

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015DR131
Name of Service:	Magical Days
Address of Service:	118 Upper Glenageary Road, Glenageary, Co. Dublin
Eircode:	A96 R205
Name of Registered Provider:	Aoife Hale
Service type:	Full Day, Part Time
Date 1 of Inspection:	09/06/2025
Date 2 of Inspection:	10/06/2025

No of pre-school children Day 1:	AM	42	PM	40
No of pre-school children Day 2	AM	41	PM	n/a

Address of the Early Years Inspectorate:	Early Years Inspectorate, Suite 7, Vista Primary Care, Ballymore Eustace Rd, Naas, Co Kildare
Inspection undertaken by:	R. Brien & F. Carty
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	N/A
---------------------------------	-----

Description of service

Magical Days is a privately owned, full day care and part-time service which provides care to children aged 0 to 6 years. The service is registered to operate from 07:45 to 18:15, Monday to Friday.

The service is located in a purposely adapted detached two storey premises in a residential, urban area in Glenageary, County Dublin. There are four care rooms in the service. Three care rooms were open during the inspection. The Baby room is located on the first floor and the Toddler, Pre-Montessori and Montessori rooms are located on the ground floor. The Pre-Montessori room was closed during the inspection.

The Baby room caters for children aged 1 year. The Toddler room caters for children aged 1 to 2 years and the Montessori room caters for children aged 2 to 5 years. The service has a designated cot room on the first floor adjacent to the Baby room. A fully enclosed outdoor play area is available to the rear of the premises.

Staffing

The service currently employs 10 staff members who work directly with the children.

There were eight staff working directly with the children on the first day of inspection and nine staff working directly with children on the second day of inspection. The registered provider does not work directly with the children in the service. The registered provider arrived following the inspector's arrival on the first day of inspection and was present throughout the remainder of the inspection.

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/ information and records/ health, welfare and development of child/ safety and premises and facilities. 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),(4),(7)(a)(c) – Management and recruitment,

11 (1),(2),(8)(a) – Staffing levels,

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

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

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

21 – Equipment and materials,

23 – Safeguarding, health, safety and welfare of child,

25 (1) – First aid,

29 (d) – Premises.

A sampling process was used to assess compliance under regulation 20 (1)(b) – Facilities for rest and play, as a result, the scope of the inspection included the Baby room.

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

Acknowledgments

The inspectors wish to acknowledge the cooperation of the registered provider, person in charge, staff and children who were present on the day of the inspection.

Part III – Management and Staff

Regulation 9 – Management and recruitment

(1) A registered provider shall ensure that-

- (a) the service has a designated person in charge and a named person who is able to deputise as required,
- (b) at all times during the period when the pre-school service is being carried on, the designated person in charge or the named person referred to in subparagraph (a) is on the premises, and
- (c) there is a clear management structure in the service that identifies the lines of authority and accountability in the service and the specific roles and responsibilities of each employee and unpaid worker.

(2) A registered provider shall ensure that each employee, unpaid worker and contractor is suitable and competent taking into consideration the nature of the needs of children, including by-

- (a) consideration of references from the person's past employers, if any, and in particular the most recent employer, if any,
- (b) consideration of references from reputable sources in the case of a person who has no past employers,
- (c) consideration of the vetting disclosure received from the National Vetting Bureau of the Garda Síochána in accordance with the Act of 2012 in respect of the person, and
- (d) ensuring, insofar as is practicable, that where a person has lived in a state other than the State for a period of longer than 6 consecutive months, he or she provides police vetting from the police authorities in that state.

(4) A registered provider shall ensure that, without prejudice to the generality of paragraph (2) and subject to paragraphs (5) and (6), each employee working directly with children attending the service holds at least a major award in Early childhood Care and Education at Level 5 on the National Qualifications Framework or a qualification deemed by the Minister to be equivalent.

(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)(b)(c)	The service had a designated person in charge and a named person to deputise as required who were both on the premises throughout the inspection. A clear management structure was in place in the service.
(2)	The inspection focused on the recruitment records for two adults employed since the last inspection on 29 th January 2025. Regulation 9(2)(c) was reviewed in respect of these two adults and three other adults who were present during the inspection. Documentation was reviewed in respect of these adults and met regulatory requirements as follows;
(a)(b)	Of the four validated, written references that were required, three were available from a past employer and one was available from a reputable source.
(c)	Garda vetting disclosures from the National Vetting Bureau of An Garda Síochána were available for the five adults. The service also demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years.
(d)	Police vetting was required and was available for two staff members who had lived outside the State for a period exceeding 6 months as an adult.
(4)	Records were available evidencing that the two staff members who were employed to work directly with the children held the required qualification or equivalent.
(7)	
(a)(c)	

The registered provider demonstrated that they had taken reasonable measures to ensure that all employees were appropriately supervised and provided with appropriate information and training to safeguard the health, safety and welfare of children attending the service and to comply with the regulations as evidenced by the following;

- Documentation reviewed evidenced that regular team meetings and one on one support and supervision meetings were in place since the last inspection of the service on the 29th January 2025 for staff members. Documentation demonstrated that practice issues and policies and procedures were discussed during these meetings. Evidence was available to demonstrate that a staff meeting had taken place on the 3rd June 2025. This was in line with the staff supervision policy in place in the service.
- Two staff members had commenced employment in the service since the last date of inspection. Evidence was available to show they had received formal induction training when they commenced employment. This was in line with the staff training policy in place in the service.

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 were adhered to at all times during the inspection. There were 42 children attending the service being supervised by 8 adults on the first day of inspection. There were 41 children attending the service being supervised by 9 adults on the second day of 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:

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

Compliance Information

- (k)
Seventy accident and incidents records were completed since the last inspection on 29th January 2025 and were reviewed. These records were signed by staff and parents and were completed appropriately.

Part V - Care of Child in Pre-school Service

Regulation 19 - Health, welfare and development of child

(1) A registered provider shall, in providing a pre-school service, ensure that-

(a) each child's learning, development and well-being is facilitated within the daily life of the pre-school service through the provision of the appropriate activities, interaction, materials and equipment, having regard to the age and stage of development of the child, and

(b) appropriate and suitable care practices are in place in the pre-school service, having regard to the number of children attending the service and the nature of their needs.

Compliance Information

(1)(a)(b)

The service had a healthy eating policy in place. Children brought in a morning and afternoon snack from home and the main meal was prepared and cooked onsite. Meals were provided at regular intervals. Dinner was served between 12:00 and 12:30. Younger children were given bibs for dinnertime. Children were encouraged to feed themselves and staff supported children in the Baby room who needed assistance with their dinner.

Children were encouraged and supported to be independent, older children were observed using the toilet independently and cleaning up after their play and meals. Children's nappies were changed regularly, and staff were observed engaging warmly with children when providing this care. Staff in the Baby room were observed cleaning children's noses as required and younger children's hands and faces were cleaned after dinner.

There was a designated nap time for younger children attending the Baby and Toddler rooms. All children were made comfortable for sleep, staff provided the children with blankets, and they offered soothers to those who used them. The environments were calm and conducive to sleep, with staff soothing the children as needed during this time.

Staff displayed warmth and sensitivity during their interactions with the children throughout the inspection. Children were comforted promptly when they became upset. Staff were observed holding children and speaking to them softly. Staff were observed to use distraction, gentle tones and praise when promoting positive behaviour in line with the service's behaviour policy.

Staff described how they record information about each child's day using an online application detailing information on food, sleep, nappy changes and activities and at arrival and collection time.

The Toddler and Montessori care rooms were arranged into areas of interest including small world toys, construction toys, rest areas with books and home corners providing children with the freedom to play and explore. The materials were observed to be accessible to the children on low level shelving. Low level tables and chairs were available in the Toddler and Montessori care rooms. Family photos, birthday walls and children's artwork were displayed in the care rooms. The environments were laid out to support the children's independence. Play materials were observed to be accessible to the children on low level shelving.

A fully enclosed outdoor play area was located to the rear of the premises and had shock absorbent surfacing. All children were provided with the opportunity to play outdoors and were dressed appropriately to the weather.

Non-Compliance Information

(1)(a)(b)

Inspectors observed that each child's learning, development and well-being was not facilitated within the daily life of the pre-school service and that suitable care practices were not in place having regard to the number of children attending the service and the nature of their needs as follows:

1. On the first day on inspection in the Montessori room, two groups of children were not offered a drink with their dinner. On the second day of inspection, seven children attending the Baby room were not given a drink with their dinner and were placed to sleep following their meal with no drink offered.
2. The personal care needs of all children were not met in a timely manner in the Toddler room. On both days of inspection children were observed with mucus coming from their noses. Staff were observed engaging with the children, but did not clean their noses.
3. In the Toddler room, on the second day of inspection at dinner time, there were 3 staff and 15 children present. Two staff members were observed preparing beds for the designated nap time while one staff member supervised the 15 children during mealtime. This reduced the opportunity for social interaction, conversation and meaningful engagement between the staff members and children during the mealtime and is contrary to the healthy eating policy in place in the service. Further details regarding this mealtime are detailed under regulation 23.

4. The environments in the Baby room and the outdoor area were not appropriately resourced to promote all areas of development and to provide enriching play experiences for the number of children in attendance as follows;
- a. The environment in the Baby room did not support the children in initiating and sustaining play activities. The room did not adequately meet the needs of the seven children present due to a lack of clearly defined interest areas to support the learning and development of children in the room. For example, the supporting play materials for the toy kitchen were stored on a shelving unit away from the kitchen. There was no other equipment or play materials to support imaginary and role play in the kitchen area.
 - b. Opportunities for sensorial and natural play were limited in the Baby room due to an over-reliance on plastic toys and a lack of real, sensory, and natural materials. The range of plastic play materials provided, insufficiently stimulated the senses and could curtail children's learning and development experiences.

The children in this room were attending on a full day care basis. At times, children were observed climbing on low level shelving units and pushing the toy kitchen away from the wall and standing behind it. Staff were observed trying to redirect children away from these activities.
 - c. The range of materials within the environment outdoors were inadequate for the effective provision of challenging, diverse, creative and enriching experiences for children to promote all areas of development, for example, it is acknowledged that there were sensory trays available in the outdoor area, however they were empty on both days of inspection, and these activities were not available to the children. The environment did not support the children in initiating and sustaining play activities. Children from the Toddler and Montessori rooms were observed to be wandering aimlessly at times in the outdoor play area. Some children were observed climbing up onto the back of a bench, running into each other and climbing on top of each other during outdoor play.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

1. A memo was issued to all staff in the Montessori room and Baby room outlining the importance of offering water during all mealtimes. This was followed by staff acknowledgment of the memo. A water station has been established in the Montessori room and Baby Room with individually labelled beakers and a jug of fresh water, accessible to all children throughout the day. Water cups were visibly placed beside meals during lunch. Staff in both rooms have been booked to complete the e-learning course Facilitating Safe Snack and Mealtimes. Water provision has been incorporated into the daily meal procedure, and a checklist is used to confirm water is offered at every meal. New staff induction now includes reviewing fluid and hygiene procedures. This is documented on the Induction Checklist.

2. A memo was distributed to staff in the Toddler room reiterating procedures for addressing children's hygiene needs, specifically regarding nasal hygiene. The Infection Control Policy has been re-issued to all staff, with signed acknowledgements on file. Staff have been booked onto Infection Control course to reinforce best practice standards. Weekly hygiene checks are now carried out by the Registered Provider and/or the PIC, and spot checks are performed by management. Going forward, the Infection Control Policy and Care Practices will be reviewed at monthly team meetings and during support and supervision sessions, ensuring continued staff awareness and compliance.

3. A staff memo has been issued outlining new procedure requiring active staff engagement with children during meals and outlining a revised staffing structure during transitions (e.g., bed preparation). Additional support staff are allocated during mealtime as needed. Toddler staff have been booked into Facilitating Safe Snack and Mealtimes course to improve practices. The manager conducts monthly mealtime audits, assessing both staff ratios and quality of interaction.

4.
 - a. Defined interest areas have been created in the Baby room, and toy kitchen accessories have been moved to children's reach and arranged attractively. The management and the team will engage and work directly with a quality development service and focus on Learning

Environments. Staff have used Aistear's Learning Environment Self-Evaluation Tool to review the space.

Monthly room environment reviews are scheduled using the Aistear self-evaluation checklist, with management oversight. A memo has been issued reminding staff to maintain accessible, inviting interest areas as part of daily room setup.

- b. Sensory and natural play materials have been added to the Baby room, and reliance on plastic toys has been reduced. New resources and materials have been ordered and will be displayed in the room so they are accessible to the children at all times. The learning environment audit now includes a checklist item specifically for sensory and natural materials. Staff have been enrolled in Learning Environments in the Early Years training to support continued improvement.
- c. Outdoor sensory trays are now regularly checked and filled and available for children's use, with new outdoor play materials introduced.
A weekly outdoor resource inspection has been implemented to ensure materials are replenished and appropriate. Management completes a monthly review of outdoor engagement, with a focus on children's sustained play and safety.

Supporting documentation submitted

Written and photographic evidence was presented to demonstrate the corrective and preventive actions submitted by the registered provider.

Summary Comment

The corrective and preventive actions as stated by the registered provider have been deemed to address these non-compliances. These actions will be assessed on the next inspection.

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.

Compliance Information

(1)(b)

Adequate and suitable cot sheets and blankets were provided for all children attending the Baby room.

Part V - Care of Child in Pre-school Service

Regulation 21 – Equipment and materials

A registered provider shall ensure that there is adequate and suitable furniture, play and work equipment and materials available on the premises of the pre-school service.

Compliance Information

The play equipment and materials available and in use during the inspection were observed to be adequate and suitable for the age of the children attending during the inspection.

Part VI - Safety

Regulation 23 - Safeguarding health, safety and welfare of child

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

Compliance Information

General Safety:

- The 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 toys and play equipment observed in use by the children on the day of inspection appeared in good working order.
- Cleaning agents and medicines were stored safely out of reach of children.

- All blind cords were secured.

Infection Control:

- Liquid soap, warm water and paper towels were available to facilitate hand washing.
- A system was in place for effective sterilisation of soothers.
- Waste was managed appropriately with the use of pedal bins.
- Individual bed linen was provided for children. Staff stated that bed linen is laundered weekly.

Safe Sleep:

- Children were physically monitored while sleeping and sleep checks were documented every ten minutes. Discussion with staff demonstrated that staff were familiar with safe sleep guidelines.
- An adult remained in the room at all times where children were sleeping on low beds.

Fire Safety:

- All fire exits were clear of obstruction.

Non-Compliance Information

Infection Control:

Inspectors observed a number of practices which posed a risk of transmission of infection within the service:

1. The handwashing practices observed were inconsistent and at variance with the policy in place in the service as follows;
 - On the first day of inspection in the Toddler room, children's hands were not washed following outdoor play.
 - While it is acknowledged that children's noses were cleaned promptly in the Baby room, a staff member was observed to clean children's noses on three occasions and did not wash their hands following this.
2. Some nappy changing practices observed during the inspection were inadequate for infection control purposes and at variance with the service's nappy changing procedure. Staff were observed to redress children with the same used gloves.
3. The children attending the Toddler room were of an age where they explored toys with their mouths. On the first day of inspection, toys were not removed when mouthed despite the room having a designated

box for this purpose. The toys remained in use between the different children posing a risk of cross infection.

4. On the second day of inspection during dinnertime in the Toddler room, three children were observed drinking from other children's cups. Children were also observed sharing their spoons and taking food from each other's plates with their hands. During this time, there was 1 staff member supervising the 15 children in attendance while the 2 other staff members present in the room were observed preparing beds for the designated nap time.
5. In the cot room adjacent to the Baby room, six cot mattresses did not have a waterproof cover posing a risk of the spread of infection as they could not be adequately cleaned and disinfected.
6. There was no toilet roll holder to store toilet paper in the sanitary area used by the Montessori room. Children were observed handling the roll of toilet paper to tear off pieces for use posing a risk of cross infection.

Administration of Medication:

7. Practices in place for children attending the service requiring medication were at variance with the service policy, posing a potential risk to the health and safety of children as follows;
 - a. There were no documented individual care plans available for three children attending the Montessori room who required medication, posing a risk to the timely treatment of the children in the event of an emergency. Two of these children require emergency medication for an allergy.
 - b. Antihistamine medication for a child with an allergy attending the Montessori room was not stored in the care room. Staff stated that it is stored in the medicine fridge in the kitchen on the first floor. This posed a safety risk of delaying appropriate medical attention if the child became unwell.
 - c. In discussion with the inspector a staff member in the Montessori room was unable to adequately detail the correct procedures for administering auto injector medication should a child have an allergic reaction. This posed a safety risk of delaying appropriate medical attention if a child became unwell.

d. Medication for one child in the Montessori room was not stored in its original packaging and was not clearly labelled. This medication was stored loose in a zip lock bag and was not labelled with the child's name or individual dosage requirements.

8. On the first day of inspection, anti-febrile medication stored in the medicine fridge in the kitchen was observed to be frozen. This was immediately brought to the registered providers attention, and it is acknowledged that the registered provider immediately purchased new medication from an adjacent pharmacy and increased the temperature of the fridge.

Action submitted by the Registered Provider

Corrective & Preventive Action

Infection Control:

1. A memo was circulated to all staff reinforcing handwashing procedures, specifically addressing post-outdoor play hygiene and the requirement for staff to wash hands after nasal hygiene support.
The Infection Control Policy has been re-issued to all staff, and signed acknowledgements are on file. Staff have been enrolled in Infection Control (including COVID-19) e-learning course to ensure consistent understanding and application of correct hygiene practices.
Daily handwashing routine audits are now conducted by room leaders using a standardised checklist. Monthly management spot checks include direct observation of hygiene practices and feedback to staff. Hand hygiene expectations are included in staff supervision and induction, ensuring new and existing staff uphold best practice consistently.
2. A memo has been distributed outlining correct nappy changing protocol, specifically stating gloves must be removed and changed after each child. The Nappy Changing Policy and Procedure has been re-issued to all staff with signed acknowledgements documented. Staff have completed refresher training on correct nappy changing procedure, supported by internal demonstrations and follow-up checks. Staff are also enrolled in Infection Control course, which includes nappy changing procedures aligned with best practice.
3. Immediately following the inspection, all staff were reminded of the infection control policy regarding mouthed toys. A room meeting was held that same day to reinforce expectations. All mouthed toys were removed from circulation and placed in the designated cleaning box. The toys were subsequently washed

and sanitized in line with the service's infection control procedure before being returned to use. A daily hygiene checklist has been updated to include a specific tick box for monitoring the collection and cleaning of mouthed toys. A visual reminder poster was installed above the designated mouthed toy box to prompt staff. The Room Leader will conduct a spot-check twice daily to ensure adherence. All staff received refresher training on infection control protocols, with new staff receiving this as part of induction going forward. The policy will be reviewed quarterly to ensure continued best practice and compliance.

4. A memo was circulated to the Toddler room informing them of a new room routine which will ensure that 2 staff members are at all times seated with the children whilst they have their meals. This level of supervision will ensure that cups and cutlery are not crossed over between children. The manager will be inspecting at regular intervals during this transition to mealtimes to ensure that compliance is met and maintained in this area.
5. Waterproof cot sheets have been purchased. All cots will have waterproof sheets assigned going forward. The Manager has been informed via a memo to check these daily and to communicate any defects or ordering requirements to the Registered Provider.
6. A new toilet roll holder has been ordered to be put in place. The manager has been requested to ensure during her morning checks that checks of the bathrooms and for any defective equipment is completed.

Administration of Medication:

7.
 - a. Care plans for the children have been put into place. Upon enrolment should a child have any condition or allergy a care plan will be put in place. A monthly new protocol has been introduced whereby the Manager (or Deputy in their absence) conducts a full review of each child's enrolment form prior to the child's start date. This review includes identifying any medical conditions, allergies, additional needs, or medications, and verifying that all corresponding documentation (including care plans, GP instructions, and parental consents) is complete and in place. A monthly audit of children's records will be conducted by management to ensure that care plans are in place, up to date, and accessible to staff in the child's room. Any missing documentation will trigger immediate follow-up.

- b. The antihistamine medication and any emergency medications will be stored in the children’s care rooms. Staff have received training on the safe administration of medications which contain a section on how to safety store medications.
 - c. Staff have received Epi Pen training. During staff file audits all training needs will be established and monitored to ensure that certification is kept up to date.
 - d. Medication has been resupplied and is now contained in its own box. All medications will be stored in their own packaging. The medication policy has been resent to all staff members to ensure understanding and compliance.
8. As soon as the issue was identified, the registered provider was notified. Immediate action was taken: The compromised medication was discarded. Replacement medication was sourced and purchased from the adjacent pharmacy. The temperature setting of the fridge was adjusted and monitored to ensure appropriate storage conditions going forward. A Fridge Temperature Monitoring Log is in place and is completed twice daily (AM/PM) by designated staff. A copy of the fridge temp sheet has been put in place to indicate correct temperature range for medicine storage. Staff have received a refresher in safe storage of medication and the importance of temperature control.

Supporting documentation submitted

Infection Control:

Written and photographic evidence was presented to demonstrate the corrective and preventive actions submitted by the registered provider.

Administration of Medication:

Written and photographic evidence was presented to demonstrate the corrective and preventive actions submitted by the registered provider.

Summary Comment

The corrective and preventive actions as stated by the registered provider have been deemed to address these non-compliances. These actions will be assessed on the next inspection.

Part VI - Safety

Regulation 25 - First aid

(1) A registered provider shall ensure that a person trained in first aid for children is, at all times, immediately available to the children attending the pre-school service.

(2) A registered provider shall ensure that a suitably equipped first aid box for children-

(a) is safely stored in an easily accessible and conspicuous position on the premises, and

(b) is available to the children attending the pre-school service at all times.

Compliance Information

(1)

A person trained in first aid was immediately available to the children at all times on the day of inspection.

(2)

(a) First aid boxes were safely stored in an easily accessible and conspicuous location within the service.

(b) First aid boxes were available to the adults and children in the service at all times.

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

Compliance Information

(d)

On the days of inspection, the service appeared clean and well maintained. There was a routine cleaning schedule present in the service and staff were observed cleaning throughout the inspection.