

# Early Years Inspectorate Regulatory Report

## Pre School

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| <b>TUSLA Identifier:</b> | TU2015DY122 |
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| <b>Name of Service:</b> | Little People's Academy Ltd |
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| <b>Address of Service:</b> | Eccles Court, Hill Street, Dublin 1, Co. Dublin |
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| <b>Eircode:</b> | D01 X773 |
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| <b>Name of Registered Provider:</b> | Aifric Paul |
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|----------------------|--------------------------------|
| <b>Service type:</b> | Full Day, Part Time, Sessional |
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| <b>Date of Inspection:</b> | 12/03/2024 |
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|-----------------------------------|----|----|----|----|
| <b>No of pre-school children:</b> | AM | 33 | PM | 29 |
|-----------------------------------|----|----|----|----|

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| <b>Address of the Early Years Inspectorate:</b> | Early Years Inspectorate,<br>Child and Family Agency,<br>Unit 4&5 Nexus Building Block 6A, Blanchardstown Corporate Park,<br>Dublin 15 |
| <b>Inspection undertaken by:</b>                | Á Dunne & E Hosford  |
| <b>Title:</b>                                   | 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).

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| <b>Conditions if applicable</b> | Not applicable. |
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### Description of service

Little People’s Academy is a private childcare service which offers full time, part time and sessional education and care to children aged from 0 to 6 years. The service operates from a purpose-built building on the ground floor of residential apartment accommodation and is situated in an urban, residential area of Dublin 1. The hours of operation are from 7.45am to 6.15pm Monday to Friday. The service has six care rooms, namely; Junior Wobbler room, Senior Wobbler room, Junior Toddler room, Senior Toddler room, Junior Preschool room and Senior Preschool room. The service has one designated cot room. On the day of inspection, the Junior Wobbler room was closed and the Junior Preschool room was closed in the afternoon. The children have access to an outdoor area to the rear of the service.

### Staffing

On the day of inspection there were 9 adults working in the service to include the person in charge, seven childcare staff working directly with the children and one childcare staff member as stand in cook. 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/ safety/ premises and facilities. The inspection may also focus on other areas as required.

The inspection focused on an examination of compliance under the regulations.

Regulation 9 Management and recruitment (2)(a)(b)(c)(d), (4), (7)(a),

Regulation 11 Staffing Levels (1)(2),

Regulation 16 Record in relation to Preschool service (h), (i), (j), (k),

Regulation 19 Health, Welfare and Development of child (1) (a),

Regulation 21 Equipment and Materials,

Regulation 23 Safeguarding, Health, Safety and Welfare of child,

Regulation 25 First Aid (1),

Regulation 29 Premises (c),

Regulation 32 Complaints (1) (a)(b)(c), (2)(a)(b),

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

A sampling process was used to assess compliance under Reg 16 Record in relation to Preschool service and Reg 23 - Safeguarding, Health, Safety and Welfare of child. Regulation 11- Staffing Levels was assessed across all of the open rooms on the day of inspection.

The scope of the inspection included two rooms – Senior Wobbler room and Senior Toddler room and did not include the Junior Toddler room or Senior Preschool room. Junior Wobbler and Junior Preschool rooms were closed.

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

This inspection was triggered by information received to the Inspectorate.

12/03/2024.

An Immediate Action notice was issued to the service in relation to Regulation 25 – First Aid

Please see details in the body of the report.

### Acknowledgments

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

## Part III – Management and Staff

### Regulation 9 – Management and recruitment

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

*(a) consideration of references from the person's past employers, if any, and in particular the most recent employer, if any,*

*(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;*

## Compliance Information

(2) It was confirmed by the designated person in charge that seven new staff members have been employed in the service since the last inspection. The files of these seven staff members were reviewed as part of the inspection.

In addition, garda vetting disclosures were reviewed for all staff members employed.

(2)(a)(b) Fourteen written and validated references were available in relation to the seven staff members.

(c) Garda vetting disclosures were available for 18 staff members employed. However, the service did not adhere to the re-vetting timeframes as outlined in the Early Years Inspectorate Regulatory Notice, requiring services to renew Garda vetting every three years. Please refer to the information outlined under Regulation 23 of this report.

(d) Police vetting was available for seven staff members who have lived outside the State for longer than six months as an adult.

(4) Documentation was available to show that the seven staff members who worked directly with children attending the service held at least a major award in Early Childhood Care and Education at Level 5 or above on the National Framework of Qualifications or a qualification deemed eligible by the Department of Children and Youth Affairs.

(7)(a) Documentary evidence was available to demonstrate that new staff working within the service had received induction training and to demonstrate all staff had received updated and ongoing training for example, minutes of a Meeting held with staff on 21<sup>st</sup> February 2024, demonstrated that training was completed in the staff code of conduct policy- working with children. The inspection team was informed by area manager that training was planned for staff in positive interactions with 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.*

#### Compliance Information

(1) There was an adequate number of adults working directly with the children as follows :

There were 7 adults working with 33 children in the morning and 5 adults working with 29 children in the afternoon.

(2) The correct adult/child ratio was maintained in the service throughout the inspection as follows:

##### During the morning:

Junior Wobbler Room – Closed

Senior Wobbler Room - 2 adults to 5 children aged between 1 year 6 months to 2 years,

Junior Toddler Room - 1 adult to 4 children aged between 2 years to 3 years.

Senior Toddler Room – 1 adult to 6 children aged between 2 years to 3 years.

Junior Preschool Room - 1 adult to 4 children aged between 3 years to 3 years 6 months,

Senior Preschool Room - 2 adults to 14 children aged between 3 years to 5 years,

##### During the afternoon:

Junior Wobbler Room – Closed

Senior Wobbler Room - 1 adult to 5 children aged between 1 year 6 months to 2 years,

Junior Toddler Room - 1 adult to 4 children aged between 2 years to 3 years.

Senior Toddler Room – 1 adult to 6 children aged between 2 years to 3 years.

Junior Preschool Room - Closed

Senior Preschool Room - 2 adults to 14 children aged between 3 years to 5 years,

The designated person in charge was present in a supportive role and one staff member was available in a supportive role in the afternoon.

## Part IV – Information and Records

### Regulation 16 – Record in relation to pre-school service

*(1) A registered provider shall ensure that a record in writing is kept of the following information in relation to the service:*

- (h) details of attendance by each pre-school child on a daily basis;*
- (i) details of staff rosters on a daily basis;*
- (j) details of any medication administered to a pre-school child attending the service with signed parental consent;*
- (k) details of any accident, injury or incident involving a pre-school child attending the service.*

### Non-Compliance Information

- (1)
- (h) It was observed by the inspectors that the roll book in the Senior Toddler room did not accurately reflect the children present in the care room. This reduced the safe evacuation of children in the event of an emergency.
- At 11.55am 6 children were present in Senior Toddler room however, only 5 children were signed into the attendance record book.
- (i) The staff roster available did not reflect the staff present on the day of inspection for example seven staff who were absent on the day of inspection were on the roster as working that day.
- (j) Seven medication administration records were reviewed; the following information was not recorded
- The parent signature was not recorded on three of the forms reviewed.
  - No evidence of staff signatures were present for one administration of medicine on one form.
  - The second staff member signature was not recorded for one administration of medicine on one form and for two administrations of medicine on a second form reviewed.
  - The surname of the 2<sup>nd</sup> staff member signature was not recorded on five administrations of medicine on one form reviewed.
  - No date of administration of medicine was noted on one form.
- (k) On review of 13 accident and incident records available, the following information was not recorded:
- The parent's signature was not recorded on one form.
  - The date of the parent's signature was not recorded on one form.
  - The surname of the child was not recorded on two forms.

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

#### Corrective and Preventive Action

- (1)
- (h) All staff re-trained in service's 'Safe Arrival and Authorisation to Collect' Policy. Service's 'Safe Arrival and Authorisation to Collect Policy' has been reviewed and updated. Branch manager and assistant manager will conduct daily checks of room registers as part of their Daily/Weekly Health and Safety Checks.
- (i) Management re-trained staff members in service's 'Staff Absence's and Leave Policy'. Managing staff are recording staff absences on office copy of weekly staff roster so that it reflects a true record of staff present and absent on the day. Service's Staff Absences and Leave Policy has been reviewed and updated. It clearly states in the policy that management are to record daily changes to the office copy of the staff roster when unplanned staff absences occur so that it reflects a true record of staff present on the day.
- (j) All staff re-trained in service's 'Administration of Medication Policy'. Service's 'Administration of Medication Policy' has been reviewed and updated. Branch manager and assistant manager will conduct weekly checks of Administration of Medication Record' as part of their Daily/Weekly Health and Safety Checks.
- (k) All staff re-trained in service's 'Accident and Incident Policy'. Service's 'Accident and Incident Policy' has been reviewed and updated. Branch manager and assistant manager will conduct weekly checks of our Accident and Incident Record' as part of their Daily/Weekly Health and Safety Checks.

#### Supporting documentation submitted

- (1)
- (h) Copy of Safe arrival and Authorisation to collect Policy and evidence of staff training submitted.
- (i) Copy of Staff Absences and Staff leave Policy and evidence of staff training submitted.
- (j) Copy of Administering Medication Policy and evidence of staff training submitted.
- (k) Copy of Accidents and Incidents Policy and evidence of staff training submitted.

#### Summary Comment

The non compliances outlined above, under Regulation 16, have been addressed.

## Part V - Care of Child in Pre-school Service

### Regulation 19 - Health, welfare and development of child

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

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

#### Compliance Information

(1)(a)

#### Basic Needs:

- The service provided meals and snacks at regular intervals and a hot meal to the children. On the day of inspection, the inspectors observed a hot meal served between 11.00am and 11.15am in the care rooms supplied by an external food company, which was Caribbean chicken with rice and cubed potatoes. Between 2.40pm and 2.45pm, afternoon snack, made in the service kitchen, was served which was chicken or cheese wraps and apples. Extra food was available and different dietary requirements were catered for if required.
- Water and milk were available in each care room for the children to drink.
- Mealtimes observed were relaxed and sociable events, with children given time to sit at low tables appropriate to their ages, to eat meals with care and attention provided to each child supporting independence and wellbeing.
- Nappy changing and toileting were respectful and positive experiences for the children, and staff were observed to encourage the children to be independent in managing their personal care such as handwashing.
- Children's need for sleep and rest were met through the provision of comfortable rest areas available. Cots and low beds with individual bedding were available to the children who required sleep and the rooms were darkened and soft music played to provide for a restful environment.

#### Supporting Relationships around Children:

- Staff were observed to be interested in the children and their play, and interacted with them in a playful, engaging manner. They were responsive to the children and were observed to give them choices regarding their play activities.

- Images of the children and their families were displayed on the wall at a height visible to the children in the care room supporting children's identity and belonging.
- Staff completed daily record sheets to keep parents informed of their children's sleep, food intake and other information required.

### The Physical and Material Learning Environment:

- The rooms were bright and inviting play spaces.
- The furniture provided in the rooms was low level and appropriate for the children attending. The toys, equipment and play materials were easily accessible and visible to the children, this nurtured children's independence and ability to make decisions.

### Non-Compliance Information

#### Basic Needs:

1. Children in the Senior Wobbler room, Junior Toddler room and Senior Toddler room, were not observed to go outside to play on the day of inspection. Children need fresh air and opportunities to play outdoors every day to ensure their social, cognitive, gross and fine motor developmental needs are met.

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

#### Corrective and Preventive Action

#### Basic Needs:

1. All staff re-trained in service's 'Policy on Early-Years Curriculum and the Role of Play'. Service's Policy on Early-Years Curriculum and the Role of Play has been reviewed and updated. It also includes in the policy that one staff member can take a group of children outside, ratio permitting, and safety guidelines to be followed.

#### Supporting documentation submitted

1. Copy of Early Years Curriculum and Role of Play Policy and evidence of staff training submitted.

### Summary Comment

Under Regulation 19, the non-compliance outlined above has been addressed.

## 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

- In the Senior Wobbler room, there was a variety of play materials and equipment available to the children according to their age and stage of development, to include:
  - age-appropriate cause and effect toys,
  - home areas with associated supporting equipment,
  - range of jigsaws; range of construction toys; sorting and stacking toys,
  - range of toys for transporting such as cars and trains with tracks and small world play toys.
- The Senior Toddler room was laid out with the age and stage of development considered with play opportunities supported and accessible for the children with areas of interests defined and developed, for example:
  - Home corner area with play kitchen, play shop, cash register, supporting equipment such as play food and play equipment, dolls and play equipment, dress up clothes present.
  - Construction toys for example clicks, large nuts and bolts, magnetics, stickle bricks and waffles, cars and tracks, plastic building bricks, wooden puzzles and jigsaws.
- The toys and equipment were laid out on low level shelving and were visible and accessible to the children.
- Comfortable and cosy rest areas with books were available in the care rooms.
- The outdoor play environments to the rear of the premises were fully enclosed, the surface of which was covered with artificial grass. There was an overhead shelter to enable the children to access the outdoor area during inclement weather. The outdoor toys were suitable and available included a climbing frame with a slide, a playhouse, a slide, a mud kitchen, ride on cars, ride on bikes and seesaws.

### 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:

- On the unannounced arrival at the service by the inspectors, the entrance door leading into the premises was appropriately secured to prevent the children from exiting unsupervised and to restrict unauthorised persons from gaining access to the premises throughout the inspection.
- The outdoor area to the rear of the service was secure with a locked gate and concrete walls.
- The press in the Senior Preschool room was locked and the contents inaccessible to children.
- The kitchen area was inaccessible to the children throughout the inspection.
- Three poles in the outdoor area had secure foam padding in place.

##### Infection Control:

- Handwashing facilities for hand hygiene included thermostatically controlled water and paper towels.
- Handwashing was observed after nappy changing, after bathroom visits, and before and after mealtimes.
- Nappy changing facilities were available for the children and nappy changing was completed for the children, at set times or when required in accordance with the service policy.

##### Safe Sleep:

- The sleep needs for children under 2 years of age, were facilitated with access to cots for sleep.
- The sleep needs of children over two years of age were met through the provision of low floor mats.
- Shoes and clothing were removed from children while they slept.
- The temperature of the cot room, off the Senior Wobbler room was recorded as 19.5°C at 11.23 am, and the temperature of the Senior Toddler room at sleep time was recorded as 20.1°C at 11.39pm, meeting the acceptable temperature of 18-22 °C while children over 1 years old sleep.

##### Fire Safety:

- In the Senior Toddler room, the emergency exit area was kept clear during the inspection for efficient evacuation in the event of an emergency.

### Non-Compliance Information

#### General Safety:

1. Garda vetting was available for five staff members. However, this vetting disclosure was not dated within the previous three years in adherence to with the Early Years Inspectorate Regulatory Notice 'EYI-RN12.3 Renewal of Garda Vetting.
2. In the Senior Wobbler room nappy changing area, the light in the ceiling did not have a safety cover, leaving the bulb exposed, leading to a risk of injury if the bulb shattered.
3. In the Senior Wobbler cot room, one mattress had no safety label.

#### Infection Control:

In the Senior Wobbler room:

4. Two soap dispensers were empty and no soap was available for effective handwashing, leading to poor infection control.
5. The blue floor mat was torn at edges exposing foam inside. This did not allow for easy cleaning and posed a choking hazard should a child ingest the foam.
6. Flooring at the wash hand basin was lifting and damaged and not washable.

In the Senior Toddler room:

7. Children and staff were observed to open pedal operated bin using their hands to dispose of hand paper towels after hand washing.
8. Soothers were not stored or handled by staff to reduce cross infection. For example, at 11.13am three soothers were stored on an open shelf and taken by staff from shelf and given directly to children at sleep time.
9. During sleep time, low floor mats were not positioned with the recommended 50 centimetres between each child to enable staff to access children in an emergency and reduce the potential risk of cross infection.

#### Safe Sleep:

10. In the Senior Toddler room, between 11.19am and 12.07pm, staff did not maintain 10-minute sleep checks to include their colour, breathing and position while six children slept.

### Action submitted by the Registered Provider

#### Corrective & Preventive Action

#### General Safety:

1. Management staff members have been re-trained in service's 'Vetting Policy'.

A record of all staff members dates of Garda vetting has been drawn up and placed at the front of the Staff Details Files so renewal dates can be easily monitored by management.

All Vetting Disclosures requiring up-dating have been completed and are on file for inspection. Service's Vetting Policy has been reviewed and updated.

2. Maintenance team was informed; and a shatterproof bulb has been fitted. Safety check on bulbs to ensure they are shatterproof and in good working order has been added to the Daily Health and Safety Checklist.
3. A new mattress was purchased to ensure it had a safety label. Safety check on mattresses to ensure they have a safety label has been added to the Daily / Weekly Health and Safety Checklist.

### **Infection Control:**

4. All staff re-trained in the service's 'Infection Control Policy'. The Service's Infection Control Policy was reviewed and updated. Safety check on soap dispensers to ensure there is soap available in all rooms has been added to the daily tasks on the Daily/Weekly Health and Safety Checklist.
5. New floor mat purchased for the senior wobbler area. Safety check on floor mats/coverings added to the daily tasks on the Daily/Weekly Health and Safety Checklist.
6. Maintenance team was informed and flooring around sink area fixed. Safety check on flooring added to the daily tasks on the Daily/Weekly Health and Safety Checklist.
7. All staff re-trained in the service's 'Infection Control Policy'. All pedal bins were fitted with visuals / labels. The Service's Infection Control Policy was reviewed and updated.
8. All staff re-trained in the service's 'Infection Control Policy'. The Service's Infection Control Policy was reviewed and updated. All staff re-trained in the service's 'Infection Control Policy'.
9. A Floor Bed Layout Plan has been designed, displayed, and implemented for staff. The Service's Infection Control Policy was reviewed and updated.

### **Safe Sleep:**

10. All staff re-trained in the service's 'Safe Sleep Policy'. The 'Safe Sleep Policy' was reviewed and updated.

### **Supporting documentation submitted**

#### **General Safety:**

1. Five renewed Garda Vetting disclosures, copy of Vetting Disclosure Policy and evidence of staff training completed submitted.
2. Photographic Evidence and copy of Health and Safety Daily checklist submitted.
3. Evidence of Purchase of Mattress and copy of Health and Safety Daily checklist submitted.

## Infection Control:

4. Copy of Infection Control Policy, evidence of staff training and copy of Health and Safety Daily checklist submitted.
5. Evidence of Purchase of Floor Mat and copy of Health and Safety Daily checklist submitted.
6. Copy of Health and Safety Daily checklist submitted.
7. Photographic Evidence submitted.
8. Copy of Infection Control Policy, evidence of staff training submitted.
9. Copy of Infection Control Policy, evidence of staff training and photographic evidence of floor plans submitted.

## Safe Sleep:

10. Copy of Infection Control Policy and evidence of staff training submitted.

## Summary Comment

The non compliances outlined above, under Regulation 23, have been addressed.

## 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.*

### Non-Compliance Information

- (1) During the hours of 7.45am to 8.15am, there no staff member with first aid responder training or paediatric first aid training available. An Immediate Action Notice was issued. On 13<sup>th</sup> March 2024, the registered provider responded with an outline of a plan to address the non-compliance.  
On 14<sup>th</sup> March 2024, A second response to the Immediate action notice issued was requested from the service for further response required for non-compliance. The registered provider responded further with an outline of a plan to address the non-compliance.

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

#### Corrective and Preventive Action

- (1) The registered provider responded on the 14<sup>th</sup> March 2024 to the 2<sup>nd</sup> Immediate Action Notice request sent on the 14<sup>th</sup> March 2024 and stated; that one staff member had completed Paediatric First aid on 13<sup>th</sup> March 2024 and six staff members have been booked to complete Paediatric First aid and one additional staff member has been booked to complete First Aid Responder training

#### Supporting documentation submitted

- (1) Evidence for completion of Paediatric first aid for eight staff members submitted and for one staff member who completed First aid responder training 29<sup>th</sup> April to 1<sup>st</sup> May 2024 submitted

#### Summary Comment

The non-compliance outlined above under Regulation 25, has been addressed.

### Part VII - Premises and Space Requirements

#### Regulation 29 - Premises

*A registered provider shall ensure that the premises of the service are-*

*(c) kept adequately lit, heated and ventilated*

#### Compliance Information

(c) Mechanical ventilation was available in the sanitary area used for nappy changing for the Junior and Senior Wobbler room and in the sanitary area used for nappy changing and toileting for the Junior and Senior Toddler room in the corridor of the service, they were suitable and adequate to remove malodour from the two sanitary facilities and the corridor, following nappy changing.

## Part VIII - Notifications and Complaints

### Regulation 32 – Complaints

- (1) A registered provider shall ensure that the complaints policy of the service specifies-
- (a) the procedure to be followed by a person for the purposes of making a complaint in relation to the service,
  - (b) the manner in which such a complaint shall be dealt with, and
  - (c) the procedures for keeping a person who makes such a complaint informed of the manner in which it is being dealt with.
- (2) A registered provider shall ensure that-
- (a) a record in writing is kept of a complaint made to the provider in respect of the pre-school service, and
  - (b) the complaint is duly dealt with in accordance with the provider's complaints policy.

### Compliance Information

(1)(a)(b)(c)

The service had a complaints policy available, and it had the required statements and procedures documented.

(2)

(a) The service had a record in writing of complaints made in respect of the service.

(b) The service had documentary evidence to demonstrate that any complaints received were dealt with according to the service complaints policy.