

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015FL169			
Name of Service:	Little Harvard Childcare			
Address of Service:	Unit 7, Rosemount Business Park, Blanchardstown, Dublin 15.			
Eircode:	D11 NN12			
Name of Registered Provider:	James Hargrave			
Service type:	Full Day, Part Time, Sessional			
Date of Inspection:	08/01/2026			
No of pre-school children:	AM	64	PM	51
Address of the Early Years Inspectorate:	Early Years Inspectorate, Floor 7 Brunel Building, Heuston South Quarter, St John's Road West, Kilmainham, Dublin 8 D08 X01F			
Inspection undertaken by:	E. Griffin and L.A Webster			
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.			

Description of service

Little Havard Childcare is a privately operated full day childcare service located in an industrial area in North Dublin. The service is one of 22 services operated by the registered provider. The service operates Monday to Friday from 7:00am to 6:30pm and is registered to offer care to children aged 0 to 6 years old on a full time, part time and sessional basis. At the time of the inspection, the service did not have children under 1 years old registered to attend. The service participates in the Early Childhood Care and Education (ECCE) scheme and operates a morning session from 09:00am to 12:00pm. The service also operates a registered school aged childcare service from a building located to the side of the premises.

The service is based in a two-storey converted industrial unit and is comprised of seven care rooms. On the ground floor there is a kitchen and four care rooms: Wobbler room 1 catering for children aged 1-2 years, Wobbler room 2 catering for children aged 1 ½ to 2 years, Toddler room 1 catering for children aged 2-3 years and Toddler 2 room catering for children aged 2-3 years. On the first floor there is an office and three care rooms: Preschool room catering for children aged 2 years 8 months to 5 years, Junior Montessori room catering for children aged 3-4 years and Senior Montessori room catering for children aged 3 ½-5 years. An enclosed outdoor play area is available to the side of the premises.

Staffing

The registered provider does not work in the service and employs 42 adults. Adults employed include a general manager, a regional manager, a person in charge, a deputy person in charge, and 36 staff who work directly with the children and two auxiliary staff: a cook and a housekeeper.

On the day of inspection, the deputy person in charge and 13 adults working directly with the children including two adults who were employed under the access and inclusion model (AIM) and one ancillary staff for cooking was present on the arrival of the inspection team. The registered provider was not present on the day of the inspection. The person in charge, the regional manager, two-relief staff and one ancillary staff for housekeeping arrived shortly after the inspection began and remained on the premises for the majority of the inspection offering support in the rooms where required. Additionally, the general manager arrived during the afternoon and remained on site to help assist the inspection process.

Methodology

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

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

The findings on inspection are based on:

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

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

A sampling process was used to assess compliance under Regulation 16(k) Record in Relation to Pre-School Service, Regulation 19 Health, Welfare and Development of Child (1)(a) and Regulation 23 Safeguarding Health, Safety and Welfare of Child.

As a result, the scope of the inspection the Wobbler 1, Wobbler 2, Toddler 1, Toddler 2 and the Senior Montessori room.

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

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

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

Additional Information

08 January 2026

Two immediate action notices were issued to the registered provider in relation to two significant concerns identified under Regulation 23, Safeguarding the Health, Welfare and Development of Child. The service took immediate action which mitigated one of these concerns while the inspectors were present on inspection and a response which adequately mitigated the second concern was received on the 09 January 2026. Further details are available under general safety and fire safety section under Regulation 23.

Acknowledgments

The inspectors wish to acknowledge the cooperation of the general manager, regional manager, person in charge, 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.

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

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

Compliance Information

- (1)
- (a) The service had a designated person in charge and named person to deputise as required.
 - (b) A review of the roster showed that there is a designated person in charge rostered to be on the premises during the service operational hours.
 - (c) There was a clear management structure in place, and staff reported being aware of this.
- (2) A review of paperwork and conversation with the person in charge showed that ten new adults had been employed to work in the service since the last inspection on 4 April 2024 including nine childcare staff and one

ancillary staff. The staff files of these adults were reviewed along with the files of one adult whose file had not been reviewed on the last inspection and two-relief staff who were present on the day. In addition, Garda Vetting disclosures for 17 adults whose files had been reviewed on the last inspection was reviewed.

- (a) There were 21 written and validated references available from past employers.
 - (b) There were 5 written references available from a source other than a past employer.
 - (c) Garda vetting disclosures had been obtained for the 30 adults. 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) Documentary evidence showed that eight adults had lived in a state other than Ireland for more than six consecutive months as an adult. International police vetting from the relevant countries was available for seven staff members.
- (4) Evidence was available to show that the 12 adults whose files were reviewed and worked directly with the children held at least a major award in Early childhood Care and Education at Level 5 on the National Qualifications Framework, or a qualification deemed by the Minister to be equivalent.

Non-Compliance Information

- (2) (d) Documentary evidence and discussion with a staff member showed that the staff member had lived in two different jurisdictions other than Ireland for more than six months as an adult. International police vetting was not available for one of the two jurisdictions. It is acknowledged that the staff member has made attempts to contact previous employers and has started the process to be internationally re-vetted.
- (3) Evidence showed that the curriculum vitae of one staff member did not provide full and accurate information. A full and accurate record is required to ensure the suitability of staff members.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

- (2) (d) Immediate action has been taken, and an application for the outstanding international police vetting has now been submitted. The service is currently awaiting the return of this vetting. Once received, the vetting documentation will be placed on the staff member's file in accordance with regulatory requirements. Local management will ensure that all police clearance is in place prior to staff commencing work with Little Harvard. Senior Management will conduct audits to ensure compliance with all aspects of Regulation 9.

(3) The staff member's curriculum vitae has now been updated to include all relevant and accurate information, including full employment history and any required details. The updated CV is now held on the staff member's file and will be maintained in line with regulatory requirements to ensure all staff records remain complete and up to date. Local Management will ensure that all staff members have a comprehensive curriculum vitae prior to their starting with Little Harvard to ensure compliance with regulation 9 and all relevant regulatory requirements.

Supporting documentation submitted

- (2) (d) Documentary evidence of application for police vetting.
- (3) Documentary evidence of updated curriculum vitae.

Summary Comment

The corrective and preventative actions provided by the registered provider is sufficient to address the non-compliance under 9(3). The registered provider has attempted to address the non-compliance under Regulation 9(2)(d) however as police vetting has not been received this remains outstanding. The registered provider is required to submit the police vetting to the inspectorate when it is received.

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) There was an adequate number of adults working directly with the children attending the service. On the morning of the inspection there were 13 adults working directly with 64 children aged from 1 to 5 years. During the afternoon of the inspection there were 11 adults working directly with 51 children aged from 1-5 years of age. In addition, the regional manager, the person in charge and two relief staff were available to provide support to the care rooms when required during the inspection.
- (2) The adult child ratios were correct when the inspectors arrived unannounced to the service and throughout the inspection. Staff were aware of the required ratios for the age range of the children.

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.

(3) A record referred to in paragraph (1) shall be open to inspection on the premises, and the documents and records referred to in paragraph (2)(a) shall be open to inspection whether on the premises or elsewhere, by an authorised person..

Compliance Information

- (1)
- (i) The registered provider ensured that there was a staff weekly roster which included staff names, dates and times of work.
 - (k) A sample of 30 accident and incident records were reviewed; nineteen of which included all the required information.
- (3) All records requested by the inspectors were available for review.

Non-Compliance Information

- (1)
- (k) Out of a sample of 30 accident and incident records, eleven of these records did not include all the required information. This was evidenced by missing information as detailed below.
 - On one of the records there was no name or signature of the staff member who completed the form.
 - On two of these records there was no parent/guardian signature or date.
 - On seven of these records there was no date beside parent/guardian signature.
 - On seven of these records there was no manager's signature.

It is important that parents/guardians are informed on the same day of an accident/incident, so that they can appropriately monitor their child. Similar non-compliances were observed on the previous inspections which showed that the preventive actions provided by the registered provider has not been sustained.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

- (1) (k) Management has implemented additional control measures, as outlined below, to ensure ongoing compliance. Staff have received further training on the accurate completion of all accident and incident

documentation. Local Management will now formally review and sign all accident and incident reports at the time of occurrence, prior to parent/guardian signature. In addition, monthly audits of accident and incident records will be carried out by management to ensure all documentation is complete, signed, and maintained correctly. These measures have been introduced to prevent any recurrence and to ensure consistent compliance going forward.

Supporting documentation submitted

- No supporting documentation submitted

Summary Comment

The corrective and preventative actions provided by the registered provider are sufficient to address the non-compliances under Regulation 16. This will be reviewed on the next inspection.

Part V - Care of Child in Pre-school Service

Regulation 19 - Health, welfare and development of child

(1) A registered provider shall, in providing a pre-school service, ensure that-

(a) each child's learning, development and well-being is facilitated within the daily life of the pre-school service through the provision of the appropriate activities, interaction, materials and equipment, having regard to the age and stage of development of the child, and

Compliance Information

(1) (a) The following activities, interactions, materials and equipment was observed to support children's learning and development:

Basic Needs:

- Children were offered toast and cereals for breakfast between 8am to 9am. In the senior Montessori room children brought morning snack from home and the service provided a selection of chopped up fruit for the other care rooms. Different dietary requirements were catered for if required and additional food was observed to be available, for example, dinner consisted of chili con carne served with rice and there was an alternative vegetarian rice dish available if required and extra portions were observed to be available.
- A water station was available in the care rooms to ensure the children had water for drinking.
- Cosy areas were available in the care rooms to provide children a comfortable place to rest or engage in quiet activities.

- Children’s artwork, photographs, birthday charts and family walls were displayed throughout the care rooms and service. Additionally, the service kept an individually labelled journal of each child which contained photographs of fun activities and artwork. This supported the children’s sense of identity and promoted links between home and the service.
- Children were observed to spend time in the outdoor play area. This supported their social, emotional and gross motor development.

Supporting Relationships:

- Children were observed to have the freedom to move freely in their care room and independently choose their activities and play experiences.
- Mealtimes were observed to be a sociable and pleasant event, with staff members sitting alongside the children, engaging in meaningful conversations and offering support and encouragement to the children.
- Staff members engaged in positive interactions with the children. For example, staff in the Wobbler 1 and Wobbler 2 room were observed to interact warmly and kindly with children who were settling in. When children appeared upset, the staff were observed to use gentle touch and tone of voice to support the children during this transition. Staff discussed how they support children to transition from home by offering a settling-in period.
- Language used by staff was observed to be kind and supportive during nappy changing procedures. For example, during the five nappy changing procedures observed the children were spoken to in a reassuring and friendly manner throughout the nappy changing procedure.
- Staff members were observed to tend to children’s individual personal needs. For example, staff were observed promptly assisting with hand washing and nasal discharge when required.
- Children’s sleep needs were observed to be met. Children who showed signs of tiredness were given the opportunity to sleep when they required.
- Parents/guardians were given information on their child’s food intake, toileting, sleep and activities via an electronic communication application. Staff were observed to chat with parents at drop off and collection times.

Equipment and Materials:

- Child sized tables and chairs were available to the children, providing a comfortable area to eat snacks and take part in tabletop activities.

- The care rooms in the service were designed with the age and stage of development having been taken into consideration and equipment and materials were visible and accessible enabling the children to independently access their choice of activity. For example, in the Wobbler 1 and Wobbler 2 room there was adequate space for the children to explore their environment which included sensory equipment and cause and effect toys. This promoted joint attention, play skills and exploration. In both the Toddler 1 room and the Toddler 2 room there was adequate space for the children to explore their environment which included a variety of materials and equipment which facilitated a range of play experiences including creative, imaginative and language play and promoted exploration and curiosity. Staff discussed how they move the equipment and materials around in the room regularly to provide children with spontaneous play opportunities.

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 the unannounced arrival at the service by the inspectors, the entrance door leading into the premises was appropriately secured to prevent the children from exiting unsupervised and to restrict unauthorised persons from gaining access to the premises throughout the inspection.
- The external outdoor play areas were securely fenced and gated reducing the risk of unauthorised access. Children who were brought out to the outdoor play areas from indoors were observed to be supervised.
- There were no flexes or cables observed that were accessible to the children.
- Blind cords were secured safely out of reach of the children.
- Toys and equipment used by the children were observed to be well maintained and in a good state of repair.

Infection Control:

- The sanitary accommodation was equipped with warm running water, liquid soap, and hand drying facilities. Children were observed to be familiar with washing their hands before snack time, after outdoor play and after toileting.

- Foot operated pedal bins were observed to be in good working order and used by children and staff for the appropriate disposal of waste in the care rooms and sanitary facilities.
- The changing mat in the nappy area was observed to be clean and in good condition.
- Soothers were stored in individually labelled boxes.
- In the Senior Montessori room perishable goods such as cheese and yogurt were observed to be stored in a fridge reducing the risk of bacteria multiplying.
- An ambient temperature of 18-22°C was maintained throughout the care rooms, and the windows were open to allow fresh circulation of air.
- Individual bed linen and blankets were used for sleeping children and were stored in children's own individually labelled bags.
- The premises was observed to be clean and hygienic. There were cleaning schedules on the wall of the care rooms and sanitary accommodation.

Administration of Medication:

- In discussion with staff, it was evident that they were aware of medical care plans for children and where the emergency medication is stored. In addition to this, staff were aware of the procedures to take in relation to potential anaphylaxis and the administering of emergency treatment if the event occurred. Staff discussed how snacks that are brought in from home are thoroughly checked for potential hazards such as nuts. In addition, the service operates a nut free zone and children who are lactose intolerant were offered oat milk as an alternative.
- Medication was clearly labelled and was stored safely in its original box in a place that was inaccessible to the children.

Safe Sleep:

- Heavy outer clothing was removed from the children before sleep time.
- Children under two years of age were provided with a cot for sleeping.
- Children over two years of age were provided with sleep mats for sleeping.
- An ambient temperature of 18-22°C was maintained for sleeping children over one years of age.
- Children were monitored while sleeping at intervals of ten minutes or less and staff recorded the breathing, position, and colour of each child at each child.

Non-Compliance Information

General Safety:

1. The kitchen door which is adjacent to the wobbler 2 care room was observed to be left fully open and this room was unattended between 10 am to 10.10 am. During this time the inspector observed two large cooking pots upon the working oven, several drawers which provided easy access to sharp utensils, an unlocked press with cleaning agents, and one large object laid upon a small plastic container on a countertop in the centre of the room. This posed a significant safety risk to the Wobbler 2 children aged 1 1/2 to 2 years as the wobbler 2 door required little force to be pushed open and remained unsecured and accessible to children in this room throughout the morning. An immediate action notice was issued on inspection. It is acknowledged that the service took immediate action to address the non-compliance when the inspector highlighted the risk to the regional manager. A child safety gate was installed within two hours which mitigated this risk and a written response to the immediate action notice was received from the general manager on 9 January 2026 with reassurances that the safety gate will remain closed to restrict children accessing the kitchen area.
2. The door to the cleaning room storage area located on the corridor between wobbler 1 and wobbler 2 room was left open at 9.28am and unsecured with the safety latch not in place. This room contained cleaning agents at an accessible level to children, and the door was observed to be left unsecured until 9.58am. This posed a potential risk of safety.
3. Staff were not aware of the essential details of two new children who were transitioning into the service from home. There was evidence to show that the children had begun in the service on the 5 January 2026 and were in the process of a settling in period. The inspector was unable to attain the following information in the care room on the morning of inspection.
 - The child's surname.
 - The child's date of birth.
 - If the child had any allergies or intolerances.
 - If the child was receiving any form of medication.
 - Record of their attendance on the electronic platform which is used to record children on arrival and collection times.

It is acknowledged that the person in charge was able to provide the children registration records and provide evidence that the children were marked in attendance by 12pm. However, it is important that staff are aware of this essential information from the start date of children. This posed a risk of safety.

4. One of the 30 garda vetting disclosures reviewed was not dated within the 3 years in adherence with early years inspectorate regulatory notice requiring services to renew staff garda vetting every 3 years. It is acknowledged that this garda vetting was applied for on 7 January 2026. However, documentary evidence showed this staff members garda vetting was three months out of date which posed a safeguarding risk.

Fire Safety:

5. The service did not ensure safe evacuation routes in two rooms during sleep time. Evidenced by the following.
- In the cot room used by the Wobbler 1 and Wobbler 2 children where 8 children aged between 1-2 years were observed to be sleeping. Movement around the room was hindered as cots were positioned less than 50 cm apart. Additionally, the emergency exit route through Wobbler 2 room which is used as the evacuation route for the cot room was obstructed by various play items. Outside, a sensory table was positioned in the area in front of a gate which leads to the fire assembly point.
 - In the Toddler 2 room there were 21 children aged between 2 ½ to 3 years on sleep mats which were not positioned 50 cm apart. Additionally, two of the sleep mats were positioned in front of the emergency exit door.

Similar non-compliances were observed on the previous inspections which showed that the preventive actions provided by the registered provider has not been sustained. Cots and sleep mats need to be positioned 50cm apart to ensure staff have clear space to move around the room. Additionally, emergency exits, walkways and exit routes need to be kept clear to ensure the safe evacuation of children and staff in the event of an emergency. An immediate action notice was issued on site, and a response was received by the general manager on 9 January 2026 which mitigated these risks.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1. A child safety gate was installed within two hours to prevent children accessing the kitchen area and to mitigate the identified risk. The service confirms that this gate will remain securely closed at all times to ensure children cannot access the kitchen. Management will continue to monitor this control measure to ensure ongoing child safety and compliance.
2. The matter was addressed immediately during the inspection, and the safety lock was secured on the cleaning storage door without delay. All cleaning agents are stored at a height inaccessible to children, and clear procedures have been reinforced with staff to ensure the storage area remains locked at all times. Local

Management will conduct regular checks to ensure continued compliance and to eliminate any potential risk to children.

3. The two children in question had only attended the facility for 2 full days prior to the inspection. The manager had introduced the children to the staff and had full details of the children in her possession. The information had not been uploaded to the electronic system in place as of the date of the inspection, this was as a result of a system error. Local Management will oversee all new registrations to ensure that staff are fully informed of essential information from the child's first day of attendance. Ongoing monitoring will be carried out to ensure consistent compliance and to safeguard children's safety.
4. The garda vetting of the staff in question was applied for prior to the inspection. Since the inspection, the garda vetting has been obtained and placed on the staff file. Management will continue to monitor all vetting renewal dates to ensure applications are submitted in advance of expiry and ongoing compliance is maintained.

Fire Safety:

5. Two cots have been removed from the room thus allowing a minimum a 50 cm between each cot. The items obstructing the exit route have been removed and the area is now clear. In future, the children attending toddler room 1 & 2 will remain during sleep time in their own rooms and will not be combined together as was the case during the course of your visit. This will ensure that a space of a minimum of 50 cm is available between each sleep mat. No items will be allowed to obstruct exit routes going forward. Senior management recognises the importance of maintaining appropriate spacing to ensure children's safety at all times. Enhanced governance and oversight measures have now been implemented to ensure this practice does not reoccur. Management will monitor sleep room arrangements on an ongoing basis to maintain full compliance with safe sleep guidance and regulatory requirements

Supporting documentation submitted

General Safety:

1. Photographic evidence of new child safety gate and sign on the door to remind staff to keep gate closed.
2. Photographic evidence door lock secured and sign on door to remind staff to keep door closed.
3. No documentary evidence submitted.
4. Documentary evidence of garda vetting disclosure for staff member.

Fire Safety:

5. Photographic evidence of the sleep area allowing for 50cm apart and fire emergency exits unobstructed.

Summary Comment

The corrective and preventative actions provided by the registered provider are sufficient to address the non-compliances under Regulation 23.

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 firefighting 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) The records available demonstrated that fire drills are held monthly within the service and the service conducted a fire drill on the 16 December 2025.
 - (b) A record was available detailing the number, type and maintenance of the firefighting equipment and smoke alarm systems in the premises.
 - Records demonstrate that the firefighting equipment had been serviced annually, with the last service taking place on the 7 May 2025.
 - Records demonstrate that the smoke alarms have been serviced on a quarterly basis with the last service taking place on the 7 August 2025.
- (4) A visual notice of the procedures to be followed in the event of a fire was displayed around the care rooms and staff were knowledgeable of emergency evacuation practices.

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 pre-school service was adequately insured, with an expiry date of 27 March 2026.