

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015FL155				
Name of Service:	Little Apples Ltd				
Address of Service:	Applewood Lane, Broad meadow, Swords, Co. Dublin				
Name of Registered Provider:	Ann Fay				
Service type:	Full Day, Sessional				
Date(s) of Inspection:	19/06/2025				
No of pre-school children:	<table border="1"> <tr> <td>AM</td> <td>78</td> <td>PM</td> <td>37</td> </tr> </table>	AM	78	PM	37
AM	78	PM	37		

Address of the Early Years Inspectorate:	<p>Early Years Inspectorate 180-189 Lakeshore Drive Airside Business Park Swords Co Dublin</p>
Inspection undertaken by:	M. McDonnell and S. McKenna
Title:	Early Years Inspectors

Authority to Inspect

The Tusla Early Years Inspectorate carries out inspections of Early Years Services under Section 58(J) of the Child Care Act 1991 (as inserted by Section 92 of the Child and Family Agency Act 2013).

Conditions if applicable	Not applicable.
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Description of service

Little Apples Ltd is a privately owned service based in a residential and commercial area in Co Dublin. The service is registered to provide sessional, part-time time and full-day care to children aged 0-6 years old. The service is in a two-storey building. There are seven care rooms in total. The children also have access to auxiliary rooms, which provide extra space for play and dining, available on both floors. The Baby Room with a dedicated cot room, Wobbler Room and Junior Preschool Room are based on the ground floor. The Preschool Room and Montessori Rooms 1, 2 and 3 are based on the first floor. There is also a kitchen and sanitary facilities available for children and staff. An outdoor area is located to the rear of the service. There is a registered school-age service in operation on the premises.

Staffing

The registered provider does not work in the service. The registered provider employs 33 staff members in the service, and an owner also works in a supernumerary capacity in administration. There are 22 staff members who work directly with the children. Six staff members are employed to work with the school age children. The auxiliary staff members include a chef, cook, driver and a housekeeper and one of the owners supports in the administration of the service.

Methodology

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

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

The findings on inspection are based on:

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

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

The inspection focused on an examination of compliance under Regulation 9 Management & Recruitment, Regulation 11 Staffing Levels, Regulation 19 Health, Welfare & Development of Child, Regulation 23 Safeguarding Health, Safety and Welfare of Child, Regulation 25 First Aid, Regulation 26 Fire Safety, Regulation 28 Insurance and 29 Premises. However, on inspection additional non-compliance which posed a risk was identified under Regulation 16 Record in relation to pre-school service. These findings are outlined within the relevant regulation within this report.

A sampling process was used to assess compliance under regulation, 19, 23 and 29. As a result, the scope of the inspection included Baby Room, Wobbler Room, Junior Preschool Room, Preschool Room and Montessori 2.

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 owner, 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.

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

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

Compliance Information

(1)(a) The deputy person in charge was on the premises on the inspectors' arrival at the service and remained on site for the inspection. The person in charge arrived during the inspection.

(b) A review of the rosters and discussions with staff members demonstrated that designated person in charge and or the deputy person in charge was in the service at all times during operational hours.

(c) On discussion with staff members and the registered provider, there was a clearly defined person and deputy person in charge to ensure lines of accountability.

(2) Following a review of staff rosters and discussions with management staff the inspectors reviewed 34 staff files which included the registered provider and owner.

(a) The registered provider had two written references available for themselves. Two written and validated references for 32 adults working in the service. There were 64 written and validated references available the staff members. Of these references available, 42 were from a previous employer.

(b) The registered provider had 22 written and validated reference available from a reputable source.

(c) A Garda vetting disclosure was available for 34 adults and demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years.

(d) A review of the documentation concerning the staff members' employment history demonstrated that police vetting was not required for 29 adults. Three adults requiring police vetting had this available for review.

(4) Documentary evidence was available to confirm that 18 adults held an appropriate childcare qualification at Level 5 or above on the National Framework of Qualifications, or a qualification deemed by the Minister to be equivalent. A qualification for 11 staff that were employed in an auxiliary role or to work with the school age children is not required.

Non-Compliance Information

(2) (a)(b) One staff member did not have 2 written and validated references on file.

(d) A review of the documentation concerning the staff members' employment history demonstrated that police vetting was required for two staff members which was not available.

(3) The registered provider had not ensured that all vetting procedures were completed prior to staff members commencing in the service. This was evidenced where 9 staff references for 7 staff were dated after they commenced working in the service.

(4) The inspectors reviewed documentation and spoke to management staff on the day of inspection. Following this the inspectors could not confirm that three adults, who were observed working directly with the children on the day of inspection, held an appropriate childcare qualification at Level 5 or above on the National Framework of Qualifications, or a qualification deemed by the Minister to be equivalent.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(2) (a)(b) Written and validated references were provided for the staff member.

(d) The police vetting required for two staff members was submitted and has been placed in their staff file.

(3) The registered provider stated that in the future all references will be verified prior to any staff member starting and this was informed to all the Management team. A tick list of documents required has been added to the front of staff file document box.

(4) The registered provider stated that one staff member without a qualification will not work with the preschool children and continue to work only with school age children. The service could not confirm another staff member held a level 5 qualification and they no longer worked in the service. However, the service subsequently submitted confirmation that the staff member had achieved a level 5 qualification. Through the corrective action process the inspectorate received the qualification for the third staff member which confirmed they held an appropriate childcare qualification at Level 5 on the National Framework of Qualifications.

Supporting documentation submitted

Copies of police vetting and validated references.

Summary Comment

The actions and evidence submitted by the registered provider in their corrective and preventive action plan has addressed the non-compliances identified on inspection.

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.

Compliance Information

(1) On the day of inspection there was an adequate number of adults working directly with the children attending the pre-school service.

(2) On the inspectors' unannounced arrival, the adult child ratio was observed to be correct and remained so throughout the inspection. The following adult-to-child ratios were observed when the service was operating to maximum capacity on the day of inspection;

- In the Baby room there was one staff member with five children aged between 1 year 3 months to 1 years 11 months old.
- In the Wobbler room there was two staff members with 10 children aged between 2 years and 3 months old to 3 years and 2 months old.

- In Junior Preschool 2 two adults cared for 13 children aged between 3 years 4 months to 3 years 6 months, three of whom attended on a sessional basis and 10 on a full day care basis.
- In the Preschool Room, two adults cared for 16 children aged 4 years 1 month to 5 years 1 month on a sessional basis in the morning and 14 children in the afternoon on a part time, full day care basis.
- In Montessori 1, two adults cared for 13 children aged 4 years 5 months to 5 years on a morning sessional basis.
- In Montessori 2 two adults cared for 11 children aged 4 years 5 months to 5 years 2 months on a morning sessional basis.
- In Montessori 3 two adults cared for 10 children aged 3 years 5 months to 4 years 10 months on a morning sessional basis.

A staff member and the person in charge arrived to provide relief cover. The deputy person in charge was available in a supernumerary capacity.

(8) Following discussions with staff members and a review of sign in records the inspectors could confirm that two staff members were on the premises at all times.

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

Basic Needs

The children's water was accessible to the children within their rooms. During snack and dinner time children in the Baby and Wobbler rooms had bibs on and were encouraged to feed themselves and were given spoons, and staff gave support to the children who required it. Both inspectors observed children being provided with more food after they requested it at dinner time. Staff members were observed changing nappies as required in both the Baby and Wobbler rooms. At these times the staff members engaged in conversations with the children and chatted with them through the process. The children in the Preschool room were observed to independently use the designated toilets across the hallway from the care room. The children in the Montessori 1, 2 and 3 rooms were supervised by staff while these used the sanitary facilities located down the hallway from their care rooms.

Supporting relationships around children

On the inspectors' arrival to the service children were observed completing a range of different activities. For example, there were children from Montessori 1 and 3 rooms and the Wobbler room playing in the garden. Children from Montessori 2 were in a kitchen area making cakes and children in the Junior Preschool room were involved in sensory play. At these times and throughout the inspection the staff members were engaged in children's play and activities. They supported children's positive behaviour management by engaging with the children to be kind and gentle with their peers.

Physical and material environment

Appropriate relaxation areas were available in the rooms, with cosy areas available in all rooms. Following the previous inspection the service had engaged with a quality development service. Management staff and staff members in the rooms spoke positively about the supports offered and the inspectors observed these in place in the service, in particular with the layout and availability of equipment and activities. Equipment was available in designated interest areas, on open shelving at a low level for children to access independently which included a range of books and sensory items. The home corners in each of the care rooms, including the Wobbler, Junior Preschool and Montessori rooms were equipped with a range of material which included food, cutlery, dining items and a dress up clothing with mirrors, hair styling and tables. There were also babies, buggies and clothes available.

The service had a large outdoor area which was divided into sections, with a variety of ground surfacing such as concrete paths, soft fall surface and bark. One of these areas was directly accessible from the Junior Preschool room. In this area there was sand for children to play with various toys and digging equipment. The inspectors observed that children from different rooms could play in this area. The outdoor area children had access to wooden and plastic climbing structures with swings and slides. Wooden and plastic playhouses, rockers, see saws, ride on and push along toys were also available.

Non-Compliance Information

1. The registered provider did not ensure that all children were afforded with sufficient privacy whilst attending the service. The inspector observed a sample of nappy changes. At each of the nappy changes observed one child was waiting whilst their peer had their nappy changed. During one of these changes a child made a comment about their peer's nappy being changed. This did not afford the child having their nappy changed appropriate privacy and dignity whilst the process occurred.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

1. The registered provider stated that they had updated the nappy policy which clearly states that all children get changed one at a time, this is clearly displayed on the Nappy Changing wall and has been shared and signed by all staff members. As a preventive action the registered provider has stated that this is included in induction and regularly at staff meetings.

Supporting documentation submitted

Photograph of updated policy.

Summary Comment

The actions and evidence submitted by the registered provider in their corrective and preventive action plan has addressed the non-compliance identified on inspection.

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;

Non Compliance Information

- (1) The inspectors were given a general roster and that which accounted for any changes to the roster for the week of the inspection 16 to 19 June 2025. These rosters did not demonstrate that the designated person in charge and deputy was in the service at all times during operational hours.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

- (1) The person in charge is to be written on top of all the daily rosters. A laminate is put on the front of main door of the person in charge on that day, as the managers work alternate days staff know who is working but the service stated they understood the importance of having this documented and displayed to all staff, parents and visitors at Little Apples.

Summary Comment

The actions submitted by the registered provider in their corrective and preventive action plan have addressed the non-compliance and will be reviewed on the next inspection.

Part VI - Safety

Regulation 23 - Safeguarding health, safety and welfare of child

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

Compliance Information

General Safety:

- The inspector spoke to staff members in the Baby and Wobbler rooms where there were microwaves available. The staff members who spoke with the inspector discussed how the microwaves were not used for the warming of bottles. They discussed how the bottle warmers available were used which demonstrated that the preventive actions in place from the last inspection were being maintained.
- Appropriate handrails were available on the stairs within the service and from the upper floor care rooms directly to the garden.
- The main kitchen was inaccessible to the children.
- The windows and the doors which accessed the outdoor area had safety markings to prevent a risk of injury.
- Electrical cables and leads were not accessible to the preschool children.
- Cleaning products were stored on high shelves that were not accessible to the children.
- The outdoor area was enclosed with high level walls, a locked gate with key accessible to staff gate and there was a soft safety surface for flooring.

Infection Control:

- Following the previous inspection in February 2024 the inspectors observed handwashing following outdoor play, before dinner and following nappy changes or toileting, demonstrating that the preventive actions from the previous inspection were in place.
- The nappy changing area was clean. This included the nappy changing mats, the underside of these and the changing unit.

Administration of Medication:

- There were medication records available for medication that staff members had stated had been administered in the service. The records available demonstrated that there were two staff members involved in the administration of medication. The documentation available demonstrated that parents had been informed when medication had been administered. Staff were able to discuss appropriate and safe administration of medication practices.

Safe Sleep:

- Children over 2 were provided with low level beds for sleep and children under two were provided with a cot for sleep.
- Staff members supervising the children for sleep conducted 10-minute sleep checks on the children and recorded information on a child's breathing, position and colour.
- The ambient temperature whilst children slept was maintained at 18-22°C for those over 12 months. Staff members were aware of measures required should the temperature increase.

Non-Compliance Information

General Safety:

1. A Garda vetting disclosure available for one adult did not demonstrate compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years.
2. The registered provider did not ensure that the nappy changing procedure sufficiently provided appropriate supervision. The inspector observed the following.
 - On two separate occasions one staff member brought two children in for nappy changing. At this time whilst they settled one child to wait for their nappy to be changed, their peer had climbed onto the nappy changing area which was at waist height.
3. Whilst children were waiting to have their nappy changed, they were observed climbing onto the back of a small seat. The service had a previous non-compliance about children waiting to have their nappies changed in the last inspection in February 2024.
4. A slide in the outdoor area was not anchored to the ground to prevent the risk of toppling or the risk of injury to a child.
5. A section of the low-level wooden fence between the two play sections located to the rear of the outdoor play area had become loose and was leaning to one side, which poses a possible risk of injury to a child.

Infection Control:

6. Inappropriate infection control practices were observed for example.
 - a) Both staff members kept the same apron on whilst changing different children's nappies. One staff member left the nappy changing room with this apron on and went through the care room to the garden. Both staff members were observed changing soiled nappies.
 - b) One staff member was observed wiping different children's nose with a tissue during nappy changing. The gloves worn for changing the soiled nappy were still on at this time.
7. The toilet roll and paper towels in the downstairs nappy changing area and hand towel and toilet rolls in the Montessori sanitary area did not support effective infection control. The toilet rolls and paper towels were not stored in a dispenser therefore, the repeated handling of the toilet roll, and paper hand towels increases the risk of cross contamination. This was a non-compliance on the last two inspections in February 2024 and May 2022. It is acknowledged that during the inspection the toilet rolls, and hand towels were added to the dispensers in the Montessori sanitary area.
8. A large selection of clothing was stored in the Montessori sanitary area, which poses a risk of cross infection.

Administration of Medication:

9. The registered provider did not ensure the safety of children requiring prescribed medication. A child who staff confirmed required prescribed medication and was in attendance on the day of inspection did not have it available in the service. There was also no care plan available to support staff in identifying and managing symptoms. Therefore there was a risk that the staff members did not have written documentation or medication to support the child in the event of an emergency situation.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1. The registered provider was using the new Garda Vetting process for an owner of the service and will be vigilant in the future of allowing the time to process the application.
- 2&3 The registered provider stated that the nappy changing policy had been changed to one staff member and one child and staff have signed the updated policy. The step and seat have been removed, and they will not be permitted in the nappy changing area.
4. The slide was removed from the garden area.
5. The fence was replaced, and the outdoor risk assessment includes to specifically check the fence to avoid it occurring again.

Infection Control:

6. The nappy changing policy has been updated which staff have signed. Discussions were had with staff on the changing of gloves and removal of aprons. The use of aprons and changing these and gloves will be discussed at regular team meetings.
7. The registered provider met with the cleaners in relation to this matter to ensure that all towels and toilet rolls are adequately installed to meet all safety standards. Staff have also been shown how to install both hand towels and toilet rolls should they need to do so throughout the course of a day before the cleaner arrives.
8. The clothes were removed for the sanitary area and staff were informed clothes should not be stored there.

Administration of Medication:

9. A care plan was immediately written for this child in relation to their care. This has been shared with the parents of the child and the staff members. This is now on display in the care room and also in the nappy changing room. This child's medication is now stored in a sealed labelled box in the child's room and all staff are fully aware of it.

Supporting documentation submitted

General Safety:

Garda Vetting disclosure confirmed as complete November 2025

Nappy changing policy

Infection Control:

Nappy changing policy

Photograph of fencing, toilet roll and hand towel dispensers

Administration of Medication:

Care plan submitted

Summary Comment

The actions and evidence submitted by the registered provider has addressed the non-compliances identified on inspection in relation to Regulation 23.

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) The registered provider ensured that a person who held in-date First Aid Response (FAR) training was at all times immediately available to the children attending the pre-school service. Two staff members held in-date FAR training certificates.

Non-Compliance Information

(2) (a) (b)

The first aid equipment available in the service did not provide adequate resources in the event of a first aid emergency. A review of the two first aid boxes for the service demonstrated that there were insufficient resources for the size of the service. Some of the resources available such dressings and wipes were out of date.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(2)(a)(b) The service has updated the first aid kits and have assigned the role of checking the first aid boxes for supplies to the Deputy Manager and they will be checked and signed for on a monthly basis.

Supporting documentation submitted

Photographs of new products and checklist.

Summary Comment

The actions and evidence submitted by the registered provider in their preventive and corrective action plan has addressed the non-compliances observed on inspection.

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 the most recent fire drill on 26/05/2025 was available for review. The service had maintained a record of monthly fire drills.
- (1)(b) The registered provider had records to demonstrate that the smoke alarms were last serviced on 15 April 2025.
- (4) The procedures to be followed in the event of a fire were displayed in the rooms sampled on inspection.

Non-Compliance Information

- (1)(b) The registered provider did not ensure that annual services were carried out on the fire extinguishers. Records available for review on the day of inspection for the fire extinguishers were dated September 2022.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

- (1)(b) The registered provider submitted a maintenance certificate for the fire extinguishers for June 2025. The registered provider and maintenance company have a system in place as a reminder of maintenance requirements.

Supporting documentation submitted

Fire extinguisher maintenance certificate.

Summary Comment

The actions and evidence submitted by the registered provider has addressed the non-compliance identified on inspection.

Part VI - Safety

Regulation 28 - Insurance

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

Compliance Information

The registered provider ensured that the service was adequately insured for 120 children at any one time attending for full-day care. The policy showed that the service was insured from 28 March 2025 to 27 March 2026.

Part VII - Premises and Space Requirements

Regulation 29 - Premises

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

- (b) safe and secure,*
- (c) kept adequately lit, heated and ventilated*
- (d) cleaned, maintained and repaired, as required,*

Compliance Information

(b) The service had a secure entrance to the service with a buzzer and keypad system in place. This prevented any unauthorised access to the service and exit from the service by children.

(c) Following the previous inspection in February 2024 the inspector observed appropriate mechanical ventilation in the Nappy changing area. Ventilation and heating were observed to be appropriate in the other areas of the service. Lighting could be adjusted as required, for example the sleep room was appropriately dimmed for children's sleep.

Non-Compliance Information

(d) The registered providers had not ensured that rooms occupied by the children were appropriately cleaned and maintained effectively.

1. The inside glass pane on the window in the Montessori sanitary area was cracked and posed a risk of injury to a child.
2. The sink areas in the Montessori sanitary area had accumulations of dust present, and two trays were placed under both sinks which appeared to catch possible leaks, which poses a risk of harm to a child.

3. There was no cleaning records maintained or available for the Nappy changing, Preschool and Montessori sanitary areas.
4. The skirting board around the cosy corner area in the Baby room was not attached to the wall.
5. A small table for children's play available in the Wobbler room had exposed chipboards making the surface difficult to clean effectively.
6. A small area on the internal stairs was damaged and made the surface difficult to clean effectively.
7. A corner of the wall in the overflow room located off the Junior Preschool room had chipped paint and plaster, which exposed a metal corner edging posing a risk of injury to a child.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(d) The registered provider submitted the following corrective and preventive actions in relation to the maintenance and cleaning.

1. The window glass was replaced, and they will ensure that such cracks etc are reported and replaced as soon as possible.
2. Both containers under the sinks were removed. The Montessori sanitary area was deep cleaned and was discussed with the cleaners. A deep cleaning in these will be added to cleaning records.
3. Cleaning sheets have been updated and implemented. They will be signed by cleaners daily and checks completed by the manager.
4. The skirting board was repaired and discussed with staff the importance of reporting any hazards.
5. A new table was purchased discussed with staff the importance of reporting any repairs.
6. The step has been repaired and checking the stairs has been added to the risk assessment.
7. The area has been repaired, and management will check this area as it is used by different groups.

Supporting documentation submitted

Photograph of the window, sink area, skirting board, new table, repaired step, repaired corner.

Summary Comment

The actions and evidence submitted by the registered provider has addressed the non-compliances identified on inspection.