

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2015DY311			
<b>Name of Service:</b>	Tots and Co Childcare			
<b>Address of Service:</b>	8 Barrow Street, Ringsend, Dublin 4, Co. Dublin			
<b>Eircode:</b>	D04 K858			
<b>Name of Registered Provider:</b>	Rima Mackin			
<b>Service type:</b>	Full Day, Part Time, Sessional			
<b>Date of Inspection:</b>	27/07/2023			
<b>Regulatory Compliance Meeting:</b>	13/09/2023			
<b>No of pre-school children:</b>	AM	39	PM	38
<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			
<b>Inspection undertaken by:</b>	E. Finnegan Hayes & T. Nelson			
<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).

## Conditions if applicable

Not applicable.

## Description of service

Tots and Co Childcare is a private run full day care service located in Dublin City which operates 7:30am-6pm Monday to Friday. The service operates from a two-storey building and is comprised of an office, kitchen, two cot rooms and five care rooms. The kitchen, two cot rooms and four care rooms; Baby room catering for children aged 6 months-1.5 years, Tweenie room catering to children 1.5-2 years, Pre- toddler room catering for children aged 2-3 years and the Toddler room catering to children aged 2-3 years are located on the ground floor of the service. The office and Montessori room catering to children aged 3-6 years are located on the first floor. The service caters for 60 children aged 0-6 years and participates in the Early Childhood Care & Education (ECCE) scheme.

## Staffing

The registered provider employs 16 staff to work in the service; 15 of whom work directly with the children in the service. Twelve staff were present on the day of inspection including the person in charge and the cook. A staff member from another service owned by the registered provider arrived at 10:45am to assist in the care rooms. The register provider and the company director who do not work directly with the children in the service arrived in the service at 11:06am to facilitate 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, health, welfare and development of child and safety. The inspections may also focus on other areas as required.

The inspection focused on an examination of compliance under regulations;

Regulation 9(1)(a)(b), (2)(a)(b)(c)(d), (3), (4)- Management and Recruitment

Regulation 11(1), (2) - Staffing Levels

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

Regulation 23- Safeguarding Health, Safety and Welfare of Child

Regulation 24(1), (3)(a)(b)- Checking in and out and record of Attendance

Regulation 25(1), (2)(a)(b)- First Aid

However, on inspection additional non-compliance which posed significant risk was identified under Regulation 8(1) and Regulation 29(d)(e). These findings are outlined within the relevant regulations within this report.

A sampling process was used to assess compliance under Regulation 19(1)(a)- Health, Welfare and Development of Child and Regulation 23- Safeguarding Health, Safety and Welfare of Child. As a result, the scope of the inspection included the Baby room, Tweenie room, Pre-toddler room and Toddler 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 body.

### Additional Information

An immediate action notice was issued to the registered provider on 27<sup>th</sup> of July 2023 in relation to safety concerns identified under Regulation 23 Safety. A response which adequately addressed one concern and detailed proposed actions to be completed over the weekend for two concerns was received on Friday 28<sup>th</sup> July 2023. Confirmation was received on Monday 31<sup>st</sup> July that the proposed actions have been completed to rectify the outstanding concerns.

An immediate action notice was issued to the registered provider on 28<sup>th</sup> July 2023 in relation to a concern identified under Regulation 9 Management and Recruitment. A response which adequately addressed the concerns was received on Monday 31<sup>st</sup> July 2023.

A Regulatory Compliance meeting was held on the 13<sup>th</sup> September 2023. The registered provider did not submit a response to the actions required following the meeting.

### Acknowledgments

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

## Part II - Registration and Register

### Regulation 8 - Notification of change in circumstances

*(1) A registered provider of a pre-school service other than a temporary pre-school service shall, subject to paragraph (3), notify the Agency in writing of any proposed change in the details in relation to the pre-school service contained in the register pursuant to section 58C(2) of the Act or Regulation 7(2) at least 60 days before it is proposed that the change would take effect.*

### Non-Compliance Information

- (1) The registered provider did not notify the Agency of a change of person in charge which occurred in March 2023.

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

### **Corrective and Preventive Action**

(1) A change in circumstance form has been submitted to Tusla in relation to the change of person in charge. Change in circumstance form to be submitted at the time of notifiable changes.

### **Supporting documentation submitted**

Confirmation that the change in circumstance application was accepted.

### **Summary Comment**

The registered provider has addressed the non-compliance under Regulation 8.

## 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,

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

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

(b) consideration of references from reputable sources in the case of a person who has no past employers,

(c) consideration of the vetting disclosure received from the National Vetting Bureau of the Garda Síochána in accordance with the Act of 2012 in respect of the person, and

(d) ensuring, insofar as is practicable, that where a person has lived in a state other than the State for a period of longer than 6 consecutive months, he or she provides police vetting from the police authorities in that state.

(3) The procedures specified in paragraph (2) shall be carried out prior to any person being appointed, assigned or allowed access to or contact with a child attending the pre-school service.

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

### Compliance Information

(1)(a) The service had a designated person in charge and a named person who was able to deputise as required in the absence of the person in charge.

(b) The designated person in charge was on the premises when the inspectors arrived in the service and was present for the duration of the inspection.

(2) A review of the roster and conversation with management showed that there are currently 16 staff employed by the service. The files of all staff were reviewed along with the file of the staff member who was present in the service from another branch.

(a)(b) All of the required written and validated references were available for review.

(c) Garda vetting declarations were available for 16 staff members.

(d) Police vetting was available for 14 staff who had lived outside of the country for a period of more than 6 months.

(3) The registered provider ensured that the checks required under (2) above were carried out before the start date of all staff who commenced employment since the last inspection.

(4) Evidence was available to show that 16 staff members 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.

### Non-Compliance Information

(2)

(c) A Garda vetting declaration was not available for one staff member who works in the service. An immediate action notice was issued to the registered provider.

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

#### Corrective and Preventive Action

(c) Staff member was an ancillary staff member and did not attend the premises till after 5:30pm. The staff member did not have access to children and left the service 1 day after inspection. Manager cannot change roster for ancillary staff without checking for documentation.

#### Supporting documentation submitted

No supporting documentation submitted.

### Summary Comment

The registered provider has addressed the non-compliance under Regulation 9.

## 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) The registered provider ensured that an adequate number of adults were working directly with the children in the service. Thirty-eight children were being cared for by 15 staff members on the morning of the inspection.

### Non-Compliance Information

(2) The registered provider did not ensure ratios were maintained in the care rooms at all times; between 12:30-2:30pm one staff member was caring for 9 children aged 2-3years old in the Toddler room. This was a non-compliance on the previous inspection in 2022 however the preventive action provided by the registered provider has failed to prevent the non-compliance recurring.

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

#### Corrective and Preventive Action

(2) Staff to stay in room and not assist other rooms with nappy changes, toilet etc. Staff not to leave the room during sleep time unless relieved by an incoming staff member. Two staff members will stay to watch sleeping children. Daily operations have been reviewed and staff have been instructed about the importance of not leaving the room under ratio.

#### Supporting documentation submitted

No documentation submitted.

### Summary Comment

The corrective action taken has been accepted. The practices implemented will be reviewed at the next inspection.

### 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 regular meals and snacks to the children attending. The daily menu included a variety of cereals for breakfast between 8-9am, snack at 10am, dinner at 11:30am followed by tea at 3:30pm. On the day of inspection children were observed to eat fruit for morning snack and mushroom risotto for dinner.
- Children were provided with food which was an appropriate texture in line with their age and stage of development.
- Drinks were available to the children throughout the morning in each room and drinks were provided to the children with their meals.
- Nappy changing was done on a set schedule and as required to ensure the children's comfort. Older children were supported to use the toilet independently with staff available to assist if needed.

##### Supporting relationships:

- Information was shared with parents on a daily basis. Staff record details about each child including meals, nappy changes, and sleep. This promotes strong staff/parent relationship.
- Staff were observed to sit with children at mealtimes. Children were encouraged to feed themselves, with staff available to help when required.

#### Physical and Material Environment

- Child sized tables and chairs and low-level shelving in the care rooms allowed children to access materials freely and promoted independence.
- The children were observed to access the garden on the day of inspection. The outdoor space had a variety of equipment which promoted gross motor play such as a climbing frame with a slide and ride on toys.

### Non-Compliance Information

1. The Tweenie room and Toddler room did not have the necessary toys and equipment to ensure enriching and spontaneous play experiences for the children. This was a non-compliance on the previous inspection in 2022 however the preventive action provided by the registered provider has failed to prevent the non-compliance recurring. The following was observed;
  - The Tweenie and Toddler rooms did not have defined interest areas or materials grouped together to promote meaningful play experiences for example in the Tweenie room eight small baskets of toys were available to the children; three baskets contained miscellaneous items such as a piece of material, a block and a car while in the Toddler room four boxes were empty while others contained unrelated materials such as blocks and dolls equipment.
  - Two battery operated toys in the Tweenie room were observed to not work and one of these; a standing activity centre was used to prop open the care room door for the duration of the inspection.
  - The family wall in the Tweenie room was displayed at adult height inaccessible and out of view of the children.
2. Activities in the Tweenie room were not observed to be child centred for example a painting activity was completed with three children who were chosen by the staff members. One child who wanted to paint and repeatedly told they would have to wait until the other children were finished. The children were provided with one paint tray. The children were observed moving the paint tray from one side of the table to the other to reach it and became frustrated when they couldn't reach it. The staff member repeatedly returned the tray to the middle of the table telling the children it had to stay in the middle and they had to share. The staff member advised that one paint tray was given as the children need to learn to share but that other paint trays were available. Children should have choice in which activities they engage in with a suitable amount of equipment provided considering the developmental stage of the children.
3. Behaviour management in the Tweenie room was not in line with the service policy which stated that conflict resolution steps including acknowledging feelings and supporting the children to find a solution

would be used and that staff would ensure realistic expectations of the children. The following was observed;

- One child was observed to take a sensory toy from another child. The staff member approached the children and returned the toy to the first child telling the second child they would have to wait, and they could have it after the first child. The child continued to attempt to take the toy from the first child and was repeatedly told they had to wait. Both children became upset during the interaction however no comfort was offered.
- During the painting activity a child was repeatedly told if they put the paint in their mouth, they won't be allowed paint again.

These strategies were neither age appropriate or positive and did not meet the needs of the children in the room.

4. No alternative meal was offered to children who did not eat their dinner and staff were heard telling the children "If you're not eating then go to bed" and "If you don't eat your dinner there is no more food until 3:30pm and if you're hungry that will be your own fault". These interactions were negative in tone, did not support the children's choice or preference around eating and demonstrated an unrealistic expectation of the children present and their understanding of consequences. This is not in line with the service policy which stated that mealtimes should be a positive experience, staff should ensure no negative association with food and that if a child expresses hunger, they will be provided with a snack.
5. Props were not made available to the children for the construction bench or the dressing up table in the garden which limited the play experience for the children. The registered provider advised that these are available in the shed.

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

#### Corrective and Preventive Action

1. Meeting was held with the staff members involved. Staff have rearranged the rooms to set defined areas and relevant toys and equipment were distributed in those areas. The service is trying to move away from plastic toys and battery-operated toys distract the environment and calmness in the room and children still enjoy playing with them. The service need to take into account that the noise of some toys maybe over stimulating for some children. If children still find the toys stimulating with no batteries, we do not see a reason to dispose of toys that interest the children.  
  
Child appropriate wall arts to be placed at child height. Staff had been engaged with a quality improvement organisation which the service thought would be of benefit to staff but sessions were online

and we have reengaged with the quality improvement organisation and have asked for more on premises sessions. A staff mentor has been employed to engage, educate and support the staff understanding and importance of how to carry out and prepare activities. For safety and security doors are to remain closed.

2. Staff have been spoken to and the importance of giving the children a choice and alternatives of activities has been addressed. When activities have been organised children should be able to access materials for activities. Review areas, equipment & activities to include children and their interests.
3. Staff were talked to about conflict resolution in the creche and our policy. Staff to identify in a timely manner areas or items of possible conflict. Staff mentor employed to reinforce policies on a daily basis. Staff will be observed and guided to reach full understanding how to follow our policies and apply positivity to resolve conflict. Policy on reinforcing positive behaviour was given to staff to reread and will be observed by management.
4. There is always an alternative meal available. Staff have been spoken to and the issues were addressed to them and reinforced that it was not acceptable behaviour and not the policy of Tots & Co to threaten children. Staff have been directed to review our policies to help encourage children to eat and offer alternatives when necessary. Staff will observe children to see what foods they like, or alternatives can be offered.
5. Issue was addressed with staff and reinforced that staff need to set out different areas of the playground for children with toys & equipment made available to children. Implemented into the daily routine of the creche for activities preparation.

### **Supporting documentation submitted**

Photos in relation to points 1 and 5 have been reviewed. No other supporting documentation submitted.

### **Summary Comment**

The Corrective actions taken have been accepted. The practices implemented will be reviewed at the next 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 to the service was appropriately secured when the Inspectors arrived at the service. A video bell allowed staff to see who was at the door and staff were observed to attend the door to allow access. This prevented unauthorised persons accessing the service.
- The entrance door was secured appropriately from the inside and staff were observed to accompany children when moving between rooms, the garden and sanitary areas which prevented children leaving the service unsupervised.
- Safety locks were fitted to presses to prevent children accessing unsafe materials.
- Blind cords were appropriately secured to prevent injury to the children.
- Daily risk assessments for both the indoor and outdoor environments were available and completed to date.
- The nappy changing units were safe and sturdy and children's nappy changing items were stored within easy reach.
- Cleaning supplies were stored out of reach of the children on high shelves throughout the service.

##### Infection Control:

- Handwashing was observed to be done frequently throughout the day, after activities and outdoor play and before and after meals.
- Aprons and gloves were provided and used to ensure good hygiene practices during food handling and nappy changing.
- Foot pedal operated bins were available in sanitary areas to allow hygienic disposal of contaminated materials.
- Windows were open to allow fresh air to circulate in the service.
- Soothers were stored in individually labelled boxes.
- Cleaning records were displayed in the care rooms and were completed to date.

##### Safe Sleep:

- Staff were aware of safe sleep practices. Children were monitored while sleeping at intervals of 10 minutes or less and records were maintained which detailed the breathing, position, and colour of each child at each check.
- Cots were maintained in a good state of repair.
- Cots and low beds were positioned 50cms apart.

### Fire Safety:

- Staff were aware of the procedures to be followed in the event of a fire emergency.
- Fire exits were clearly identified and unobstructed during the inspection.

### Non-Compliance Information

#### General Safety:

1. Water temperatures were not thermostatically controlled in five sinks in the service and posed a risk of scalding to the children observed using the sinks. An immediate action notice was issued to the registered provider. This non-compliance was present on the previous inspection in July 2022 however the Preventive action provided by the registered provider has failed to prevent the non-compliance recurring.

The following was observed;

Room	Water temperature	Time
Tweenie room	54.8°C	10:30am
Baby/ Tweenie nappy changing area	54.4°C	11:08am
Baby room	54.5°C	12:50pm
Toddler room	53.8°C	11:08am
Pre-Toddler/ Toddler nappy changing area	54.9°C	10:11am

2. A radiator cover in the Toddler room was not appropriately secured to the wall, unstable and one piece of wood on top was not secured to the unit. This posed a risk of injury to the children in the room. An immediate action notice was issued to the registered provider.
3. Two blue mats in the Tweenie room were torn at the corners which exposed the foam inside. This prevented adequate cleaning of the mats and presented a risk of choking should the children ingest the foam.

4. A trailing flex was observed in the Toddler room which posed a risk of injury to the children. This was a non-compliance on the previous inspection in 2022 however the Preventive action provided by the registered provider has failed to prevent the non-compliance recurring.

### Infection Control:

5. A bar of soap was observed to be used for handwashing in the Tweenie room. Staff advised that the bar of soap was used as children couldn't reach the soap dispenser which was fitted above the sink. A child was observed to put the soap in their mouth during handwashing. This posed a risk of cross infection.

### Safe Sleep:

6. An ambient temperature of 16-20°C was not maintained in rooms where children were sleeping which posed a risk of overheating to the children. An immediate action notice was issued to the provider. This non-compliance was present on the previous inspection in July 2022 however the Preventive action provided by the registered provider has failed to prevent the non-compliance recurring. The following temperatures were recorded;

Room	Water temperature	Time
Cot room used by Tweenie room	22.8°C	12:10pm
Toddler room	22.5°C	12:18pm
Pre-Toddler room	22.6°C	12:17pm

### Action submitted by the Registered Provider

#### Corrective & Preventive Action

##### General Safety:

1. Plumber had been booked in prior to inspection to assess taps and temperatures. Thermostatic valves have been replaced. Staff to monitor daily and report if any repairs or changes necessary. Part of daily risk assessment.
2. Radiator cover was repaired and reattached to wall. Regular visual inspections of radiator cover for damage.
3. Damaged mats were removed from the service and replaced. Regular visual inspections of mats for wear and tear and any damaged mats to be removed.
4. Flex cable removed from room. Cables to be moved out of reach of children.

##### Infection Control:

5. Soap bar was brought into the creche by a staff member and was not provided by the creche Soap bars are not used for handwashing and are not permitted in the service. Wall mounted soap dispensers are in use in the service and are to be used for handwashing.

### Safe Sleep:

6. Air conditioning units have been rented and placed in rooms to control temperatures. Air conditioning units to be used to control temperatures and keep rooms below max permitted temps.

### Supporting documentation submitted

Photographs in relation to points 1,2,3,4 and 6 have been reviewed.

### Summary Comment

The corrective and preventive actions taken have addressed the non-compliances identified on inspection. Regulatory compliance has been met.

## Part VI - Safety

### Regulation 24 - Checking in and out and record of attendance

*(1) A registered provider shall ensure that each pre-school child attending the service is checked in and out of the service by an employee or an unpaid worker.*

*(3) A registered provider shall ensure that-*

*(a) no person other than-*

*(i) pre-school child attending the service,*

*(ii) a person dropping or collecting such a child,*

*(iii) an employee, or*

*(iv) an unpaid worker, can enter the premises without his or her entry being approved by an employee, and*

*(b) a daily record in writing is kept of the entry on the premises of any such person.*

### Compliance Information

(1) The registered provider ensured that each child attending the service was checked in and out by an employee for example staff were observed to greet parents at the door before bringing the child to their care room where staff recorded the child's attendance in a timely manner on a software application.

(3)(a)(b) The registered provider ensured that no person could enter the service without staff approval and a record was kept of all visitors to the service. The person in charge greeted the inspectors at the entrance door and asked the Inspectors to sign the visitor book which was available at the entrance door.

### Part VI - Safety

#### Regulation 25 - First aid

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

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

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

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

#### Compliance Information

(2)(a)(b) A suitably equipped first aid box was available in the service. This was easily accessible to staff if needed any time during the day.

#### Non-Compliance Information

(1) The registered provider did not ensure that a staff member trained in First aid Response (FAR) was immediately available to the children from 7:30am-9am daily. FAR certification was available for one staff member who was rostered to work from 9am-6pm daily.

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

##### Corrective and Preventive Action

(1) Roster FAR trained staff to work opposite each other to ensure 1 person is always available. All staff have first aid awareness course completed.

##### Supporting documentation submitted

No evidence has been submitted.

#### Summary Comment

The corrective action stated has been partially accepted. Evidence that a second staff member has first aid responder certification has not been submitted. Therefore, regulatory compliance for Regulation 25 remains outstanding until certification for a second staff member has been submitted to the inspectorate. A staff member with First Aid Response (FAR) training must be on the premises at all times during the operational hours of the service.

### Part VII - Premises and Space Requirements

#### Regulation 29 - Premises

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

- (a) of sound and stable structure,*
- (b) safe and secure,*
- (c) kept adequately lit, heated and ventilated*
- (d) cleaned, maintained and repaired, as required, and*
- (e) equipped with adequate and suitable sanitary facilities.*

#### Non-Compliance Information

- (d)
1. The flow of water from the taps in the Pre-toddler and Toddler rooms was too fast and caused water to spray outside of the sink onto the surrounding area and floor. This posed a slipping risk to the children.
  2. The flooring in the hallway near the kitchen was damaged and unsealed which prevented adequate cleaning.
  3. Paint in the hallway was observed peeling which prevented adequate cleaning of the area.
  4. A number of holes were observed in the walls of the Toddler room for example a large hole was present beside the window at child height which could pose a risk of injury to the children.
  5. A tap in the sanitary area on the ground floor was observed to be leaking.
  6. The ceiling in the Tweenie cot room appeared water damaged and was heavily stained.

- (e)
7. The service did not have adequate nappy changing facilities for the number of children present who required nappy changing. Two nappy changing units were available for 24 children who required nappy changing. This was a non-compliance on the previous inspection in 2022 however the Preventive action provided by the registered provider has failed to prevent the non-compliance recurring.

## Corrective & Preventive Action submitted by the Registered Provider

### Corrective and Preventive Action

- (d)
1. Reduction in water pressure.
  2. Flooring to be replaced with a suitable hard wearing flooring surface. Use of a suitable hard wearing flooring surface to prevent wear and tear.
  3. Paint has been redone and cleaned up. Repair as required.
  4. Holes have been filled in and repaired. Repair as required.
  5. Tap has been replaced. Repair as required.
  6. Ceiling has been repaired and repainted. Repair as required.
- (e)
7. Pre toddler room closed and is under review to be repurposed.

### Supporting documentation submitted

Photos in relation to above have been reviewed by the inspectorate.

### Summary Comment

The corrective actions taken by the registered provider have addressed the non-compliance identified under Regulation 29.