all times.