

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2015DY255
<b>Name of Service:</b>	Eco Kidz Sportsco
<b>Address of Service:</b>	SportsCo, South Lotts Road, Ringsend, Dublin 4, Co. Dublin
<b>Eircode:</b>	D04 FA44
<b>Name of Registered Provider:</b>	Richard Lynch
<b>Service type:</b>	Sessional
<b>Date of Inspection:</b>	18/09/2024
<b>No of pre-school children:</b>	AM 22 N/A

<b>Address of the Early Years Inspectorate:</b>	Early Years Inspectorate, Floor 7 Brunel Building, Heuston South Quarter, St John's Road West, Kilmainham, Dublin 8 D08 X01F
<b>Inspection undertaken by:</b>	E. Griffin and E. Finnegan Hayes
<b>Title:</b>	Early Years Inspectors
<b>Authority to Inspect</b>	
The Tusla Early Years Inspectorate carries out inspections of Early Years Services under Section 58(J) of the Child Care Act 1991 (as inserted by Section 92 of the Child and Family Agency Act 2013).	

Conditions if applicable

Not applicable.

### Description of service

Eco Kidz Sportsco is located within a sports centre in Dublin 4. A sessional preschool service is provided to children aged between 2 and 6 years old, from Monday to Friday. The service participates in the Early Childhood Care and Education (ECCE) scheme and runs two sessions; 8.30am-12pm and 8.45am-12.15pm. There are two care rooms; Pod 1 located in the main area of the service catering for children aged 2 ½ to 5 years and Pod 2, which is run from the sports hall within the building catering for children aged 2 years 1 month to 3 years and 8 months. The reception, main entrance, children’s sanitary and nappy changing area is located in the main area of the service next to the Pod 1 room which has an adjoining outdoor play area. The service also provides a school aged service for children aged between 4 to 12 years old from 1.30pm to 6pm.

### Staffing

The registered provider employs five staff members to work in the service; the person in charge who oversees the day to day running of the service and four staff members who work directly with the children. On the day of the inspection the registered provider, person in charge and four staff members were present. The registered provider works in the service in a supernumerary capacity.

### 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 areas of governance, health, welfare and development of child and safety. The inspection may also focus on other areas as required. The following regulations were reviewed:

Regulation 9 (1)(2) and (4)-Management and Recruitment.

Regulation 11(1)(3) and (4)-Staffing Levels.

Regulation 15- Record of a Pre-School Child.

Regulation 16 (i), (j) and (k)- Record in Relation to Pre-School Service.

Regulation 19 (a) and (b)-Health, Welfare and Development of Child.

Regulation 21 Facilities for Rest and Play.

Regulation 23- Safeguarding the Health, Safety, and Welfare of Child

Regulation 26- Fire Safety Measures.

Regulation 28- Insurance.

Regulation 29- Premises.

As a result, the scope of the inspection included Pod 1 room and Pod 2 room. A sampling process was used to assess compliance under Regulation 15, Regulation 16, Regulation 19 and Regulation 23.

Inspection findings are documented in the inspection report which is first issued in draft format to the service with an opportunity to respond to any findings. Where statutory requirements are identified as not being met, the registered provider must demonstrate how they have rectified the non-compliance and will prevent any non-compliance from re occurring. The Corrective Action and Preventive Action plan (CAPA) will be used to inform decisions about compliance with regulatory requirements. Where the registered provider fails to meet the statutory requirements an escalation process may be commenced.

The inspectorate reserves the right to edit responses received for reasons including clarity, completeness and compliance with administrative and legal processes.

The contents of the report are compiled by the inspectorate body.

## Acknowledgments

The inspectors wish to acknowledge the cooperation of the 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;
- (b) Part VIIA (inserted by section 92 of the Child and Family Agency Act 2013 (No. 40 of 2013)) of the Act, and
- (c) these Regulations.

#### Compliance Information

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

(b) The designated person in charge was present when the inspectors arrived unannounced to the service. The registered provider arrived shortly after the commencement of the inspection.

(c) The service had a clear management structure in the service and staff were aware of their own role and responsibility.

(2) A review of the roster and conversation with management showed that the registered provider and five adults are employed to work in the service. The files of all six adults were reviewed,

(a) Nine written and verified references were available from past employers.

(b) Three written and verified references were available from a reputable source other than a past employer.

(c) Garda vetting disclosures were available for all five staff members and the registered provider. 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 available for six adults who had lived in a country other than Ireland for a period of six months or more as an adult.

(4) Evidence was available to show that the person in charge and the four adults who worked directly with the children held at least a major award in Early childhood Care and Education at Level 5 on the National Qualifications Framework or a qualification deemed by the Minister to be equivalent.

(7)(a)(c) Evidence demonstrated that the registered provider and the person in charge ensured that there was an induction and ongoing training process demonstrated by the following examples:

- The new staff members reported to having read the policies and procedures of the service and that they been given sufficient time to read the policies and procedures and ask any question they may have.
- There was documentary evidence available to show that staff were provided with individual support and supervision sessions.

### 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.*

*(3) Subject to paragraph (5), a registered provider of a sessional pre-school service shall ensure that at all times the minimum ratio of adults to children specified in column (3) of Part 2 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) therefore at that reference number is satisfied.*

### Compliance Information

(1) The registered provider ensured an adequate number of adults were working directly with the children. On the morning of the inspection there were 4 adults working with 22 children. In addition, the designated person in charge was available to provide support in the rooms where required.

(3) The registered provider ensured that at all times the minimum ratio of adult to children during the session.

- In Pod Room 1 there were two adults caring for 14 children aged between 2 ½ years to 5 years at 9.28am.
- In Pod Room 2 there were two adults caring for 8 children aged between 2 years and 1 month to 3 years and 8 months at 9.31am.

### Part IV – Information and Records

#### Regulation 15 – Record of pre-school child

*(1) A registered provider of a pre-school service other than a pre-school service in a drop-in centre or a temporary pre-school service shall ensure that a record in writing is kept in respect of each pre-school child attending the service containing the following particulars:*

- (a) the name and date of birth of the child;*
- (b) the date on which the child first attended the service;*
- (c) the date on which the child ceased to attend the service;*
- (d) the name and address of a parent or guardian of the child and a telephone number where that parent or guardian or a relative or friend of the child can be contacted during the hours of operation of the service;*
- (e) authorisation for the collection of the child;*
- (f) details of any illness, disability, allergy or special need of the child, together with all the information relevant to the provision of special care or attention;*
- (g) the name and telephone number of the child's registered medical practitioner;*
- (h) record of immunisations, if any, received by the child;*
- (i) written parental consent for appropriate medical treatment of the child in the event of an emergency.*

*(3) A record in writing referred to in paragraph (1) or (2) shall be open to inspection on the premises by-*  
*(c) an authorised person.*

## Compliance Information

(1) A sample of ten children's registration records were reviewed as part of the inspection. The registered provider ensured that the information required under (a)-(g) was maintained for each child.

(3) Records were open to inspection by an authorised person. All records requested by the inspector were available for review.

## Non-Compliance Information

(1) The registered provider did not ensure files that the information required under (h)-(i) were maintained for each child. Evidenced by the following:

- Eight children's records did not have their children's registration record fully completed. Part (1)(h) record of immunisations, if any, received by the eight children had been left blank.
- There was no written parental consent for appropriate medical treatment on two of the children's registration records. Parental consent is required in the event of a medical emergency.

## Corrective & Preventive Action submitted by the Registered Provider

### Corrective Action

The service has updated the Parental Consent form with the immunisation record part and given all parents a printed copy to sign. All Parental Consent forms are now signed and are in the children's folder.

### Preventive Action

Management will make sure that parents fill out all children's records and parents will not be allowed to join service until all relevant documentation has been fully completed.

### Supporting documentation submitted

Documentary evidence of the updated Registration Form.

## Summary Comment

The corrective and preventive actions taken by the registered provider addressed the non-compliances identified. Regulatory compliance has been met for Regulation 15.

### 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:*

*(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.*

*(3) A record referred to in paragraph (1) shall be open to inspection on the premises, and the documents and records referred to in paragraph (2)(a) shall be open to inspection whether on the premises or elsewhere, by an authorised person.*

#### Compliance Information

(1)(i) The registered provider ensured that there was an accurate record of the staff roster containing the details of the staff rostered on the day of inspection.

(j) The person in charge confirmed that only one child had received medication since the last inspection. This medication record was reviewed, and all information was completed in full.

(3) Records were open to inspection by an authorised person. All records requested by the inspector were available for review.

#### Non-Compliance Information

(k) A sample of twelve accident and incident records were reviewed; four records were not completed with the following information.

- Two accident and incident records did not include the signature of the parent.
- Two accident and incident records which included the parent's signature however these records did not include the date the parent had signed.

A similar non-compliance was observed during the previous inspection in March 2023 and the corrective and preventive actions have not been sustained.

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

#### Corrective Action

Management had a meeting with the team to talk about the accident and incidents and went through all the information that needed to be included on the form, to make sure that staff know how to fill out the form. It was explained that the parents need to sign and date this form.

#### Preventive Action

Management will make sure that during the training days, one of the topics will be “accident and incident reports,” where management will go through which part of the document to explain how to fill it out. Any new team members joining this year will have this as part of their initial training.

#### Supporting documentation submitted

- Documentary evidence of Team Meeting Agenda with staff signatures.
- Documentary evidence of team email sent to all staff in relation to accident and incident forms.

### Summary Comment

The corrective and preventive actions taken by the registered provider addressed the non-compliances identified. Regulatory compliance has been met for Regulation 16.

### 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)

- Children's drinks were available within their reach throughout the morning children were encouraged to take plenty of drinks.
- Children were given time to finish their snacks. Children who finished earlier were guided towards the other end of the room to play while the children who had not finished sat at the table to finish their snack.

- The presence of 'Family Wall' displays, 'Birthday Time' displays and the children's artwork on display throughout the service, this demonstrated a sense of identity and belonging for the children.
- There were cosy areas with a soft mat, cushions and books for rest and relaxation present in the two care rooms.
- Children's language development was supported through songs and storytelling which were observed during the inspection.
- Children were observed to use the outdoor play area during the inspection. This supports their social, cognitive, gross, and fine motor development.
- The service used an electronic application to communicate with parents and update them on their child's activities. Staff discussed how there is an information board in the reception area of the main building to keep parents/guardians up to date on events. The inspection team observed staff greeting parents at pick up times and chatting informally to parents about their child's day.
- There was evidence that staff in Pod 2 room followed a weekly planned curriculum. There was a curriculum statement on the wall and a weekly/monthly curriculum plan. Staff spoke how this month's curriculum theme was 'Autumn' and how the children had collected leaves in the outdoor play area during the week.

### Non-Compliance Information

(1)(b) There was evidence to show that the staff did not attend to the children's needs promptly and adequately during the inspection. The following was observed:

1. A child aged 2-3 years was observed to have a wet top after water play at 10.50am. There were no aprons offered during water play time and the child was observed to go home after 12pm with the wet top unchanged. Wet clothes can cause a child to feel discomfort.
2. During snack time at 10.15am a child aged 3-4 years who did not bring a snack from home was left waiting for an alternative snack. The child was observed to ask staff numerous times for their snack. It was only when the child asked the person in charge at 10.29am that the child was served a snack at 10.31am.
3. At going home time at 12.02pm a child was observed in a physical altercation with another child; the child became upset and while the staff comforted the child who was upset, they did not address the behaviour of the other child. The child continued to be physical with the other children, throwing balls at them. Children should be supported by giving them strategies that can help them to control their own behaviour and limit the impact on other children as per service policy.

- There was evidence the staff did not follow their own 'Healthy Food' policy. A child was observed to drink a fizzy drink brought into the service from home. This is at variance with the service's 'Healthy Food' policy which states 'we do not allow fizzy drinks in the service'.

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

#### Corrective Action

- The manager had a meeting with the team, and one of the topics was "wet clothes." To reinforce that children, need to wear aprons when playing with water and change their clothes if they get wet.
- The manager had a meeting with the team, and one of the topics was "lunchtime." To reinforce that when a child does not bring food, we provide something to that child. In our kitchen, we have fruits, crackers, breadsticks, and rice cakes
- Management created a behaviour management plan for the child and shared it with the family and since then we have been working on this plan. Management also had a meeting with the team to talk about children's behaviour and how it is important to observe and act on any negative changes in children's behaviour.
- Management sent an email to all parents to reinforce all kinds of food that children are not allowed to bring to school. Management also talked with all teachers about it, how to proceed in this case, by giving the child another option and send that food or drink back to home and talk to the parents.

#### Preventive Action

- Management will talk about the above topic during the first team meeting before the start of the new school year. Any new team members joining this year will have this as part of their initial training.
- Management will talk about the above topic during the first team meeting before the start of the new school year. Any new team members joining this year will have this as part of their initial training.
- Management will explain to the team how the behaviour management plan works before starting the new school year to make sure that they are aware of all the procedures that we follow in situations of alternating behaviour.
- Management will send the Healthy Food policy to all parents before the school year starts and also an email to explain to them what kind of food they are not allowed to bring.

#### Supporting documentation submitted

- Documentary evidence of Team Meeting Agenda with staff signatures.
- Documentary evidence of team email sent to all staff in relation to aprons at water play time.
- Documentary evidence of the Behaviour Management Plan.
- Documentary evidence of the Healthy Food Policy.

- Documentary evidence of team email sent to all staff in relation to alternative food available.
- Documentary evidence of email sent to all parents in relation to healthy food.

## Summary Comment

The corrective and preventive actions taken by the registered provider addressed the non-compliances identified. Regulatory compliance has been met for Regulation 19.

## 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-*

*(a) having regard to the number of pre-school children attending the service, their respective ages and the amount of time they spend on the premises, there are adequate and suitable facilities for each child to play indoors and, where required by these Regulations, outdoors, during the day.*

## Compliance Information

- The care rooms in the service were designed with the age and stage of development having been taken into consideration. Children were observed to take part in free play and group work. The layout of the rooms facilitated these choices as the toys and equipment were laid out on low level shelving and were visible and accessible to the children. For example, in Pod 1 room there were a variety of play materials and equipment available to the children according to their age and stage of development to include two play kitchens with supporting equipment, construction area, musical instruments, toy animals, jigsaws, magnets and a water tray. In Pod 2 room, there was a variety of play materials such as jigsaws, transport, animals, a toy kitchen with supporting equipment and art materials accessible at all times to the children.
- There was a sufficient number of low tables and chairs to accommodate children whilst they played and ate in each care room.
- There was a large outdoor play area with a soft surface. Equipment and toys available included a playhouse and ride on toys such as scooters and ride in/on cars.

### 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:

- All plug sockets accessible to children had socket protector covers.

##### Infection Control:

- The sanitary area and nappy changing area were equipped with liquid soap and warm water. The children were facilitated to wash their hands before eating, after outdoor play and after using the toilet.
- Pedal bins were observed to be used by staff and children in Pod 2 room and the sanitary area.

##### Fire Safety:

- On the day of the inspection, it was observed that all emergency exit doors were clear from obstruction. This ensured the safe effective evacuation of children and staff in the event of an emergency

#### Non-Compliance Information

##### General Safety:

- There was a cleaning spray and hand sanitizer stored in a box accessible to children in the Pod 1 Room. This posed a risk of injury to children. A similar non-compliance was observed during the previous inspection in March 2023 and the corrective and preventive actions have not been sustained

##### Infection Control:

- Perishable snacks such as milk, boiled eggs, yoghurt and cheese brought by the children from home for morning snack time were not stored in a fridge, this increases the risk of bacteria multiplying to levels which could result in illness in young children. This was a non-compliance during the previous inspection in March 2023 and the corrective and preventive actions have not been sustained.
- The hand paper towels in the sanitary area were not hygienically dispensed and were observed to be repeatedly dropped on the floor during hand washing time. This posed a risk of cross infection.
- The paint on the surface of the nappy changing unit was visibly worn and stained making this area not wipeable. This posed a risk of cross infection.
- Two nappy lotion creams were stored in a box and were not individually labelled with the child's name. This posed a risk of cross infection.

### Administration of Medication:

- The service did not have a comprehensive individual medical care plan to identify the actions to take in the event of an emergency for a child who had an identified allergy. The medical care plan included only the child's name, the allergy and the nature of the allergic reaction. This was a non-compliance during the previous inspection in March 2023 and the corrective and preventive actions have not been sustained.

### Fire Safety:

- Staff in Pod 2 were not aware of the procedure to follow during a fire evacuation and advised the Inspector that they would bring the children through the building and out the main door of the service. The fire evacuation plan instructs staff to use the nearest exit to evacuate. A designated emergency exit is present in the hall where Pod 2 is based.
- The details of the attendance of the children were not accurately recorded on the attendance log at the children's going home time between 12.09pm and 12.30pm. A staff member was observed to mark all children out at 12.15pm on the electronic attendance log. The staff member advised the inspector that once the children had gone home the attendance records would be updated to reflect real times of children's departure. Contemporaneous accurate attendance logs must be maintained to support the safe evacuation of children in an emergency. A similar non-compliance was observed during the previous inspection in March 2023 and the corrective and preventive actions have not been sustained.

### Action submitted by the Registered Provider

#### Corrective & Preventive Action

##### General Safety:

##### Corrective Action

- The cleaning spray and hand sanitiser are no longer in the classroom, the service keep them in the storage room in the hall.

##### Preventive Action

- Management will make sure the new staff will know that the service keeps all the cleaning products in the storage room.

##### Infection Control:

##### Corrective Action

- Every morning the manager puts milk, yoghurt, cheese and any kind of food that needs to be kept in the fridge, in case of the manager's absence another staff will do it.
- The service has installed a new blue roll dispenser in the children's toilet.
- The nappy changing unit was sanded and painted with washable paint.

- All nappy lotion creams are labelled with the child's name. We also talked about this in the meeting on 21/10/2024.

### **Preventive Action**

- This point was discussed in the meeting on 21/10/2024. It will be one of the points to be explained in our first team meeting at the beginning of the year. Any new team members joining this year will have this as part of their initial training.
- Management will make sure that we will have the dispenser working properly in the children's toilet.
- Management will check the nappy changing unit to see if it needs any repair and check if it needs to be painted before starts the new school year.
- Management will make sure that the team knows that all individual items need to be labelled. Any new team members joining this year will have this as part of their initial training.

### **Administration of Medication:**

#### **Corrective Action**

- Management sent the Allergy Risk Assessment back to the family that needs to finish filling in the form and management will make sure that all forms are filled in with all required details.

#### **Preventive Action**

- Management will make sure that all forms will be filled in with all information. Parents will not be allowed to join the service until all relevant documentation has been fully completed.

### **Fire Safety:**

#### **Corrective Action**

- The service did first fire drill on 27/09/2024 with the two pods separately to show the new staff the fire evacuations procedure in case of a fire, staff are aware that we use the door in the hall to go to the assembly point.
- On the next day of the inspection, staff started bringing the tablet or phone outside to record the correct time all children leave. Management will also reinforce it in the meeting on 21/10/2024.

#### **Preventive Action**

- The service will do a fire drill with the team during the training week, to make sure that everyone is aware of how to proceed in case of a fire.
- Management will make sure that any new staff will be aware to bring the tablet or phone outside to record the children's attendance and we will also have this topic in our training day.

## Supporting documentation submitted

### General Safety:

1. Photographic evidence of cleaning agents stored away.

### Infection Control:

2. Photographic evidence of food labelled in fridge and documentary evidence of Team Meeting Agenda with staff signatures.
3. Photographic evidence of hand roll dispenser in sanitary area.
4. Photographic evidence of nappy changing unit was sanded and painted with washable paint.
5. Documentary evidence of Team Meeting Agenda with staff signatures.

### Administration of Medication:

6. Documentary evidence of Allergy Risk Assessment form and the child's form filled in.

### Fire Safety:

7. Documentary evidence of fire drills.
8. Documentary evidence of Team Meeting Agenda with staff signatures and evidence of an email sent to all staff in relation to attendance records.

## Summary Comment

The corrective and preventive actions taken by the registered provider addressed the non-compliances identified. Regulatory compliance has been met for Regulation 23.

## Part VI - Safety

### Regulation 26 - Fire safety measures

- (1) A registered provider shall ensure that a record in writing is kept of-
- (a) any fire drill that takes place in the premises, and
  - (b) the number, type and maintenance record of fire fighting equipment and smoke alarms in the premises.
- (2) The record referred to in paragraph (1) shall be open to inspection by-
- (c) an authorised person.
- (4) A notice of the procedures to be followed in the event of fire shall be displayed in a conspicuous position in the premises.

### Compliance Information

(1)(a) Documentation was available to demonstrate that fire drills were practiced monthly. The last fire drill took place on 26 June 2024. No fire drill took place in July and August as the service was closed for the summer.

(b) The number, type and maintenance record of the firefighting equipment was up to date. Fire extinguishers were last serviced on 22 August 2024. Smoke alarms were serviced on 30 August 2024.

(2)(c) Records were open to inspection by an authorised person. All records requested by the inspector were available for review.

### Non-Compliance Information

(4) There was no evacuation plan displayed on the wall in Pod 2 room and staff were not aware of the correct evacuation route to use in the event of an emergency evacuation. Due to the layout of the service this room is disconnected from the hallway where the fire procedures were displayed. This non-compliance was observed during the previous inspection in March 2023 and the corrective and preventive actions have not been sustained. Evacuation plans need to be displayed in a conspicuous place to ensure staff and children can exit without delay in the event of an emergency.

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

#### **Corrective Action**

Management displayed a new evacuation fire procedure on the board, on the day of the inspection we had a child-friendly fire procedure evacuation displayed on the board.

#### **Preventive Action**

Management will make sure that we have both fire evacuation procedures displayed on the board in the hall.

#### **Supporting documentation submitted**

Photographic evidence of the fire evacuation procedures displayed on the board in the hall.

### Summary Comment

The corrective and preventive actions taken by the registered provider addressed the non-compliances identified. Regulatory compliance has been met for Regulation 26.

## Part VI - Safety

### Regulation 28 - Insurance

*A registered provider shall ensure that the pre-school service is adequately insured.*

#### Compliance Information

The registered provider ensured the service was insured. The insurance certificate provided for review showed cover for the forty children the service is registered for and an expiry date of 27 June 2025.

## Part VII - Premises and Space Requirements

### Regulation 29 - Premises

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

- (b) safe and secure,*
- (c) kept adequately lit, heated and ventilated*
- (e) equipped with adequate and suitable sanitary facilities.*

#### Compliance Information

- (b) On the inspectors unannounced arrival at the service, access to the main door was monitored and controlled by staff to restrict unauthorised persons from gaining access to the premises and to prevent children from exiting the service unsupervised. In addition, the outdoor play area is securely gated restricting unauthorised persons from gaining access to the premises and to preventing children from exiting the service unsupervised
- (c) There was sufficient lighting in the service and windows were opened in Pod 1 Room to allow fresh air to circulate in the care room.
- (e) There were adequate and suitable sanitary facilities for the number of children attending. There was one nappy changing unit, one adult toilet and one sanitary accommodation with two children's toilets and sinks available.