

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2015FL037
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<b>Name of Service:</b>	Bright Futures Creche
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<b>Address of Service:</b>	Unit 16a, Block 50, Rosemount Business Park, Dublin 15, Co. Dublin
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<b>Eircode:</b>	D11 CC86
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<b>Name of Registered Provider:</b>	Roisin Payne
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<b>Service type:</b>	Full Day, Part Time, Sessional
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<b>Date of Inspection:</b>	01/04/2025
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<b>No of pre-school children:</b>	AM	29	PM	27
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<b>Address of the Early Years Inspectorate:</b>	2 <sup>nd</sup> Floor, Unit 4/5, The Nexus Building, Blanchardstown Corporate Park, Ballycoolin, Dublin 15
<b>Inspection undertaken by:</b>	Y Kelly and Á Dunne
<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).

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

Bright Futures Creche is a private service which provides sessional, part time and full-time care to children aged from 0 to 6 years of age and currently operates from 7.30am to 5:30pm Monday to Friday. The service also provides a school age service. The service operates from a converted unit within a business park on the northside of Dublin city. There are four care rooms and a sensory room over two floors within the service. The care rooms are as follows: the Baby and Wobbler rooms are on the ground floor with the Toddler, Pre-school room and the sensory room on the second floor. Ten standard cots are available in a separate ground floor cot room for the children in the Baby room and an outdoor play area is available to the side of the service. A service kitchen is located on the first floor which serves meals to the children attending. On the day of the inspection, the Wobbler room was closed.

### Staffing

There are nine staff members employed in the service by the registered provider, seven of whom were present on the day of the inspection to include five staff who work directly with the children and a manager and a deputy manager are employed in the service to coordinate the day-to day operations of the service and to support with the children when needed. The registered provider was present in the service during the inspection.

### Methodology

Tusla Early Years Inspectorate is the independent statutory regulator of early years services in Ireland. The Child Care Act 1991 (Early Years Services) Regulations 2016 define the duty of a registered provider to ensure the safety and well-being of children and to comply with these regulations. This Act also gives Tusla the authority to assess compliance with the regulations. The purpose of regulation in relation to early years services is to ensure that the care, safety, and well-being of children attending such services is upheld. Inspections of early years services are planned based on the following:

- Previous inspection history
- Any information received in relation to the service

The findings on inspection are based on:

- Information obtained through examination of documentation
- Direct observation
- Discussion with relevant staff

This inspection was unannounced and focused on the area of governance, health, welfare and development of

child, safety and premises and facilities. The inspection may also focus on other areas as required.

The inspection focused on an examination of compliance under the regulations 9, 11, 16,19(1)(a), 23, and 26; however, on inspection additional non-compliance which posed a risk was identified under regulations 27 and 29. These findings are outlined within the relevant regulations within this report.

A sampling process was used to assess compliance under regulation 16. As a result, the scope of the inspection included the Baby Room, Pre-school Room and Toddler Room. The Wobbler Room was closed on the day of the inspection.

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

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

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

## Acknowledgments

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

### Part III – Management and Staff

#### Regulation 9 – Management and recruitment

(1) A registered provider shall ensure that-

- (a) the service has a designated person in charge and a named person who is able to deputise as required,
- (b) at all times during the period when the pre-school service is being carried on, the designated person in charge or the named person referred to in subparagraph (a) is on the premises, and
- (c) there is a clear management structure in the service that identifies the lines of authority and accountability in the service and the specific roles and responsibilities of each employee and unpaid worker.

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

- (a) consideration of references from the person's past employers, if any, and in particular the most recent employer, if any,
- (b) consideration of references from reputable sources in the case of a person who has no past employers,
- (c) consideration of the vetting disclosure received from the National Vetting Bureau of the Garda Síochána in accordance with the Act of 2012 in respect of the person, and
- (d) ensuring, insofar as is practicable, that where a person has lived in a state other than the State for a period of longer than 6 consecutive months, he or she provides police vetting from the police authorities in that state.

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

#### Compliance Information

(1)(a) The registered provider was the designated person in charge of the service and there was a named person to deputise as required.

(b) The registered provider and the designated person in charge were on the premises when the inspector's arrived unannounced to the service for the duration of the inspection.

(c) The service had a clear management structure in place with clear roles and responsibilities outlined.

(2) The files for four new staff members were reviewed, and the following was recorded:

(a) Six validated and written references were available from past employers.

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

(c) Garda vetting disclosures were available for the four staff members whose files were reviewed. The service also demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring the service to renew Garda vetting every three years.

(d) International Police vetting was available for four adults who had lived outside of the state for a period of more than six months.

(4) Documentary evidence was available to confirm that four staff members whose files were reviewed and who may work directly with the children in the service held at least a major award in Early Childhood Care and Education at Level 5 or above on the National Framework of Qualifications or a qualification deemed eligible by the Minister.

### 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) On the day of the inspection there was an adequate number of staff members working directly with the children attending the service.

(2) The following adult to child ratios were observed during the inspection:

There were 29 children attending the service being supervised directly by 5 adults in the morning and 27 children attending the service being supervised directly by 4 adults in the afternoon, with the registered provider, deputy person in charge and assistant manager present in a support capacity, with the exceptions outlined in (2) below.

(8) (a) The registered provider ensured that there were 2 adults on the premises at all times.

#### Non-Compliance Information

(2) The minimum ratio of adults to children was not maintained during the inspection at all times as specified in column (3) of Part 1 of Schedule 6, as evidenced by the following observation.

- Preschool room: One adult caring for 9 children aged between 3-5 years of age from 12.30pm to 15.10pm

Two adults were required for the number and age profile of the children.

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

#### Corrective and Preventive Action

(2)

Corrective Action:

- The deputy person in charge reported that they have hired a new staff member who started on the 23<sup>rd</sup> of April.

Preventive Action:

- The deputy person in charge reported that management reviewed Tusla Regulations in relation to adult child ratio and will adhere to the correct ratio.

#### Supporting documentation submitted

- Evidence of the hours sheet and weekly rota with new staff member has been submitted.

### Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance under Regulation 11 has been addressed.

## 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:

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

#### Compliance Information

(1)

(k) The registered provider ensured that accident and incident records are kept on a digital software application.

### 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) The following observations were made on how each child's learning, development and well-being was facilitated within the daily life in the service:

##### Basic needs:

- Dinner at 2.00pm was supplied by an external food company, which on the day of inspection was tomato pasta. Parents supplied their children with their morning and afternoon snacks. The food from home was observed to be in keeping with the service healthy eating policy and consisted of fruit, sandwiches, crackers, cheese, and yogurts. Staff were familiar with the service policy and engaged with parents to ensure that healthy options were only provided.
- The children's personal care needs were attended to promptly. Nappies were changed at scheduled times and more frequently as needed. The staff members used the opportunity to engage with and chat to the children. The children who were toilet trained used the toilet independently.
- Children's water bottles were accessible to the children in the Toddler room and Preschool room.
- All the children attending the service were given the opportunity to spend time in the outdoor area during the inspection.

##### Supporting relationships around children

- Staff demonstrated warm and caring interactions with the children.
- Children were offered comfort and support when needed.
- Staff communicate with parents through use of a digital software application to share information about children's care needs.
- In the Baby room, during transition to sleep, staff were available to assist the children in getting ready and helping them to settle.
- Identity and belonging were promoted in the service. For example, there was a 'Family Wall' display, birthday chart display, and the children's artwork and photographs were displayed Preschool room. In

addition, each child had their own cubby in the Toddler room and Preschool room for their belongings to be stored during the session.

### Physical and material environment:

- There was comfortable furniture with small child sized chairs and tables for children to sit when carrying out tabletop activities or for mealtimes.
- The Preschool room was divided into areas of interest which provided play opportunities for children. In the Preschool room areas of interest included a home corner with wooden kitchen, kitchen materials, dolls house, buggy and dolls and dress up resources all of which supported the children's imaginary play experiences. There were transportation materials including cars and garage and construction resources including hollow wooden blocks. There were tabletop and Montessori materials to support early numeracy learning opportunities and small world materials including dinosaurs, farm and wild animals to support children's imaginative and dramatic play. In addition, there were arts and craft materials including, paint, paint brushes, paper, crayons, markers and scissors to support mark making opportunities and creativity for children. There was a selection of books in the library which supported children's language development.
- There were labels to denote interest areas and labelled materials in the Preschool room which also promoted emergent literacy in the service.
- The Toddler room consisted of a kitchen area with wooden kitchen and play materials, dolls house with supporting materials and animals for dramatic and imaginative play. There was a sofa and chairs where children could relax. There was a construction box with builders' hats and tools, plastic building bricks and transportation toys. Sensory play resources including a sensory tray with rice, paint and mark making resources such as blackboards were observed in the room. A selection of books were available in the room.
- In the Baby room, the materials and equipment provided to the children were suitable to the age and stage of development of the children present. Children had the freedom to choose from materials and equipment available to them.
- The outdoor play environment to the rear of the premises was fully enclosed and secure, the surface of which was covered with soft artificial surface. The outdoor toys were available and included bikes, scooters, swings, slides, climbing frames, a playhouse, two goals, sit in car, sand trays with cups, forks, spoons and pots. These promoted the development of skills such as balance, running, jumping, stopping, and facilitated risk play under the supervision of staff.

### Programme of Activities and its Implementation:

- Children were observed engaging in table top activities including art activities at the table, sensory play at the sand tray, pretend play with dolls and animals and outdoor play.
- The daily routine was displayed on the wall in the Preschool room and the routine was reflected in practice. Routines provided for predictability and comfort for young children.
- The service carries out curriculum planning and the short-term plan in the Preschool room was derived from children's interests on insects and looking for insects in the garden.

### Non-Compliance Information

#### Basic Needs:

1. In the Toddler room, between 12.00pm and 12.35pm, the transitions at sleep time and settling children to sleep was not observed to be timely, smooth and organised. One of the children was upset and it took children some time to settle and go to sleep. Three children were not sleeping and were playing in the room at this time whilst other children were sleeping.
2. Snack time and dinner time in the Baby room was not observed to be an organised or social environment, as demonstrated by the following:
  - At snack time at 11.45am the seating arrangement consisted of four children seated at a circular low table while their five peers were positioned close by, on low floor chairs with trays, with two of these children having their backs to the four children at the table. This arrangement did not promote communication with their peers while having their food.
  - At dinnertime at 14.15pm the consistency of the food presented and the cutlery provided to the children were not suitable for the age and developmental stage of the children. As a result, the children had difficulty using the spoons to eat the large pieces of pasta independently.
  - At snack time or at dinner time staff did not sit with children at their level when eating.
3. In the Baby room, three children were observed to have their soothers in their mouth for long periods of time during the morning from 10.15am to 11.50am while they played in the care room and in the outdoor area. At 11.50am the soothers were removed from the children for snack time. It is acknowledged that one child was settling into the care room however, the other two children did not show signs of requiring the soother as a source of comfort. Prolonged use of soothers limits the opportunity for language development.

#### Physical and Material Environment:

4. In the Baby room the below examples of how the materials and the environment limited children's play opportunities were observed:
- Two cause and effect/battery-operated toys were not working which removed the functionality and developmental purpose of the toy.
  - The family wall was not displayed at the children's eye level. This did not promote the relationships between family and home or the children's sense of identity.
  - Chairs were stacked in the corner of the care room under the countertop and were not made available between meals to give the children the opportunity to sit and engage with tabletop activities such as jigsaws and puzzles.

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

#### Corrective and Preventive Action

##### Corrective Actions:

1. A staff meeting was held with changes introduced for unsettled children, and care routine/activities for children who are awake during the nap time. Training was held for all staff on the daily care routine.
2. A staff meeting was held to discuss the importance of mealtimes as a good time to create a social event and encourage communication. Forks were provided for babies and wobblers.
3. Staff sit with children during mealtimes.
4. A staff meeting was held and changes were made to the classroom cleaning sheet with a section added to check for batteries. Batteries are now available in every room. During the staff meeting, alternatives for the family wall were discussed. Staff developed a family book. The layout of the baby room was changed and table and chairs are available all the time.

##### Preventive Actions:

1. The deputy person in charge discussed that training will be held every 3 months for all staff to ensure all policies and procedures are followed. Parents will be informed if the child is unsettled.
2. Management will be visiting the rooms regularly. Training will be held every 3 months for all staff to ensure all policies and procedures are followed.
3. Management will be visiting the rooms regularly.
4. The deputy person in charge reported that there is a new layout in the baby room. Batteries are available in each room.

#### Supporting documentation submitted

1. Meeting minutes and confirmation of training with staff signatures have been submitted.
2. Photographic evidence of cutlery purchase has been submitted.
3. Meeting minutes and confirmation of training with staff signatures has been submitted.
4. Photographic evidence of classroom cleaning sheet, battery box, family book and new layout of the room have been submitted.

### Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliances under Regulation 19 have been addressed.

### Part VI - Safety

#### Regulation 23 - Safeguarding health, safety and welfare of child

*A registered provider shall ensure that all reasonable measures are taken to safeguard the health, safety and welfare of a pre-school child attending the service and that the environment of the service is safe.*

### Compliance Information

#### General Safety:

- On arrival to the service, the inspectors observed that the door was secure and monitored by staff.
- Cleaning agents were stored safely out of the reach of the children.
- Children's dietary requirements were displayed in the preschool room.
- All mattresses used in the cots had safety labels and met safe sleep guidelines.

#### Infection Control:

- Thermostatically controlled warm water, liquid hand soap and dispensed handtowels were available in the sanitary facilities.
- Pedal operated bins were available for waste and disposal of contaminated items.
- Soothers were stored in individually labelled containers after cleaning and sterilising.
- Nappy changing facilities were available for the children and nappy changing was completed for the children, at set times or when required in accordance with the service policy.
- All mattresses used in the cots had washable wipeable covers present.

#### Administration of Medication:

- Children's health care plans were displayed in the preschool room.

#### Safe Sleep:

- The temperature of the cot room was recorded as 21.8°C at 13.47pm while six children slept. This is within the recommended temperature of 18-22°C for children over the age of 1 year while they sleep.

- Shoes and excess clothing were removed from children while they slept.
- Sleep plan documentation was available to demonstrate that a full sleep plan review had been completed by staff for seven children under the age of two and that parents had been fully included in this decision.

### Fire Safety:

- Emergency exits were unobstructed in the event of emergency evacuation.
- Documentation available demonstrated that fire drills were undertaken monthly, with the last drill occurring on the 6 March 2025.

### Non-Compliance Information

#### General Safety:

1. The practice in relation to sharing accident and incident reports with parents was at variance to the services' policy. The service policy states that "all accidents and incidents (minor and serious) are recorded and signed by management, the staff member who witnessed the accident/incident and the parent of the child involved." However, of the 21 accident and incident records reviewed it was observed that 17 of the records did not have a parents' signature. The app stated that the record had been 'shared' but not seen or signed. There was also one record that had not been shared with the parent. This variance of practice from policy without other actions in place to ensure parents have read the report, poses potential risk that parents may have not read and understood the report. This could prevent the parent from providing on-going care and supervision at home following an accident or injury.
2. The record of attendance for the service on the electronic application did not accurately reflect number of the children in the care rooms. Contemporaneous accurate record of attendance must be maintained to support the safe evacuation of children in an emergency. For example:
  - In the Baby room, one child in attendance who was settling from 8.55am to 11.20am, was not marked as being present in the service.
  - In the Baby room, one child who was in attendance in the service during the inspection was not marked as being present in the service, during the day, on the attendance record.
  - In the Toddler room, one child who was absent from the service during the day was not marked as present or as absent on the attendance record.
3. The service did not have documentation available to demonstrate that they had completed a risk assessment relating to the outdoor area, where the following was present:
  - Loose black bags in the sandpit square with tyres

- A folded outdoor clothes dryer against the wall in the older children outdoor area
- Debris in the corner of the baby outdoor area.

This reduced the effective identification of the hazards, assessment of the risk and putting control measures in place to ensure it is a safe environment.

4. In the Preschool room at 3pm, there was a strong odour of disinfectant and the floor was wet while nine children were present in the care room. The staff member confirmed that they had cleaned the floors after dinnertime and had used a disinfectant in water to clean the floor. This increased the risk of the accidental ingestion of the substance and of injury due to presence of wet floors in the care room while children were present.

### Infection Control:

5. In the Baby room infection control measures were not always followed. The possible risk of the spread of infection was increased due to the following:
- The children were not assisted to wash their hands before their snack time.
  - A soother which one child was using while having their nappy changed, in the nappy changing room at 11.55pm, was not sterilised on return to the care room.

### Safe Sleep:

6. Ten-minute sleep checks to monitor sleeping children's colour, breathing and position were not maintained on five sleeping children under 2 years of age in the cot room during a period of time. These periods of time are stated below and occurred between the inaccurate wake-up time as noted on the electronic application to each child's actual wake up time as follows:

Child	Wake up time inputted on electronic application	Actual wake up time of children
Child 1	1.42pm	2.15pm
Child 2	1.41pm	2.07pm
Child 3	1.40pm	2.07pm
Child 4	1.40pm	2.05pm
Child 5	1.40pm	2.15pm

Physical sleep checks are required as stated in Tusla's safe sleep guidelines.

### Action submitted by the Registered Provider

### Corrective & Preventive Action

### General Safety:

### Corrective Actions:

1. The accident and incident report form and medicine report form were reviewed. It was decided to use a paper version for accidents and incidents reports and medicine administration forms.
2. A staff meeting was held and it was discussed that all children's attendance is to be marked on the electronic application. This includes new children during the settling in period. If the child does not appear on the electronic application or if the electronic application is not working correctly the management are to be informed immediately. Children who are not in must be marked as absent.
3. There is a new garden risk assessment available next to the garden door, and it was discussed during the staff meeting who is taking responsibility for the garden. There is a new fairy garden in the place where the tyres were. All rubbish and debris have been removed and a power wash was carried out in the garden.
4. A staff meeting was held and training carried out in relation to supervision and the daily care routine. It was discussed that bleach is not to be used during the day where children are present. Floors will be cleaned at the end of the day or during the day as needed with an appropriate amount of disinfectant or floor cleaner.

### Preventive Actions:

1. Management will research electronic applications available on the market for possible transfer to be able to avail of different features for above forms. Management are to check the accident and incident report form and medicine report forms at the end or start of each day.
2. Management will check the electronic application every 1 to 2 hours. Staff training will be held every 3 months.
3. Management will regularly check the risk assessment and garden. Staff are informed who is taking responsibility for carrying the risk assessment out.
4. Staff training will be held every 3 months.

### Infection Control:

#### Corrective Action:

5. At the staff meeting a new daily routine for the baby room and wobbler room was discussed which includes hand washing for mealtimes. Training was held in relation to the daily care routine and use of soothers.

#### Preventive Action:

5. Staff training will be held every 3 months.

### Safe Sleep:

#### Corrective Action:

6. At the staff meeting and training the following was discussed:

- Children should not be marked as awake if they are still sleeping as this is extremely dangerous and may cause miscommunication and misinformation.
- All sleep checks should be done every 10 minutes.
- Any staff member taking over the room should be informed by other staff how many children are asleep and how many awake. This information should be factual, and the same information should be available on the electronic application.

#### Preventive Action:

6. Management will visit rooms regularly to check the electronic application. Staff training will be held every 3 months.

### Supporting documentation submitted

#### General Safety:

- Evidence of the accident and incident form and medicine administration forms have been submitted.
- Evidence of staff meeting minutes and training have been submitted.
- Evidence of garden risk assessment has been submitted.
- Photographic evidence of the garden has been submitted.

#### Infection Control:

5. Evidence of staff meeting minutes, training and copy of the daily routine have been submitted.

#### Safe Sleep:

6. Evidence of staff meeting minutes and training have been submitted.

### Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliances under Regulation 23 have been addressed.

## 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 record of fire drills was available on the premises with the last fire drill dated as having been carried out on the 6 March 2025.
- (b) A record was available of the number, type and maintenance of the smoke alarms in the premises, which were last serviced on the 26 March 2025.
- (4) Fire evacuation procedures were displayed throughout the service.

### Non-Compliance Information

- (b) A recent record was not available of the number, type and maintenance of the firefighting equipment. Documentation available demonstrated fire extinguishers within the service were last serviced on the 26 February 2024.

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

#### Corrective and Preventive Action

Corrective Action:

- (b) A service for the fire extinguishers has been booked for 2026. A new fire extinguisher certificate is now available.

Preventive Action:

- (b) A date has been marked in the management calendar for reminder of the service in 2026 for the fire extinguishers.

#### Supporting documentation submitted

- (b) Evidence of the fire extinguisher certificate and copy of date booked in calendar for 2026 have been submitted.

### Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance under Regulation 26 has been addressed.

### Part VI - Safety

#### Regulation 27 – Supervision

*A registered provider shall ensure that pre-school children attending the service are supervised at all times.*

#### Non-Compliance Information

The children in the Preschool room were observed to not be supervised at all times. On arrival to the Preschool room the inspector observed that the staff member had left the Preschool room and was cleaning the bathroom at 14.52pm. The staff member returned to the room when they noticed the inspectors' presence. On the inspectors return to the Preschool room at 14:57pm the staff member was absent from the care room and mopping the bathroom floor. During both instances there was no staff member supervising the children in the Preschool room. This posed a potential safety risk to the children in the Preschool room.

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

##### Corrective and Preventive Action

Corrective Action:

- A staff meeting was held with training on supervision.

The following was discussed: Staff members must call for cover if they need to leave the room. If the staff member needs to assist or check children in the toilet they should be standing in between room and corridor to be able to see children in the room and in the toilet.

Preventive Action:

- Training will be held every 3 months. Cleaning will be scheduled for the end of the day.

##### Supporting documentation submitted

- Evidence of staff meeting minutes and training confirmation have been submitted.

#### Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance under Regulation 27 has been addressed.

## 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, and*

### Non-Compliance Information

- (d)
1. The registered provider did not ensure that the premises was cleaned and maintained in an appropriate condition as evidenced by the following:
- One mechanical ventilation system in the nappy changing area was observed to be covered in dust.
  - The skirting board in the Toddler room was damaged with a section of the skirting board missing.
  - There were three holes in the wall that had peeling paint in the Toddler room.
  - There was no running water at the sink in the Preschool room.

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

#### Corrective and Preventive Action

##### Corrective Actions:

- Vents have been cleaned.
- The layout of the toddler room has been changed to cover holes and missing skirting board until this has been fixed.
- The plumber has been scheduled for Friday 2<sup>nd</sup> of May to fix the water issue.

##### Preventive Actions:

- Regular checks will be carried out in every room.
- The creche will be closed for 1 week in August to accommodate any DIY needed.
- Cleaning vents have been added on the classroom cleaning form.

#### Supporting documentation submitted

- Photographic evidence of the vent has been submitted.
- Evidence of the classroom cleaning form has been submitted.
- Photographic evidence of the new layout of the toddler room has been submitted.
- Evidence of appointment for plumber has been submitted.
- Evidence of service calendar closing dates in August has been submitted.

## Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance under Regulation 29 has been addressed.