

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015DY385
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Name of Service:	Family Resource Centre Ltd
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Address of Service:	54-55 Thornton Heights, Inchicore, Dublin 8.
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Eircode:	D08 X31C
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Name of Registered Provider:	Noreen Byrne
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Service type:	Full Day, Part Time, Sessional
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Date 1 of Inspection:	06/05/2026
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Date 2 of Inspection:	07/05/2026
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No of pre-school children: Day 1	AM	20	PM	20
No of pre-school children: Day 2	AM	19	PM	18

Address of the Early Years Inspectorate:	The Early Years Inspectorate, Tusla Child and Family Agency, Loughlinstown Health Centre, Loughlinstown, County Dublin.
Inspection undertaken by:	Olivia Quill
Title:	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).

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Description of service

Family Resource Centre Ltd is a community-based service located in a purposely adapted premises within an apartment complex in Dublin South City. The service is registered to provide full day, part-time and sessional education and care for children ranging in age from 1-6 years and operates Monday to Friday from 9am to 2.15pm. The service also provides a school age service. Care of the children is facilitated across three care rooms. A separate cot room and a sensory room is available. An enclosed outdoor play area is located to the rear of the premises.

Staffing

In total eight staff are employed in the service including the designated person in charge. The registered provider does not work in the service. On the first and second day of inspection six adults were present. This included four childcare staff who worked directly with the children, a student on work placement and the person in charge.

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 inspection was unannounced and focused on the area of governance, health, welfare and development of child, records, safety, premises and facilities. The inspection may also focus on other areas as required.

This inspection focused on an examination of compliance under the following regulations:

Regulation 9 (1), (2), (3) and (4) Management and recruitment,

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Regulation 10 Policies procedures of Pre-School Service,

Regulation 11(1), (2) Staffing levels,

Regulation 16 Record in relation to pre-school service,

Regulation 19 (1)(b), (2) and (3) Health welfare and development of child,

Regulation 23 Safeguarding Health, Safety and Welfare of child,

Regulation 25 First Aid,

Regulation 26 Fire Safety,

Regulation 29 Premises,

however, on inspection additional non-compliance which posed a risk were identified under Regulation 9(7)(a) and Regulation 16 (1)(i) and Regulation 19(1)(a). These findings are outlined within the relevant regulations within this report.

A sampling process was used to assess compliance under Regulation 19 Health, Welfare and Development of Child and Regulation 16 (1)(k) Record in Relation to Pre-School Service. As a result, the scope of the inspection included the Baby and Toddler rooms and did not include the Pre-School 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.

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Additional Information

The inspection was triggered following information received by the Early Years Inspectorate on the 28 April 2026. A Regulatory Compliance meeting was held on the 5 June 2026 to address the non-compliance found on inspection.

Acknowledgments

The inspector wishes to acknowledge the cooperation of the person in charge, staff and children who were present on the days 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*

(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.

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

(7) A registered provider shall ensure that all employees, unpaid workers and contractors are appropriately supervised and provided with appropriate information, and where necessary training, including in relation to the following:

(a) the policies, procedures and statements of the service specified in Schedule 5;

Compliance Information

(1)

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

(b) At all times during the inspection the designated person in charge was on the premises.

(2) Following a discussion with the person in charge and review of documentation, it was confirmed that four staff members commenced employment in the service since Regulation 9 was last inspected on 08 April 2024.

Documentation required under Regulation 9 (2), (3), (4) was reviewed in respect of the four staff members. A file was also reviewed for a student on work placement. In addition, Garda vetting was reviewed for all staff employed to work directly with the children.

(a) Of the ten references required, four written validated references were available from past employers.

(c) Garda vetting disclosures had been obtained for eight staff members and for one student who was present in the service. However, the service did not adhere to the re-vetting timeframes as outlined in the Early Years Inspectorate Regulatory Notice, requiring services to renew Garda vetting every three years. Please refer to the information outlined under Regulation 23 of this report.

(d) Not applicable. The staff employed had not lived in a state other than Ireland for more than six consecutive months as adults.

(4) Documentation was available to show that the four staff members employed to work directly with children attending the service held at least a major award in Early Childhood Care and Education at Level 5 or above on the National Framework of Qualifications.

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Non-Compliance Information

(2) (a), (b) There was no evidence of verification of four written references provided and two adults had only one written reference.

(3) Documentation reviewed evidenced that the procedures specified above under 9(2) had not been carried out prior to staff members commencing employment in the service as detailed above. Additionally, Garda vetting for one adult was dated 12 September 2025 and the adult confirmed they commenced working in the service in the month of August 2025.

(7)(a) The registered provider failed to ensure that all employees received appropriate induction, training and supervision. Evidence gathered during the inspection confirmed that newly appointed staff had not been provided with copies of the service's policies and procedures. Staff stated that they were shown the location of the policy folder and advised to read the policies when time permitted.

In addition, staff reported that they had not received formal induction training upon commencement of employment. When requested, the person in charge was unable to provide written records of staff induction and confirmed that these had not been completed. Staff further confirmed that they did not receive one-to-one supervision sessions.

This practice was not in accordance with the service's Staff Induction Policy, which states "that all staff members will participate in an induction training programme on commencement of employment, that induction will be recorded on the appropriate induction record form, and that management will identify training needs through observations of practice and address these through one-to-one supervision."

The absence of induction, training, supervision, and ongoing support for staff was reflected in some of the care practices observed during the inspection, as outlined under the non-compliant findings of Regulation 19.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

2(a), (b) References and validation of references have been obtained by the service manager and verified. They are now in place on staff files for inspection. Going forward manager will ensure staff files and induction training are completed prior to staff commencing employment. Board and Registered provider will ensure manager has completed staff files prior to commencement.

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(3) This was an oversight on previous manager going forward induction checklist will be used and service manager will ensure garda vetting and all staff file is in place prior to any staff member commencing employment

(7) (a) Induction training checklist has been put in place for all staff and completed since inspection. These are available on file for next inspection.

Supporting documentation submitted

Evidence of references and validation.

Evidence of induction training checklist.

Summary Comment

Supporting evidence was submitted in keeping with the actions stated. The Regulatory requirement has been met.

Part III – Management and Staff

Regulation 10 - Policies, procedures etc. of pre-school service

A registered provider of a pre-school service shall ensure that the written policies, procedures and statements specified in Schedule 5 are in place for the service.

Compliance Information

The registered provider ensured written policies, procedures and statements specified in Schedule 5 were in place. The inspection focused on a review of the following policies.

- Behaviour Management
- Infection Control
- Staff training
- Staff supervision

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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) An adequate number of adults were working directly with the children at all times during the inspection.
- (2) The minimum ratio of adults to children for full day care services was adhered to at all times during the inspection. There were 20 children attending the service being supervised by four adults on the first day of inspection and there were 19 children attending on the second day of inspection being supervised by four adults.

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

Compliance Information

- (1)(k) A sample of 10 accident and incidents forms were reviewed. These forms were completed correctly and signed by parents and staff.

Non-Compliance Information

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(1)(i) There were no staff rosters available on the days of inspection for either the current week or the previous week. As a result, the service was unable to demonstrate that appropriate staffing arrangements were maintained at all times.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(1)(i) Staff roster is now in place and displayed in lobby area. All staff rosters going forward to be on display and a hard copy saved to managers computer. Copy of staff roster available in supporting documents. Manager will ensure staff rosters are in place each week for the week ahead while also keeping digital copy on computer.

Supporting documentation submitted

Evidence of staff roster.

Summary Comment

Supporting evidence was submitted in keeping with the actions stated. The Regulatory requirement has been met.

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.

(2) A registered provider shall ensure that no corporal punishment is inflicted on a pre-school child whilst attending the service.

(3) A registered provider shall ensure that no practices that are disrespectful, degrading, exploitive, intimidating, emotionally or physically harmful or neglectful are carried out in respect of a pre-school child whilst attending the service.

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Compliance Information

(1)(b) The following suitable care practices were observed in the Baby and Toddler rooms.

During the inspection, staff in the Baby room were observed encouraging and supporting children to feed themselves, while providing additional assistance where required. In the Toddler room staff prepared alternative snacks for children who did not wish to eat the lunch provided. Children in the baby room were given water to drink with their meals.

In the Baby and Toddler rooms nappies were changed as required, warm one-to-one interactions were observed throughout this time between staff and children. Staff were kind in their approach and spoke in soft, reassuring tones. In the Toddler room some children were in the process of potty training, and staff responded promptly and sensitively to their cues indicating they needed to use the potty.

In the Baby room, children were placed to sleep when they displayed signs of tiredness. Staff supported children to settle comfortably by removing outer clothing and placing them in the cot room for sleep.

(2) There were no instances of corporal punishment observed being used within the preschool during the inspection.

Non-Compliance Information

(1)(a) In the Baby and Toddler rooms, there was an insufficient range of age-appropriate materials and equipment available to support the developmental needs and interests of the children attending the service as detailed below.

1. In the Baby room, there was a lack of sensory and exploratory resources, including cause-and-effect toys and role-play props to complement the home corner and kitchen area.

2. In the Toddler room, although open shelving was available, resources were limited, with only a small number of accessible materials provided, including animals, jigsaws and cars. Areas of interest were not clearly defined or organised to support purposeful play and independent engagement. Consequently, children were frequently observed wandering around the room and climbing on furniture.

3. In the Toddler room the morning activity was not effectively planned or managed to ensure it remained suitable for the group of children and the available environment. While children initially engaged in exploring

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frozen animals in ice, the activity was changed when paint was introduced, increasing the complexity and level of supervision required. This resulted in a busy and unsettled atmosphere within the room. Children were observed painting their arms and faces, walking around the room with paint on their hands, and paint being transferred onto furniture. One child's clothing became wet after accessing a bowl of water staff had placed on the floor. During this time, some children disengaged from the activity and wandered around the room, while others climbed on furniture. Staff attention was divided between managing the activity, preparing additional materials, and cleaning spills.

4. There was no suitable rest area available in the Toddler room for children who wished to take a break from activities or access a restful space. The only soft furnishings provided was a rug and this was partially covered by a bookshelf.

(1) (b) Some care practices observed in the Baby and Toddler rooms were not appropriate and suitable to meet children's basic care needs at all times as detailed below.

5. In the Toddler room children's behaviour and safety were not consistently or effectively managed within the room, evidenced by one child repeatedly climbing a low-level bookshelf. Although the staff member moved the bookshelf, the child continued to push it back and resumed climbing. The staff member used conditional punishment relating to outdoor play instead of positive behaviour support and redirection the child was told they could not go outside until the behaviour stopped.

6. In the Baby and Toddler Rooms children's personal care was not attended to in a timely manner this created a risk to children's comfort and dignity as evidenced by the following.

7. On the first day of inspection at approximately 11:23am children from the Baby and Toddler Rooms were observed engaging in water play in the outdoor area. Appropriate protective clothing, including overalls and waterproof clothing, was not provided to protect children's clothing during the activity. One child was observed walking in the water, resulting in their footwear and clothing becoming wet. The child remained in wet clothing until approximately 12:40pm, after returning indoors and eating their dinner, at which time the clothing was changed.

Drinking water was not consistently and freely available to children, as evidenced by the following observations:

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8. During both days of inspection, children from the Baby and Toddler rooms spent time in the outdoor area, without access to their water bottles, as staff did not bring them outdoors. The weather was sunny and warm at the time. This practice posed a potential risk to the children's health and wellbeing.

9. In the Toddler room, drinking water was not readily accessible to children throughout the day. During lunchtime, water was not routinely offered to children. Only one child was observed receiving a cup of water, drinking it, and requesting an additional serving.

19 (3) In the Baby room, it was observed that some staff were not consistently implementing appropriate, suitable and respectful care practices when handling children. On a three separate occasions, a staff member was seen lifting and guiding children by holding their wrist and lower arm, rather than using recommended practice such as supporting or leading children by the hand. This approach does not align with best practice in ensuring children are handled in a safe and developmentally appropriate manner. It was noted the behaviour management policy was not sufficiently detailed, as it did not provide information or guidance to staff regarding safe handling practices.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(1)(a)

1., 2. Baby and Toddler room have now been re-equipped with a variety of toys, the play areas have also been put in place giving children a variety of play equipment while also showing different play areas, kitchen/car mat/construction/cosy area/tabletop/art areas. Manager will ensure checks are carried out in all rooms to ensure the areas of interest and variety of toys is readily available to all age groups, policies are being adhered too.

3. The service has also begun to engagement with Better Start Quality Team to ensure the overall quality of the service improved and the rooms continue to improve.

4. Rest areas with books have been provided in each room. Kitchen and imaginary play areas have also been developed.

(1)(b)

5. Behaviour management policy has been updated and all staff have been given a copy and signed off on. The manager will continually monitor this room to ensure positive behaviour management is being used. The staff

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member was also spoken to by manager to ensure she is aware of the language she was using and ensure she fully understands the positive behaviour approach.

6.,7. New cubbies for each child has been added to our entrance area to ensure that each child has an available change of clothes.

7.,8.,9. Drinking water stations are now available in all rooms and the garden area.

(19)(3) The behaviour management policy has been updated and the gone through with each staff member so they fully are aware of the positive behaviour approach that staff have with the children. The staff member was spoken to individually about the behaviour observed on the day of inspection and this room will be monitored closely by management to ensure this practice is no longer being done.

Supporting documentation submitted

Supporting images of the rooms attached. Supporting email to better start showing engagement.

Evidence of training completed and additional training planned.

Summary Comment

Supporting evidence was submitted in keeping with the actions stated. The Regulatory requirement has been met. Practice will be reviewed on 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 front door to the service was secured and the outdoor play area was safely secure to prevent unauthorised access or children leaving unsupervised.
- Cleaning products and medication were kept out of children's reach.
- The kitchen was inaccessible to children.

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Infection Control:

- In the Baby room staff supported children to wash their hands after outdoor play and prior to eating.
- Evidence of pest control was provided.

Safe Sleep:

- Staff were observed to carry out physical checks on sleeping children every ten minutes.
- A sleep log was available for review, detailing the room temperature, breathing pattern, colour and position of the child.

Administration of Medication:

- Two children were on prescribed medication for diagnosed medical conditions, staff were familiar with the treatment required in the event of a medical emergency.

Fire Safety:

- Emergency exits were marked and kept clear to allow for timely evacuation in the event of a fire.

Non-Compliance Information

General Safety:

1. Garda vetting was available for one staff member. However, this vetting disclosure was not dated within the previous three years in adherence with the Early Years Inspectorate Regulatory Notice 'EYI-RN12.3 Renewal of Garda Vetting'.
2. In the sanitary area used by children in the Baby and Toddler rooms pipework beneath the wash hand basin was uncovered and accessible, posing a potential risk of contact injury.
3. In the sanitary area used by the children from the Baby and Toddler rooms a metal bar was protruding from the wall posing a potential safety risk.
5. In the outdoor area a nail was observed protruding from a wooden step leading into the children's playhouse and the wood surrounding the area appeared visibly rotten, presenting a safety concern. It is acknowledged, that once the issue was brought to the attention of the manager, the area was immediately cordoned off to prevent access by children and the necessary repairs were completed and photographic evidence was submitted to the inspector the day after the inspection was completed.
6. During breakfast in the Toddler room, some children were observed walking around the room while eating toast instead of remaining seated posing a potential choking risk.
7. In the sensory room a trailing cable was accessible while children from the Baby room attended. It's acknowledged when this was pointed out the staff member promptly addressed the issue.

Infection Control:

8. In the outdoor area on two separate occasions, one child from the Baby room and one child from the Toddler room were observed using a plastic bowl to scoop and drink water from the water tray this posed a risk of children picking up a bacterial illness. The inspector alerted staff immediately, and the water was discarded.
9. Nappy changing practice observed was inconsistent for infection control purposes. In the Toddler room staff did not remove their gloves after changing a child's nappy and proceeded to clean the child's face. The staff member returned to the care room to wash their hands instead of washing their hands in the designated sanitary area increasing the risk of infection.
10. In the Baby and Toddler rooms, plates were not provided during mealtimes and toast was served directly on the table surface. This practice presents an infection control and hygiene risk, as food served directly on a table surface may become contaminated, increasing the potential spread of bacteria and illness among children.
11. In the Toddler room after outdoor play and prior to children eating their lunch a communal bowl of soapy water was used to wash all children's hands. This practice increases the risk of cross contamination and spread of infection, as germs and bacteria can be transferred between children through shared water.
12. The child size wash hand basins used to facilitate hand hygiene in the activity room were broken.
13. In the Baby room mouthed toys were not removed immediately after use increasing the risk of cross contamination between children.
14. In the Baby room, children were observed using soothers however, there was no written policy or procedure in place to guide staff on the appropriate cleaning, storage and sterilisation of soothers.
15. In the Baby sleep room, a cot sheet a child was sleeping on was observed to be visibly stained and soiled.
16. In the sanitary area used by the Baby and Toddler room there was no paper towel provided in the towel dispenser to support hand hygiene.
17. In the Pre-School sanitary area an open bin rather than a pedal operated bin was provided.

18. In the Baby room the wooden surface on a toy washing machine was chipped and worn and could not be effectively cleaned for infection control purposes.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1. The garda vetting has been now obtained and going forward management and registered provider will ensure vetting is in place prior to any staff member commencing employment.
2. This pipe work has been boxed in.
3. Metal bar has been removed.
5. Wooden steps in garden have been removed and replaced with new equipment garden risk assessments will be carried out by staff going forward any issues will be notified to management immediately.
6. Healthy eating policy and safe eating policy has been updated and reviewed by staff and management to ensure children are observed safely during mealtimes and that children are encouraged to sit at the table while eating. Staff are also encouraged to sit with the children which will encourage the children to sit with them making mealtimes more engaging for the children.
7. Trailing cable removed in sensory area.
8. Drinking water station now available in the rooms and garden area.

Infection Control:

9. All staff have been re-trained in nappy changing procedures and they are also on display in the nappy changing rooms as a reminder to staff. Spot checks will be carried out by management and supervisor to ensure correct procedures are carried out.
10. Plates and additional cups available in each room cupboard.
11. Handwashing practices were revisited and training was carried out for all staff.
12. Taps in activity room have now been fixed.
13. Mouthed toys boxed and training on mouthed toy policy has been done for all staff. Mouthed toy boxed are now available in all rooms.
14. Individual soother boxes are now available for the rooms where children use soothers.
15. New cot sheets have been purchased the dirty sheet has been removed and regularly cleaning schedule has been implemented for sheets for the cot room. Invoice of purchase attached in supporting documents.

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16. Paper towels are now in place and will be checked daily by cleaner to ensure they are always full ready for the next day.

17. New pedal bins have been purchased for all rooms and sanitary areas. Supporting images attached.

18. Toy washing machine has been removed from room.

Supporting documentation submitted

General Safety:

Written and photographic evidence submitted.

Infection Control:

Written and photographic evidence including invoices for the purchase of additional cot sheets and soother boxes.

Summary Comment

Supporting evidence was submitted in keeping with the actions stated. The Regulatory requirement has been met. Practice will be reviewed on net inspection.

Part VI - Safety

Regulation 25 - First aid

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

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

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

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

Compliance Information

(1) There was evidence to show that two adults held certification in First Aid Responder training, and both adults were available for the duration of the inspection.

(2)

(a) A suitably equipped first aid box was available and stored safely in an easily accessible and prominent position.

(b) The first aid box was observed to be easily available to the staff caring for the children attending the service.

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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.*
- (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) A written record was available detailing fire drills that had taken place in the service. The record showed that the last fire drill took place on 28 April 2026.
 - (b) The number, type and maintenance record of firefighting equipment and smoke alarms on the premises were up to date. Fire extinguishers were serviced 12 June 2025 and smoke alarms were serviced on the 16 February 2026.
- (4) The procedures to be followed in the event of a fire were displayed in the care rooms and the hallway in the service.

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Part VII - Premises and Space Requirements

Regulation 29 - Premises

A registered provider shall ensure that the premises of the service are-
(d) cleaned, maintained and repaired, as required

Non-Compliance Information

(d) The registered provider did not ensure that the premises and outdoor play area of the service was cleaned, maintained and repaired as required as evidenced by.

1. In the sanitary area used by the Baby and Toddler room a tile was missing from the wall and the soap dispenser was broken off the wall.
2. The floors in the Baby and Toddler rooms were visibly dirty, with marks and food crumbs present.
3. The windows in the care rooms were observed to be heavily smeared and covered with visible dust and dirt.
4. Parts of the outdoor playground were observed not to be maintained to an appropriate standard of cleanliness and safety. There was a build-up of moss and dirt increasing the risk of injury.
5. In the outdoor play area the big slide was observed to be in poor condition. The wooden panels leading up to the slide were broken, and masking tape had been applied to the top bar of the wooden frame as a form of support. Additionally, the wooden steps appeared rotten and were visibly deteriorating. This posed a potential safety hazard.
6. In the outdoor play area, the child size picnic table had a large hole in the centre of the table and the wood was chipped around the edge of the table. The paint was chipped off the bench seating.
7. Four large wooden armchairs located in the outdoor area were not maintained in a safe and appropriate condition. The paintwork was observed to be heavily chipped and one arm had a visible hole in the armrest, indicating a deterioration of the furniture.
8. The wooden covering on top of the chalkboard in the outdoor play area was observed to be broken, with visible wooden splinters present.

It's acknowledged the person in charge provided a copy of an email to confirm a playground service had been contacted to address the issues in the outdoor area.

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Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(d)

1. Wall tile is still missing service is currently sourcing a tiler to replace in short term a laminated piece of paper has been placed over the missing tile until a tiler can fix this.
2. A cleaning company was brought in to carry out a deep clean of the whole service. The floors have been professional cleaned. Staff are aware of the need to sweep and clean the floor daily and cleaner will ensure the rooms are mopped each evening to maintain the cleanliness.
3. All windows have been professional cleaned images attached. Window cleaning sprays have been added to each room to ensure these are maintained.
4. Outdoor area has been power hosed and weeds/bushes cut back and removed.
5. Slide has been removed and new play equipment has been added.
6. Picnic table has been disposed of.
7. Armchair has been removed and disposed of.
8. Chalk board has been removed from wall.

Management and Registered Provider will ensure checks are carried out on the building to prevent weeds/dirt/damage. Risk assessment checks will be carried out regularly by staff and management and any issues will be reported and rectified immediately going forward.

Supporting documentation submitted

Receipts of maintenance work completed in outdoor area and from the external cleaning company.
Copies of cleaning records.

Summary Comment

Supporting evidence was submitted in keeping with the actions stated. The Regulatory requirement has been met.