

# Early Years Inspectorate Regulatory Report

## Pre School

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| <b>TUSLA Identifier:</b> | TU2015DY312 |
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|-------------------------|---------------------|
| <b>Name of Service:</b> | Mercy Family Centre |
|-------------------------|---------------------|

|                            |   |
|----------------------------|---|
| <b>Address of Service:</b> | South Brown Street, Weaver Square, Dublin 8, Co. Dublin |
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|                 |          |
|-----------------|----------|
| <b>Eircode:</b> | D08 W6Y0 |
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|                                     |                     |
|-------------------------------------|---------------------|
| <b>Name of Registered Provider:</b> | Bernadette Anderson |
|-------------------------------------|---------------------|

|                      |           |
|----------------------|-----------|
| <b>Service type:</b> | Part Time |
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| <b>Date of Inspection:</b> | 06/09/2023 |
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|                                   |    |    |    |    |
|-----------------------------------|----|----|----|----|
| <b>No of pre-school children:</b> | AM | 71 | PM | 36 |
|-----------------------------------|----|----|----|----|

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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>                | E Hosford and Á Dunne   |
| <b>Title:</b>                                   | Early Years Inspector   |

### 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).

|                                 |                 |
|---------------------------------|-----------------|
| <b>Conditions if applicable</b> | Not applicable. |
|---------------------------------|-----------------|

### Description of service

Mercy Family Centre is a purpose-built community service situated in the urban area of Dublin 8. The service provides part time care and education to children aged from birth to 5 years of age and operates two sessions per day from Monday to Friday, 9am to 12:35pm and 1:25pm to 5pm. The centre also provides a school age service. There are eight care rooms, one designated cot room, a kitchen for the preparation of meals, a reception area and four separate outdoor areas to the rear of the service. The first floor of the service is designated for administrative staff. The eight care rooms are as follows: Creche 1 (0-2 years), Creche 2 (0- 2 years), Wobbler 1 (1-2 years), Wobbler 2 (2-3 years), Toddler 1 (2-3 years), Toddler 2 (2-3 years), Preschool 1 (3-4 years) and Preschool 2 (3-4 years).

### Staffing

The service employs 30 staff to include the registered provider, 2 deputy people in charge, and assistant manager, 2 administrators, 2 cooks, a caretaker and 21 childcare staff. On the day of inspection there were 20 staff caring for 69 children aged from 0 to 5 years of age and in the morning session, and 14 staff caring for 36 children aged from 0 to 5 years of age and 10 school age children aged from 5 -12 years in the afternoon session.

### 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

The unannounced inspection focused on an examination of compliance under The Child Care Act 1991 (Early Years Services) Regulations 2016.

Regulation 9 Management and recruitment (1)(a)(b)(c), (2)(a)(b)(c)(d),(4).

Regulation 11 Staffing Levels (1)(2)(8)(a),

Regulation 16 (1)(h), (j),(k), (2)(b)

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

Regulation 23 Safeguarding Health, Safety and Welfare of child,

Regulation 25 First Aid (1)

and Regulation 29 Premises (c).

A sampling process was used to assess compliance under regulations:

19 Health, Welfare and Development of Child,

and 23 Safeguarding Health, Safety and Welfare of Child,

The scope of the inspection included the Toddler 1 and Toddler 2 rooms and it did not include Creche 1, Creche 2, Wobbler 1, Wobbler 2, Preschool 1 or Preschool 2 rooms.

Regulation 9 Management and Recruitment and regulation 11 Staffing Levels were assessed across all the rooms.

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

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

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

### Additional Information

An immediate action notice was issued to the registered provider on the 6 September 2023 due to the requirements of Regulation 29 Premises, (c) *“that the premises are kept adequately lit, heated and ventilated”*. It was observed that the temperature of the Toddler room 1 and Toddler room 2 exceeded the recommended temperature of 18-22°C while children played.

On the 7 September the registered provider responded to the immediate action notice with the actions implemented within the service. The service has installed air cooling units in all rooms and completed training with staff on proactive approaches in times when weather is hotter than normal.

The registered provider addressed the non-compliances under Regulation 23. Please see details in the body of the report.

### Acknowledgments

The inspectors wish to acknowledge the cooperation of the registered provider, 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.*

(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.*

### Compliance Information

(1)

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

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

(2) The staff files of 30 employees working within the service were reviewed.

(a) The following references were available from a past employer.

- Two validated written references were available for 12 staff members.
- One validated written reference was available for 9 staff members.

(b) The following references were from a source other than a past employer.

- Two validated written references were available for 9 staff members.
- One validated written reference was available for 9 staff members.

(2)

(c) Garda Vetting disclosures were available for 30 staff members.

(d) International police vetting from 28 countries was available for 25 staff members who had resided outside of the jurisdiction for more than 6 months as an adult.

(4) Nineteen staff members employed within the service had evidence to confirm they held a major award in Early Childhood Care and Education at Level 5 or above on the National Framework of Qualifications.

### Non-Compliance Information

(2)(d) International police vetting was not available for two staff members who had resided outside of the jurisdiction for more than 6 months as an adult.

(4) Two staff members employed within the service and working directly with the children did not have evidence to confirm they held a major award in Early Childhood Care and Education at Level 5 or above on the National Framework of Qualifications.

- One staff member had a transcript of their completed studies but did not have their final award certificate or further evidence to demonstrate the qualification was deemed eligible by the Department of Children, Equality, Disability, Integration and Youth Affairs (DCEDIY).
- One staff member had a certificate of their award but did not have evidence to demonstrate the qualification was deemed eligible by the Department of Children, Equality, Disability, Integration and Youth Affairs (DCEDIY).

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

#### Corrective and Preventive Action

(2)(d)

In response to the non-compliance the registered provider has stated that International Police Vetting applications for two staff are in progress. The service will ensure their Recruitment Policy process is followed and all documentation as per the policy requirement list is signed off by the designated person in advance of any offer of employment.

(4)

The service has stated that one staff member has a transcript that is on the DCEDIY List under major award. A request for a full certificate from the University is in process and will be issued by the University.

The second staff member is in the process of doing a follow up of additional documentation requested from the DCEDIY and submitting an application to obtain Letter of Eligibility to Practice in the Early Years Sector.

The service will ensure that the Recruitment Policy process is followed and all documentation as per the policy requirement list is signed off by the designated person in advance of any offer of employment.

#### Supporting documentation submitted

(2)(d) Documentary evidence of the application for police vetting for two staff members.

(4) Documentary evidence of the application to the DCEDIY for verification of one staff members qualification and a screenshot from the university website regarding obtaining the second staff members full certificate of award.

### Summary Comment

Regulatory compliance remains outstanding for (9)(2)(d) and (4) until the processed police vetting for two staff members has been obtained and evidence that the 2 staff members hold the required qualifications is submitted to the inspectorate and maintained on file.

### Part III – Management and Staff

#### Regulation 11 - Staffing levels

*(1) Subject to this Regulation, a registered provider shall ensure that there is at all times an adequate number of adults working directly with the children attending the pre-school service.*

*(2) Subject to paragraphs (4) and (5), a registered provider of a full day care service or a part-time day care service shall ensure that at all times the minimum ratio of adults to children specified in column (3) of Part 1 of Schedule 6 opposite a particular reference number specified in column (1) of that Part in respect of the age range of the children specified in column (2) thereof at that reference number is satisfied.*

*(8) Without prejudice to paragraphs (2) to (7)-*

*(a) a registered provider of a pre-school service other than a child-minding service or a sessional pre-school service shall ensure that there are at least 2 adults on the premises at all times.*

### Compliance Information

(1) It was observed that the correct adult/child ratio was maintained in the following care rooms during the inspection.

- Creche 1 there was 3 adults working directly with 4 children (0-2 years) in the morning and 2 staff with 4 children (0-2 years) in the afternoon.
- Creche 2 (0- 2 years) there was 3 adults working directly with 4 children (0-2 years) in the morning and the care room was closed in the afternoon.
- Wobbler 1 there was 3 adults working directly with 7 children (1-2 years) in the morning and 3 staff with 5 children (1-2 years) in the afternoon.
- Wobbler 2 there was 3 adults working directly with 8 children (2-3 years) in the morning and the care room was closed in the afternoon.
- Toddler 1 there were 2 adults working directly with 12 children (2-3 years) in the morning and 2 staff with 7 children (2-3 years) in the afternoon.

- Toddler 2 there were 2 adults working directly with 10 children (2-3 years) in the morning and 2 staff with 7 children (2-3 years) in the afternoon.
- Preschool 1 there were 2 adults working directly with 12 children (3-4 years) in the morning and 2 staff with 10 children (3-4 years) and 1 child (5-12 years) in the afternoon.
- Preschool 2 (3-4 years) there were 2 adults working directly with 12 children (3-4 years) in the morning and 2 staff with 3 children (3-4 years) and 9 children (5-12 years) in the afternoon.

(2) There were an adequate number of adults working directly with the children in the service during the inspection. On the day of inspection there were 20 staff caring for 69 children aged from 0 to 5 years of age and in the afternoon, there were 14 staff caring for 36 children aged from 0 to 5 years of age and 10 school age children aged from 5 -12 years.

(8)(a) The staff roster available demonstrated that two adults were on the premises during the operation of the service.

### 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:

(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.

(2) A registered provider shall ensure that-

(b) a record referred to in subparagraph (h), (j) or (k) of paragraph (1) is retained for a period of 2 years from the date on which the child to whom it relates ceases to attend the service, or in the case of a preschool service in a drop-in centre or of a temporary pre-school service, for a period of 2 years from the date on which the child attends the service.

### Non-Compliance Information

- (1)
- (j) Details of medication administered to children was not available for inspection.
- (k) While it is acknowledged that one accident / incident form dated 23<sup>rd</sup> August 2023 was available for review, no further record of incidents that occurred within the service were available.
- (2)
- (b) The registered provider did not retain the required records relating to children and the medications administered and any accidents or incidents that occurred within the previous two years as per the regulations.

## Action submitted by the Registered Provider

### Corrective & Preventive Action

- (j) In response to the non-compliances the service has stated that all Medicine Consent and Administration Records will be signed and available when/if medication is administered. All Medicine Consent and Administration Record files will be held on location for the period of two years as per regulations.
- (k) All accident/ incident report form records will be signed and available when/if an accident/incident is reported. All accident/ incident report form records will be held on location for the period of two years as per regulations.
- (2)(b)
- The service will retain all records relating to the medications administered or any accidents/incidents recorded for the period of 2 years as per regulations. The service have updated all staff on the requirements of regulation 16 that Medicine Consent and Administration Records or accident/ incident records must be held for the period of 2 years.

### Summary Comment

The service has addressed the non-compliances through the corrective and preventive actions taken.

## 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) Physical Environment

- There was a variety of play materials and equipment available to the children according to their age and stage of development, to include home areas with play kitchens, cash register, doctors sets, hairdressing set, dolls with clothes, dolls buggies; range of construction toys to include jigsaws and wooden puzzles, plastic building bricks, connectors, magnetics, stacking toys, stickle bricks, cars, trucks, trains, tracks and small world play toys of animals. Tabletop activities such as threading spools and peg boards were present.
- There was a sufficient number of low tables and chairs to accommodate children whilst they played and ate in each care room.

#### Non-Compliance Information

##### Basic Needs:

1. Three children that attended both the morning and afternoon session were provided with the same main meal of potatoes, broccoli, chicken, and gravy during both sessions. An alternative meal or choice was not provided or available. This reduces the children's enjoyment and interest in meals and could potentially increase a child's reluctance to eat meals while in the service.
2. It was observed that some children were not given the opportunity to enjoy their food at scheduled mealtimes and spend time conversing with their peers. This reduced the children's overall nutritional intake and their social interactions with their friends. For example.
  - At 3.09pm, while one child sat and ate their dinner, a staff member interrupted the child to change their nappy. On returning to the care room the child didn't return to the table but instead sat in the rest area. When offered their leftover meal they declined. The care room routine outlined that nappy changes took place between 3.30-4pm and that children were given from 3-3.30pm to eat their dinner.

### Supporting Relationships:

3. The transition from outdoor play to dinner time in the Toddler 1 room was observed to be disorganised. Children were not given clear instructions and guidance by staff which resulted in the children becoming upset and distressed. This did not create a calm a relaxed environment for the children to eat their meal in and to ensure an adequate nutritional intake. For example.

- Children took turns coming to the staff member to collect their lunch, one child spilled their food as they returned to the table, this was then cleaned by staff which delayed the process and children became upset due to the wait.
- A child that had to wait for their lunch began eating another's child's meal which caused the other child to become upset and cry.
- After dinner staff placed fruit on the table, however, three children that had left the table after their main meal didn't see the fruit and therefore didn't eat it.
- It was observed that one child did not eat a main meal or fruit at lunch time which was not verbally communicated to their parents on collection.

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

#### Corrective and Preventive Action

1. In response to the non-compliance the service has stated that staff will observe children at mealtimes attending for second service to ensure they are enjoying their food and/if or when they see the child not enjoying meals, they will confer with kitchen staff to provide alternative options if needed or if this is the issue. We have added an alternative meal option to be available for children coming to two sessions in one day if required.

2. The service stated that a revision of training was provided to staff to review the importance of giving children the opportunity to enjoy and eat their meals as per our Health and Nutrition Policy. Supervision of staff and revision of staffs and practices around mealtimes and routines in each room to ensure children can enjoy the experience of food and mealtimes as guided under our Health and Nutrition Policy.

3. The registered provider has responded that training was provided to staff to review Health and Nutrition Policy. Encourage an organised and relaxing transition from outdoor play to dinner time and to ensure staff do communicate clearly with the children to create a good environment around mealtime and good direction to the children and clear communication with parents at collection time about the children and their meals. Supervision of daily practices under our Health and Nutrition Policy and room routines and transition from one activity into mealtimes ensuring this is routed into our curriculum with all staffs in each room and good practice around mealtimes and communication with parents.

### **Supporting documentation submitted**

1. Two-week menu with a note to staff that alternative meal options are available for children that attend two sessions.
- 2 and 3. Staff training on mealtimes 22 September 2023.

### **Summary Comment**

The service has addressed the non-compliances as identified.

## 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 main door of the service was locked with entry to authorised adults under the supervision of the administrative assistant and designated person in charge. Children were supervised while in the reception area and exit from the service was restricted by a lock which was positioned out of children's reach.
- The outdoor area was secured with a locked gate and high fence. This reduced the unauthorised access of an adult or the unsupervised exit of a child.
- The cleaning materials and equipment used by the staff in the service were stored out of children's reach.

#### **Infection Control:**

- Thermostatically controlled warm water, liquid soap and paper towels were available in the sanitary facilities and care rooms used by the children.

#### **Safe Sleep:**

- Facilities were available to enable children in the Toddler 1 and Toddler 2 care rooms to take a rest or sleep if required, however no children attending these rooms slept on the day of inspection.

#### **Fire Safety:**

- Documentation was available to demonstrate that the service undertook fire drills monthly.

### Non-Compliance Information

#### **General Safety:**

1. The temperature of the care rooms was not maintained within the recommended 18 to 22°C. This increased the children's discomfort. It is acknowledged that it was a warm day and staff had ensured that the care room windows were open, but temperatures were recorded as follows:

| Room           | Time    | Air Temperature | Time    | Air Temperature | Time   | Air Temperature |
|----------------|---------|-----------------|---------|-----------------|--------|-----------------|
| Toddler 1 room | 11.27am | 27.2 °C         | 12.04pm | 27.7 °C         | 3.29pm | 29.8°C          |
| Toddler 2 room | 3.03pm  | 28.8°C          |         |                 |        |                 |

An immediate action notice was issued. It is acknowledged that the service took immediate action to address the non-compliance when it was highlighted to the registered provider by the inspectors.

- The safe and effective evacuation of all the children in the event of an emergency was not ensured as staff did not maintain and retain the information regarding each child's arrival and departure from the service.

For example.

- At 3.30pm, it was observed that there were seven children present in the Toddler 1 room, however only six children were recorded as being in attendance since 1.25pm.
- At 3.33pm, it was observed that there were six children present in the Toddler 2 room, however seven children were recorded as being in attendance. A child that left the service at 3.05pm was still recorded as attending at 3.33pm.

### Infection Control:

- The nappy changing procedure was not carried out according to the service policy and best practice guidelines. This increased the potential risk of cross infection. For example.
  - A total of eight nappy changes were observed, and the staff member used the same gloves and apron when changing three children.
  - No apron was worn when changing one child's nappy and handwashing after the procedure was not completed by four adults and two children.

### Administration of Medication:

- A clearly written care plan to enable staff to identify and accurately administer treatment when required was not available for one child.
- Medication for the treatment of one specific child in an emergency was not labelled with the child's full name and date of birth to ensure the correct administration.
- Written parental pre consent for the administration of prescribed emergency medication was not available for two children.

### Action submitted by the Registered Provider

#### Corrective & Preventive Action

##### **General Safety:**

1. On the 7 September the registered provider responded to the immediate action notice with the actions implemented within the service. The service has installed air cooling units in all rooms and completed training with staff on proactive approaches in times when weather is hotter than normal. Cooling units were placed in each of the room 24 hours following inspection day to reduce temperatures and maintain rooms temperature within 18 to 22 degrees. Staff will review the thermometers at all times, mainly during the summer months to keep temperatures within 18 to 22 degrees and provide cooling units when needed and respond with good ventilation and hydration available.
2. The service has stated that staff undertook training on Fire and Safety Policy to revise the importance of accurate recording of roll books entry in and out of the room session for the event of fire evacuation and fire drills. Supervision of attendance records in each room including daily checking during session times to ensure recording is up to date and accurate particularly in the event of evacuation.

##### **Infection Control:**

3. To address the non-compliance staff training on Nappy Changing Procedure and review of policy including step-by-step guide on procedure of nappy changing was carried out. Follow up supervision and revision on best practice Nappy Changing Policy and how it is being implemented.

##### **Administration of Medication:**

4. The service has reviewed and updated the Medical Care Plan to enable staff to identify clearly and accurately symptoms, how to react, how to administer and what medication and place where each medication is located. Labels have been placed on each medication with the full name of child to ensure correct administration and signing off all documentation. Training of all staffs on updated Medical Care Plans, Medicine Request and Indemnity Form, Medicine Consent and Administration Records.
5. The service has reviewed medication storage and labelling of medication where a care plan and medication is required to be on site in the event of emergency Training on Medication Administration Policy and ensure medication forms are filled out and signed off accordingly and medication is stored and labelled correctly.
6. The service has reviewed with staff of each room Medicine Request and Indemnity Forms and requirements. Training on Medicine Request and Indemnity Form for all staff ensuring procedures for parental consent for any administering of medication.

### Supporting documentation submitted

#### General Safety:

1. Photographic evidence of installed air conditioning units.
2. The service submitted documentary evidence of staff training on fire safety which was completed on the 4 October 2023.

#### Infection Control:

3. Evidence of staff training.

#### Administration of Medication:

- 4, 5 and 6. Evidence of staff training.

### Summary Comment

The service has addressed the non-compliances as identified on inspection 6 September 2023.

## 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.*

### Compliance Information

(1) The registered provider ensured that an adequate number of staff held First Aid Responder (FAR) certification training.

### 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,

#### Compliance Information

(1)(a) Records of fire drills were observed on the day. The last recorded fire drill took place on the 14 August 2023, both in the morning and afternoon session.

### 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

#### Non-Compliance Information

(c) Adequate ventilation was not available in the Toddler 1 room to ensure that the temperature of the room was maintained between the recommended 18-22 °C and to reduce the risk of cross infection. It was observed that a window in the care room was damaged and therefore could not be opened.

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

##### Corrective and Preventive Action

(c) The service has stated that windows will remain open for adequate ventilation and ensure cooling in all rooms throughout the session period. Damaged window to be repaired in Toddler room 1 to enable better ventilation (4 weeks).

##### Supporting documentation submitted

(c) Documentary evidence of a quote for the repair of the window dated 6 October 2023.

#### Summary Comment

The corrective action proposed will address the non-compliance identified on inspection. Regulatory compliance for Regulation 29(c) remains outstanding until this work has been completed.