

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015DR123
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Name of Service:	Koala Childcare Ltd
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Address of Service:	Granitefield Manor, Rochestown Avenue, Dun Laoghaire, Co. Dublin
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Eircode:	A96 X5C9
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Name of Registered Provider:	Caroline Lynch
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Service type:	Full Day, Part Time, Sessional
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Date of Inspection:	04/11/2025
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No of pre-school children:	AM	40	PM	39
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Address of the Early Years Inspectorate:	Level 7 Brunel Building, Heuston South Quarter, Kilmainham Dublin 8
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Inspection undertaken by:	R Phillips R Brien
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Title:	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).

Conditions if applicable	N/A
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Description of service

Koala Childcare is a privately operated service registered to provide full day care to children aged between 1-6 years. It operates from a purposely adapted ground floor premises in an apartment complex and comprises of four care rooms and a designated sleep room. There is a kitchen on site and an office. The children have access to an enclosed outdoor play area, to the rear of the premises. The service is located in an urban residential area of Dun Laoghaire Co. Dublin.

Staffing

A total of eleven adults were employed in the service. A manager, deputy person in charge, and nine childcare practitioners, one of whom also works in the kitchen preparing the snacks and meals. There were ten adults working directly with the children on the day of inspection. An additional adult who visits the service weekly to facilitate exercise classes with the children was also present. 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 may also focus on other areas as required. The inspection focused on an examination of compliance under the following regulations:

9 (1)(a)(b)(c), (2)(a)(b)(c)(d), (3),(4),(7)(a)(c) – Management and recruitment,

11 (1), (2), (8)(a) – Staffing levels,

16 (1)(h)(i)(j)(k) – Record in relation to a pre-school service,

19 (1)(b) – Health, welfare and development of child,

23 Safeguarding, health, safety and welfare of child,

25 First Aid.

However, on inspection additional non-compliance which posed a risk was identified under the following regulations:

16(1)(a) Record in relation to a Pre-school service,

20 (1)(b) – Facilities for rest and play.

These findings are outlined within the relevant regulations within this report.

A sampling process was used to assess compliance under the following regulations.

16 (1)(h)(j)(k) – Record in relation to a pre-school service,

19 (1)(b) – Health, welfare and development of child.

As a result, the scope of the inspection included the Wobbler and Toddler 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 the day of inspection for non-compliance identified under Regulation 9(2)(c). The person in charge submitted a response on 04 November 2025 which addressed the risk identified on inspection.

Non-compliance was identified during this inspection relating to regulations 9(2)(c), 9(7)(a)(c), 16 (1)(k), 19(1)(b) and 23 where practices observed were not in line with service policies and procedures and regulatory requirements. Practices and procedures relating to these regulations were found to be non-compliant on the last inspection on 15 May 2025.

The registered provider provided the Early Years Inspectorate with assurances during the Regulatory Compliance meeting (RCM) and Corrective and Preventive Actions (CAPA) processes, dated 24 July 2025, 4 July 2025 and 01 September 2025 respectively which did not prevent the non-compliances reoccurring under these regulations, as detailed in this report.

The service was referred to the National Registration Enforcement Panel (NREP) on the 6 January 2026. A Regulatory Enforcement Meeting (REM) was held with the registered provider on the 23 January 2026 to discuss non-compliance identified and overall governance of the service. Subsequently the service is to remain under the supervision of NREP.

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

(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.

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

- (a) the policies, procedures and statements of the service specified in Schedule 5;
- (c) these Regulations.

Compliance Information

(1) (a) The service had a person in charge and a named person to deputise as required.

(b) The person in charge on the day of inspection was present at all times during the inspection. The staff roster provided for the person in charge, or a named person to deputise, to be present at all times of opening.

(c) There was a clear management structure in place in the service.

(2) Through discussion with the person in charge and review of staff files, it was confirmed that three new staff commenced employment in the service since the last inspection on 15 May 2025. Three staff files were reviewed in full. Regulation 9(2)(c) was reviewed in respect of these three adults, the registered provider, one other adult who works in the service and an external contractor.

(a) Six written, validated references were available from a past employer.

(c) Garda vetting disclosures had been obtained for four staff, and the registered provider. However, the service did not adhere to the re-vetting time frames as outlined in the early years' inspectorate regulatory notice, requiring services to renew garda vetting every three years for one adult. Please refer to the information outlined under regulation 23 of this report.

(d) Police vetting was available for three adults as required.

(4) Records were available evidencing the three adults who were employed to work directly with the children held the required qualification or equivalent.

Non-Compliance Information

The registered provider did not take appropriate measures to ensure that all employees were suitable to work in an early years' service prior to their commencement as outlined below:

(2)(a)(b)

There were no references on file for an external contractor who was present on the day of inspection.

(c) A mandatory Garda vetting disclosure was not available for this adult who was present in the service on 04 November 2025 contrary to the National Vetting Bureau (Children and Vulnerable Persons) Act 2012. An Immediate Action Notice was issued on the day of the inspection. The person in charge submitted a response on the day of inspection which addressed this non-compliance.

(3) It was not evident that the procedures specified in regulation (2)(a)(b) & (c) had been carried out for one adult as outlined above.

This poses a risk to the children attending the service.

(7)(a)(c)

The registered provider did not demonstrate that they had taken all reasonable measures to ensure that all employees were provided with appropriate information and training to safeguard the health, safety and welfare of children attending the service and to comply with the regulations.

- There was no record of induction training available for two new staff members who had commenced employment in the service since the last inspection on 15 May 2025. This is contrary to the staff induction policy of the service which detailed the induction process and sign off on each stage of induction training.
- There was no evidence to demonstrate that all staff had received one to one supervision on a monthly basis contrary to the service policy on staff support and supervision. One to one supervision records dated since the last inspection, were only available for four staff, all dated October 2025.
- There were no records available to demonstrate that team meetings had taken place since 19 May 2025.
- While it is acknowledged that three staff updated their children first training in April and May 2025, there was only evidence that one staff member completed Children first training since the last inspection.

Following the last inspection on 15 May 2025, the registered provider submitted corrective and preventive actions to address non-compliances found on inspection which included

- a revised supervision policy, which stated that one to one supervision of staff would take place on a monthly basis with the manager.
- that management had reviewed, approved, and committed to implementing and adhering to the agreed supervision schedule and all related policies.
- that team meetings would take place and that the service would maintain a record.
- that refresher training in child protection and safe care practice had been scheduled.

The registered provider has not successfully implemented the corrective and preventive actions to provide supervision to staff in line with the CAPA response to prevent the recurrence of this non-compliance.

Therefore, the Inspectorate was not assured of the overall governance structure of the service and that it could meet the requirements of legislation to ensure the care, wellbeing and safety of children.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(2)(a)(b)

The registered provider submitted a previous employer reference and a reference from a reputable source for one adult contracted to work weekly in the service.

The service created a Contractor compliance document which will need to be completed before any additional contactor comes into the service.

(2)(c) In date Garda vetting certificate was submitted for one adult as required.

(3) To ensure these procedures referred to under regulation 9(2) are followed in the future, the registered provider offered assurance that the steps in the Contractor compliance document which asks for Garda Vetting, 2 references, ID, will be followed prior to employment of any staff.

(7)
To address the noncompliance following this inspection the registered provider has updated their supervision policy, stating that supervision meetings will be once per term/ quarterly instead of the once per month as previously proposed.
The registered provider renewed commitment to follow the services induction policy, and complete the induction process outlined within it, and document same.
The registered provider committed to renewing Children First training.

Supporting documentation submitted

- Record of staff meeting dated May 19th 2025
- New Staff Induction checklist.
- Contractor compliance file.
- Roster including planned First Aid training on 17th November, and planned Manual handling and Fire safety training on 18th November.
- Staff supervision records for staff dated October 2025, as referenced above, previously seen on inspection.

Summary Comment

The registered provider did not address the following non compliances under regulation 9(7):
There was no record of the induction process for two staff having commenced employment in the service since the last inspection.
There was no record of staff meetings having taken place since the 19th May 2025.
There was no record of staff training in relation to child protection as scheduled following the previous inspection.
Following review of the corrective and preventive actions submitted by the registered provider and supporting documentation, the early years inspectorate was not assured of the overall governance structure of the service and that it could meet the requirements of legislation to ensure the care, wellbeing and safety of children.

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. There were a maximum of 40 children being cared for by 10 adults during the inspection.

(8)(a) There were 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:

- (a) the name, position, qualifications and experience of the person in charge and of every other employee,
- (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

1(h) A sample of the attendance records maintained by the service were reviewed and reflected the children in attendance on inspection in those rooms sampled.

Non-Compliance Information

1(a) There was no curriculum vitae available for one external contractor who was present on the day of inspection.

1(i) The staff roster did not reflect the staff present on the day of inspection, or for the week reviewed.

1(j) A sample of 10 medicine administration records were reviewed. None of these records were signed by a second member of staff as a witness contrary to the service policy on administration of medication. Failure to have medication administration witnessed may pose a risk to the continuity of care of the child.

1(k) A sample of sixteen accident and incident forms were reviewed. Four of these forms were incomplete. Two had no second staff member's signature. Two had no parents' signature contrary to the service's policy. This omission on the records sampled poses a risk to the continuity of care of the children. This regulation was found to be non-compliant on the last inspection on 15 May 2025. The corrective and preventive actions as stated by the registered provider did not prevent recurrence of this non-compliance.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

1(a) A CV was sourced for the adult contracted to work weekly with the children in the service as required.

The service developed a contractor compliance document to prevent a reoccurrence of this noncompliance.

1(i) An amended roster was submitted to reflect the staff working in the service, as required. The person in charge stated that the roster will be updated to reflect staff absences going forward.

1(j) The person in charge corresponded with staff reminding them of the requirement to have a second staff signature. One sample of a completed medicine administration form was submitted.

1(k) The registered provider reviewed completed accident and incident forms. The person in charge of the service corresponded with staff about the procedures and steps to take for the Accident and incident reports.

Supporting documentation submitted

A record of a CV was submitted.

An amended roster was submitted.

A record of correspondence with staff reminding of requirement to have a second staff signature on medicine administration forms was submitted.

A record of correspondence to staff about the procedures and steps to take for the Accident and incident reports was submitted.

One record of medicine administered was submitted.

The medicine administration policy was submitted

A completed accident and incident form was submitted

Summary Comment

The corrective and preventive actions taken by the registered provider and supporting documentation were reviewed by the Early Years Inspectorate and deemed to address the non-compliances.

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

The children had their water beakers available at all times during the inspection.

Meals and snacks were served to the children at regular intervals. The children were given ample time to eat their meals. Portions were generous and there was an extra portion should a child want more. Children were encouraged to feed themselves.

Children's nappies were changed regularly and as required. The staff were observed engaging warmly with children when providing this care.

There was a designated nap time for both care rooms sampled. Staff made the children comfortable for their rest by removing footwear and outer clothing. They provided the children with blankets and offered soothers and comforters to those who used them.

The children all had an opportunity to play outdoors.

In conversation with staff, they described their use of an online application to communicate with parents and inform them regarding children's meals naps and nappy changes.

Non-Compliance Information

1. There was no adult sized seating available in the Wobbler room to provide staff with a comfortable place to sit, hold, comfort and feed children.

An adult was observed comforting a child who was upset at 10:19hrs squatting on the floor

When staff were settling children down to sleep a chair was brought to the room at 11:55 and one adult sat on the chair to give a child a bottle before putting him back in his cot in the cot room. There were three children in cots in the care room at this time, waiting to have their bottles prior to sleep.

The lack of seating available for an adult to sit down with a child to provide comfort or meet their care needs was identified as a noncompliance previously on inspection on 08 February 2024. The measures taken at that time did not prevent the reoccurrence of the noncompliance.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

An adult sized chair was put into the Wobbler room to be used when comforting a child or giving a bottle.

Supporting documentation submitted

A photo of the chair in the care room was submitted.

Summary Comment

The action taken and supporting documentation submitted have been reviewed by the Early years Inspectorate and deemed to meet the noncompliance.

Part V - Care of Child in Pre-school Service

Regulation 20 – Facilities for rest and play

- (1) Subject to this regulation, a registered provider shall ensure that-
- (b) there are adequate and suitable facilities for a pre-school child to rest during the day, and in the case of an overnight pre-school service, during the day and the night.

Non-Compliance Information

1(b) Appropriate rest facilities were not provided for all children under two years in the Toddler room.

Five children aged one year were observed on foldable mattresses placed directly on the floor rather than suitable floor beds.

This may impact the safety and quality of sleep for children under 2 years.

Five children in the Toddler room were not provided with sheets for their beds contrary to the service policy on safe sleep. Children were observed sleeping directly on the waterproof mattress.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The registered provider completed a safe sleep assessment with each family in the toddler room which outlines the change from a cot to the floor mattresses. The registered provider also provided sheets to the Toddler room. To prevent this noncompliance from re occurring in the future, each child that moves from the Wobbler room up to the Toddler room will be required to have the safe sleep assessment filled in by the parents.

Supporting documentation submitted

Sleep plans were submitted.

A photograph of a floor mattress with a sheet was submitted.

Summary Comment

The actions taken by the registered provider did not address the availability of suitable sleep equipment for the children's age and stage of development.

Floor mattresses are not suitable for children under two years. All floor beds must have a firm, flat and waterproof mattress, that is easily cleanable and offers the child the same level of support and comfort as a cot.

The sleep plans submitted by the service did not evidence consideration of the core elements required in a sleep plan for children under two.

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 and exits were appropriately secured to prevent children from exiting the premises unsupervised and to prevent unauthorised persons from gaining access to the service.

The children were supervised at all times including mealtimes and during transition from the care rooms to the sanitary areas sleep rooms and outdoor area.

Cleaning agents were appropriately stored in locked cupboards and on high level shelving in the sanitary areas and in rooms the children didn't have access to.

Children did not have access to the kitchen.

Infection Control:

There was liquid soap, paper towels and warm water that did not exceed 43°C available for hand washing to prevent the spread of infection.

The staff were observed cleaning the tables before and after eating.

The children's hands were washed in wobbler and toddler rooms before eating.

There was an adequate system in place to remove mouthed toys from circulation in the wobbler room, staff discussed how the toys were stored cleaned and disinfected prior to the children re using them.

Children's soothers were stored individually until use at nap time.

Children's water beakers were individually labelled.

The staff were observed wearing personal protective equipment appropriately and following the services nappy changing policy, washing their hands and the children's hands as required to prevent cross contamination and spread of infection.

Administration of Medication:

Medicines were stored out of reach of children in their original packaging as required.

Staff demonstrated an understanding of the appropriate measures to be taken to safeguard children if medicine administration was required.

An adequately detailed care plan was in place for a child with additional medical needs. Staff were aware of signs and symptoms to observe for and the action plan in place.

Fire Safety:

Fire exits were unobstructed and signposted throughout the building.
Fire action signs were displayed in prominent positions throughout the building.

Outing:

The service had evidence of parental consent for outings and an outings policy which detailed measures taken to ensure the safety and welfare of children when on an outing.

Non-Compliance Information

The inspectors found by observation of practice, review of documentation and discussion with staff that the registered provider had not taken adequate measures to safeguard all children attending.

General Safety:

1. One adults vetting disclosure was not dated within the previous three years contravening the Early Years Inspectorate Regulatory Notice ‘EYI-RN12.3 Renewal of Garda Vetting’. This regulation was found to be non-compliant on the last inspection on 15 May 2025 The corrective and preventive actions as stated by the registered provider did not prevent recurrence of this non-compliance.

Following the last inspection on 15 May 2025, the registered provider submitted preventive actions to address the non-compliance found on inspection which stated that

- a monthly file review will be conducted by the manager and deputy manager to ensure that all vetting documentation and relevant records are thoroughly checked, up to date, and compliant with current regulations.
- each review will be signed off by both parties to confirm completion and regulatory adherence.

The registered provider has not successfully implemented the preventive action to prevent recurrence of this non-compliance to ensure that all adults have been appropriately vetted which poses a risk to children attending the service.

Infection Control:

Children were observed touching the lids of the pedal operated bins, in wobbler and toddler rooms during the inspection. This poses a risk of contamination and cross infection to the children.

Administration of Medication:

Upon review of a sample of medicine administration records, see regulation 16 (1) (j), it was noted that there was no second staff signature to indicate that a second adult witnessed the administration of medicine in ten sample cases. This is in contravention of the services medication management procedure which states that staff must

have a witness present for the medicine being administered and the record must be countersigned by that person.

Safe Sleep:

Procedures and practices in place in relation to safe sleep were inadequate and contrary to the service policy on safe sleep posing a potential risk to the health and safety of children as follows.

1.Sleep checks were not carried out every 10 minutes in the Toddler room contrary to the service policy on safe sleep. There was no sleep check carried out for a period of 22 minutes after children fell asleep.

Individual sleep checks were not carried out. A staff member was observed standing over a group of children to complete a sleep check rather than checking each child individually.

2.There was no evidence available on inspection to demonstrate that consultation with parents/guardians had taken place to ensure safe and agreed sleep plans were in place and that parents had given consent for their child to sleep on a floor bed rather than in a cot, for five children under two years sleeping on foldable mattresses on the floor in the toddler room. This is contrary to the service's safe sleep policy and procedure document.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

The proposed registered provider has engaged with the Early Years inspectorate change in circumstances department to change the named registered provider of the service. The registered provider has acquired garda vetting as part of that process.

To prevent this noncompliance the person in charge will set reminders to check Garda vetting and apply for new garda vetting in ample time before it runs out.

Infection Control:

The person in charge has shown the children how to use the foot pedals on the bins. The staff will also practice handwashing regularly but especially if they witness a child touching the bins throughout the day.

Administration of Medication:

The person in charge has communicated in writing and verbally to all staff about the medicine books and how they are to be filled in correctly and if in doubt to please contact the manager or deputy to confirm.

All staff have received the policy on medication administration. Medicine administration policy/procedure is available in each room.

Safe Sleep:

Individual Sleep checks will be completed. Safe sleep plans have been sent out to parents of children attending the Toddler Room.

Rooms have a safe sleep procedure to refer back to in each sleep room.

Supporting documentation submitted

General Safety:

Evidence of CIC application was submitted. Garda vetting applied for proposed registered provider.

Infection Control:

Photos of procedure to use pedal operated bins submitted by the person in charge.

Administration of Medication:

The registered provider has submitted the correspondence that has been issued to staff in relation to administration of medication and witnessing same and signing the document at the time.

The registered provider has submitted the policy on medicine administration.

Safe Sleep:

The services Safe Sleep policy was submitted which included details of safe sleep checks to be carried out by staff.

Sleep plans were submitted following consultation with parents for children under two years.

Summary Comment

The Early Years Inspectorate verified the registered provider has an in-date garda vetting certificate.

The actions taken by the registered provider and supporting documentation submitted by the registered provider, have been reviewed by the Early Years Inspectorate and deemed to address the non-compliances under regulation 23.

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

(2) There were a number of fully stocked first aid boxes stored safely and available to the children attending the service.

Non-Compliance Information

(1) While it is acknowledged that there were three adults present during the inspection with First Aid Responder training, the roster indicated that there was no adult with in-date first aid responder training available to the children between 17:30 and 18:00 on 03 November 2025. This was confirmed by the person in charge.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

A staff member with FAR training will be rostered each day to cover the opening and closing of the centre.

Supporting documentation submitted

A copy of the staff roster indicated that an adult with FAR training will be available to the children at all times of opening.

Summary Comment

The actions taken and evidence submitted by the registered provider has been reviewed and deemed to address the noncompliance by the Early Years Inspectorate.