

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015FL180
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Name of Service:	Sutton Little People
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Address of Service:	33A Baldoyle Road, Sutton, Dublin 13.
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Name of Registered Provider:	Brendan O'Brien
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Service type:	Full Day, Part Time, Sessional
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Date of Inspection:	06/01/2026
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No of pre-school children:	AM	30	PM	34
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Address of the Early Years Inspectorate:	Early Years Inspectorate Floor 7 Brunel Building, Heuston South Quarter, St. John's Roads West, Kilmainham, Dublin 8 D08X01F
Inspection undertaken by:	L.A Webster and E. Griffin
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

Sutton Little People is a privately operated childcare service based in a purposefully adapted residential premises within North Dublin. The service provides full day care to children aged 0-6 years from 7:30-6pm, Monday-Friday and participates in the Early Childhood Care and Education (ECCE) scheme. There are five care rooms within the service which are the Wobbler 1 room which caters for children aged 1-1.5years; Wobbler 2 room which caters for children aged 18-24months; Toddler room which caters for 2-3 years; Junior Montessori room which caters for 3.5-4 years; and the Senior Montessori that caters for children aged 3 years 8 months-4 years. Additionally, the service has an office, kitchen, staffing and sanitary facilities. There is an enclosed outdoor area towards the rear of the service.

Staffing

The registered provider employs nine staff, all of whom were present on the day of inspection. This included the person in charge, 7 childcare staff and one ancillary staff member which is the cook. The registered provider does not work within the service but attended the service for the feedback meeting.

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 15 Record of a Pre-School Child, Regulation 19 Health Welfare and Development of Child, and Regulation 23 Safeguarding the Health, Safety and Welfare of Child. As a result, the scope of the inspection included Wobbler room 1, Wobbler room 2, Junior Montessori and Senior Montessori rooms.

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

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

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

Additional Information

Two immediate action notices were issued to the registered provider on 06 January 2026 in relation to two significant concerns identified under Regulation 23, Safeguarding the Health, Welfare and Development of Child. Responses which adequately mitigated these concerns were received on the 07 January 2026. Further details are available under general safety and administration of medication sections in Regulation 23.

Acknowledgments

The inspectors wish to acknowledge the cooperation of the registered provider, 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 a named person to deputise as required.
 - (b) A review of the roster evidenced that either the person in charge or the deputy person in charge were rostered to be present during the operational hours of the service.
 - (c) There was a clear management structure in place, and this was further evidenced throughout discussion with staff.

- (2) A review of paperwork and discussion with the person in charge showed that there are currently 9 staff employed by the registered provider to work within the service. The files of 2 new staff who had commenced employment following the previous inspection on the 12 February 2025 were reviewed. Garda vetting disclosures were reviewed for all staff that are currently employed within the service.
- (a) There were 3 written and validated references available from past employers.
 - (c) Garda vetting disclosures had been obtained for all 9 adults, demonstrating compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years.
 - (d) Police vetting was available for 2 adults who had lived in a country other than Ireland for a period of six months or more as an adult.
- (4) Evidence was available to show that 2 adults who worked directly with the children held a major award in Early Childhood Care and Education at a minimum of level 5 on the National Framework of Qualifications, or a qualification that is deemed of equivalence by the minister

Non-Compliance Information

- (2)
- (a) One written reference from a previous employer had not been verified by the service.
- (3) There was evidence that all the procedures specified above under 9(2) had not been carried out prior to the commencement of employment of two adults in the service. Evidenced by the following:
- Discussion with staff and documentary evidence available indicated that one adult had commenced employment within the service eleven days prior to receipt of Garda vetting disclosure.
 - Discussion with management showed that a second adult did not have either of their two references validated prior to the commencement of employment in the service.

The procedures specified under 9 (2) must be carried out in advance of commencement of any adults in the service. This posed a safeguarding risk.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

- (2)
- (a) The outstanding reference was verified with the previous employer, and the verification was documented and placed on the staff member's personnel file. The recruitment procedure has been reinforced to ensure that all written references are verified and documented prior to commencement of employment. A pre-

employment checklist is now used to confirm completion of all required checks, and management will routinely review personnel files to ensure ongoing compliance.

- (3) The recruitment and onboarding procedure have been reviewed and strengthened to ensure full compliance with Regulation 9(2) prior to commencement of employment. A pre-employment compliance checklist has been implemented and must be completed and signed off by management before any staff member begins work.

Supporting documentation submitted

Photographic and documentary evidence submitted.

Summary Comment

The corrective and preventative actions provided by the registered provider are sufficient to address the non-compliances identified under Regulation 9.

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) On the day of inspection, there were 30 children being cared for by 7 adults in the morning and 34 children being cared for by 7 adults in the afternoon. Additionally, the person in charge was available to provide support in the care rooms as needed.

(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 within the rooms.

Part IV – Information and Records

Regulation 15 – Record of pre-school child

(1) A registered provider of a pre-school service other than a pre-school service in a drop-in centre or a temporary pre-school service shall ensure that a record in writing is kept in respect of each pre-school child attending the service containing the following particulars:

- (a) the name and date of birth of the child;*
- (b) the date on which the child first attended the service;*
- (c) the date on which the child ceased to attend the service;*
- (d) the name and address of a parent or guardian of the child and a telephone number where that parent or guardian or a relative or friend of the child can be contacted during the hours of operation of the service;*
- (e) authorisation for the collection of the child;*
- (f) details of any illness, disability, allergy or special need of the child, together with all the information relevant to the provision of special care or attention;*
- (g) the name and telephone number of the child's registered medical practitioner;*
- (h) record of immunisations, if any, received by the child;*
- (i) written parental consent for appropriate medical treatment of the child in the event of an emergency.*

(3) A record in writing referred to in paragraph (1) or (2) shall be open to inspection on the premises by-

- (c) an authorised person.*

Compliance Information

(1) A sample of twelve children's registration records were reviewed as part of the inspection. The registered provider ensured a record (1) (a), (b), (d), (e), (f), (g) (h) and (i) was maintained for ten children's registrations. In addition, a space was available on these record forms to record the date the child ceased the service as required under (c).

(3) (c) All children's registration records were available for inspection.

Non-Compliance Information

(1) The registered provider did not ensure the following information was recorded on two records.

- On one record, the name and telephone number of the child's registered medical practitioner (g) was not included.

- On the second record, record of immunisations, if any, received by the child (h); and written parental consent for appropriate medical treatment of the child in the event of an emergency (i) were not included.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(1) The missing information was obtained and added to the affected children's records. All updated records were reviewed to confirm completeness and accuracy. The enrolment and record-keeping process has been reviewed. A mandatory enrolment checklist is now used to verify that all required information is collected and recorded before a child commences care. Staff have been reminded of documentation requirements and records will be routinely audited to ensure ongoing compliance.

Supporting documentation submitted

Documentary evidence submitted.

Summary Comment

The corrective and preventative actions provided by the registered provider are sufficient to address the non-compliances identified under Regulation 15.

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-

(b) appropriate and suitable care practices are in place in the pre-school service, having regard to the number of children attending the service and the nature of their needs.

Compliance Information

(1) (b) The following care practices were observed to support children's learning and development:

- At morning snack time children were observed to be offered a selection of fruit sliced up into small pieces. The service also provided a hot meal option for children which was prepared on site, for example, at dinnertime chili con carne was served to the children. An alternative vegetarian dish was available if required, and extra food was available if required. Water was available in each care room for the children to drink.
- There were cosy areas with a soft mat, cushions and books for rest and relaxation.
- The presence of a 'Family Wall' display, a 'Birthday Time' display and the children's artwork was displayed throughout the care rooms in the service this demonstrated a sense of identity for the children.
- Language used by staff was observed to be kind and supportive during nappy changing procedures observed the children were spoken to in a reassuring and friendly manner throughout the nappy changing procedure.

- The staff were observed to interact continuously with the children. Kind tones, eye-contact and positive language was used with the children. For example, during tabletop activity time and mealtimes the staff sat beside the children and offered encouragement and support when required.
- The children showed a strong familiarity of the daily routines and activities within their rooms.
- Child sized tables and chairs were available to the children, providing a comfortable area to eat snacks and take part in tabletop activities.
- The transition from pre-mealtime to sleep time was carried out in a timely and calm manner. Children appeared familiar with this transition.

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 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.
- The outdoor play area was securely walled and gated reducing the risk of children from exiting unsupervised and to restrict unauthorised persons from gaining access to the premises.
- The kitchen was not accessible to the children and the door remained closed throughout the inspection.
- There were no flexes or cables observed that were accessible to the children.
- Toys and equipment used by the children were observed to be well maintained and in a good state of repair.

Infection Control:

- Foot pedal operated bins were available in the care rooms and sanitary areas to allow hygienic disposal of waste materials.
- The nappy changing mat was observed to be in good condition.
- Children and staff showed familiarity with routine handwashing, and this was observed before snack time, dinner time, and nappy changing.
- Staff were observed to support gentle nasal cleansing of children in a prompt manner.
- Liquid hand soap and hygienically dispensed wall mounted paper towels were available for appropriate hand washing.
- Children had their own individually labelled water bottles.

Administration of Medication:

- Medication stored was observed to be within their expiry dates and stored safely out of the reach to the children.

Safe Sleep:

- Staff were noted to be aware of safe sleep practices and children were observed to be physically checked while sleeping every 10 minutes. Staff ensured to document this through paper format highlighting the children's breathing, position, and colour of each child.
- An ambient temperature of 18-22°C was maintained for sleeping children over one years of age.
- Outer clothing was removed from the children before sleep time.
- Children under two years of aged were provided with a cot for sleeping.

Fire Safety:

- All the fire emergency exit doors were clear from obstruction and the children's attendance book was monitored to ensure staff knew how many children were present in the care room. This ensured a safe evacuation of the children in the event of an emergency evacuation.

Non-Compliance Information

General Safety:

1. The temperatures of the services radiators were recorded above 50°C and this posed a risk of scalding evidenced by the following:
 - The radiator temperature of the Wobbler 2 room where five children aged 18-24 months were present, was recorded at 55.3°C at 09:38am. This posed a significant risk to children who may access the radiator through the wooden framing.
 - A radiator under the window in the Senior Montessori room was accessible to ten children aged 4-5 years who were present, was recorded at 58°C at 10:58am. This posed a significant risk to children who may access the radiator through the gaps in the slants of the wooden radiator cover frame.
 - A second radiator within the Senior Montessori room was recorded between 58.9°C and 67.5°C. this posed a significant risk to children who may access the radiator through a broken part of the radiator cover.

An Immediate action notice was issued on the day of inspection in relation to the radiator temperatures in the Wobbler 2 and the Senior Montessori room. A response which mitigated this non-compliance was received on 07 January 2026.

2. A blind cord on the entrance door to the Wobbler 2 cot sleep room was observed to be not secured. This posed a potential risk of injury as it was positioned in a corridor where the children from the Senior Montessori room accessed the children's sanitary area. It is acknowledged that the staff member stood at the door to ensure the children accessed the sanitary area safely.
3. Cleaning agents were not stored safely out of the reach to the children, the door of the adult sanitary room where two cleaning agents were observed to be stored next to the toilet at an accessible height was not locked, which posed a potential risk of injury. It is acknowledged the cleaning agents were removed once the identified risk was brought to the attention of the person in charge.
4. There was an unsecure screw protruding from a wooden block on the wall just outside the Wobbler 2 cot sleep room. This posed a potential risk of injury as it was positioned in a corridor where the children from the Senior Montessori room accessed the children's sanitary area unsupervised.
5. One of the tap faucets in the Wobbler 2 Sanitary area was observed to be loose and rusty. This posed a potential risk of injury.
6. A wooden panel of a radiator cover in positioned under the window in the Senior Montessori room was loose. There was a sharp nail protruding from the inside section. Due to the style of the radiator cover which had 3.5 cm spacing small toys had got trapped inside of the cover. This posed a potential risk of injury if a child were to put their hand in to try to get a toy out. In addition, a second radiator cover in this room was not secure. This cover had jagged and sharp edges that posed a potential risk of injury to the children.
7. The service did not ensure that hand washing water did not exceed the allowable maximum temperature of 43°C to prevent scalds and support effective handwashing. Evidenced by the following.
 - The hot water in one of the hand wash basins of the Wobbler 2 sanitary areas was recorded as 46.1°C at 9:58am.
 - The hot water in the hand wash basin of the Senior Montessori room was recorded as 45.8°C at 10.25am.

This posed a risk of injury and cross infection. This non-compliance was observed on the previous inspection on 12 February 2025, and the preventive action had not been sustained.
8. The extractor fan in the Wobbler 2 sanitary area was observed to be not working and missing the cover part. There was a visible build-up of dust on the extractor fan. This posed an unsafe nappy changing and toileting environment.

Infection Control:

9. Two of the five mattress used during sleep time for the children from the Wobbler 2 room were not fitted with a protective cover or waterproof wipeable lining. This prevented adequate cleaning and posed an infection control risk. A similar non-compliance was observed on the previous inspection on 12 February 2025, and the preventive action had not been sustained.
10. Toilet rolls were observed to be not hygienically stored and dispensed; this posed a risk of cross infection. Evidenced by the following.
- In Wobbler 2 sanitary accommodation, two toilet rolls were observed to be stored on top of the toilet units.
 - In the Senior Montessori sanitary accommodation, one toilet roll was observed to be placed on top of the toilet unit.

Administration of Medication:

11. The service did not ensure the safe administration of prescribed emergency medication, which has been evidenced by the following:
- One child with a diagnosed medical condition with prescribed emergency medication did not have a plan to identify triggers, symptoms or the steps to follow to safely administer medication and treatment if required. Additionally, the prescribed emergency medication was not available within the service.
 - One child with a diagnosed medical condition with prescribed emergency medication did not have a plan to identify triggers, symptoms or the steps to follow to safely administer medication and treatment if required. Additionally, staff were not aware of the whereabouts of the prescribed emergency medication between 09:51am and 12:37pm. In addition, the prescribed emergency medication was not stored in the original box and was not labelled with the child's name.
- Both point one and two above posed significant risks to the children, in the event of a medical emergency where the prescribed medication was required. This was also at variance with the services policy that states *"If a child has prescribed medication for a medical need...a health care plan will be developed"*. An immediate action notice was issued on the day of the inspection. A response which mitigated this non-compliance was received on the 07 January 2026.
12. The administration of medication practices was not in line with best practice and was at variance with the services administration of medication policy. Evidenced by the following:
- On one of the administration of medication forms the parent consent to give the medication had been left blank.

- On one of the administration of medication forms there was no witness signature where it showed that prescribed medication had been administered two times by a staff member.
- On five of the administration records there was no parent initials to show that the parent/guardian had been informed of the times and dosage of the medication administered. In addition, on one of these forms the date had been left blank on a form which showed that prescribed medication had been administered twice on that day.
- On review of one of the administration of medications records and discussion with staff showed that one child had been administered prescribed medication over a five-day period. However, the administration of medication record which details the date, time, child's name, medication name and dosage given, signature of person administering, signature of witness, medication checklist, and parents initial was left blank.

This is at variance to the service policy which states that staff members who administer prescribed medication will have a staff member present to witness the medicine being administered and counter sign the medicine book, record the date, time, dosage and signature, when the medicine has been given out of in the medicine book. Failure to administer medication with a witness and provide parents/guardians with this information on collection could result in a child receiving an incorrect dosage or an overdose.

Corrective & Preventive Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1. Immediate action was taken on the day of inspection, and the radiator covers were blocked by securely positioned furniture, ensuring that there was no accessibility to the children. Additionally, the radiator covers were permanently fixed and secured over the following days. The service will ensure to carry out regular hazard checks and promptly address them going forward.
2. The blind cord was immediately secured out of children's reach to eliminate the risk of entanglement or injury. Staff were reminded to remain vigilant when children are transitioning through shared corridors. All blind cords throughout the service will be reviewed and fitted with approved safety devices or cleats to ensure they are secured at all times. A routine environmental safety checklist will be implemented to include blind cord safety, and staff will receive refresher training on identifying and reporting potential hazards promptly.
3. The cleaning agents were immediately removed from the accessible area once the risk was identified. All cleaning agents will be stored in locked cupboards or rooms that are inaccessible to children at all times, in line with the service's health and safety policy. Regular checks will be conducted to ensure storage areas remain secure, and staff will be reminded of safe chemical storage procedures during staff meetings.

4. The protruding screw was removed, and the wooden block was made safe immediately to eliminate the risk of injury. This will be painted as soon as possible. A comprehensive maintenance inspection of walls, fixtures, and fittings in all shared corridors and rooms will be conducted regularly. Any hazards identified will be reported and addressed promptly. Staff will be encouraged to report maintenance concerns immediately to ensure timely repairs.
5. The loose and rusty tap faucet was replaced to ensure it is secure, safe to use, and free from sharp or hazardous surfaces. Routine plumbing and equipment checks will be added to the service's maintenance schedule to identify wear and tear early. Any damaged or faulty fixtures will be repaired or replaced without delay to maintain a safe and hygienic environment for children.
6. Each radiator cover in the Senior Montessori room was addressed immediately. The loose wooden panel with the protruding nail was removed and made safe, and all trapped toys were removed from inside the radiator cover. The second radiator cover, which was not secure and had jagged and sharp edges, was also fixed to eliminate the risk of injury. All radiator covers throughout the service will be reviewed to ensure they are securely fitted, free from sharp edges, and designed in a way that prevents children from accessing the internal area. Radiator covers that do not meet safety standards will be replaced with child-safe, compliant designs. Regular room safety checks will be strengthened to include inspection of radiator covers, fixtures, and fittings, and maintenance concerns will be reported and addressed promptly.
7. Immediate action was taken to adjust the hot water supply to the affected hand wash basins in the Wobbler 2 sanitary area and the Senior Montessori room to ensure the water temperature does not exceed the maximum allowable temperature of 43°C. Use of the affected basins was supervised until safe temperatures were confirmed. Plumber installed a thermostatic mixing valve to the boiler capping the temperature to avoid scald. Thermostatic mixing valves will be checked, adjusted, and serviced by a qualified professional to ensure consistent compliance with temperature requirements. A documented water temperature monitoring system will be implemented, with regular checks recorded and reviewed by management. Staff will receive refresher training on the importance of safe water temperatures to prevent scalds and support effective hand hygiene. Management will carry out periodic audits to ensure corrective actions are sustained, particularly considering the previous non-compliance identified.
8. The extractor fan in the Wobbler 2 sanitary area was repaired, and the missing cover was refitted. The unit was cleaned thoroughly to remove the build-up of dust and ensure it is functioning effectively. Daily visual checks of sanitary and nappy-changing areas will be reinforced to ensure all fixtures are intact and operational. Any

faults identified will be reported immediately and addressed without delay to maintain a safe and hygienic environment.

Infection Control:

9. The two mattresses that were not fitted with protective covers were removed from use. Waterproof, wipeable mattress protectors were fitted to all mattresses used during sleep time to ensure they can be effectively cleaned and disinfected after use. All sleep equipment will be maintained in line with infection prevention and control requirements. Management will carry out regular audits to monitor compliance, particularly considering the repeated non-compliance identified during the previous inspection. Staff will receive refresher training on infection control practices related to sleep equipment, and responsibility for monitoring will be clearly assigned to ensure this preventive action is sustained.
10. All toilet rolls observed to be stored on top of toilet units in both the Wobbler 2 and Senior Montessori sanitary accommodations were immediately removed. Toilet cubes were placed in appropriate wall-mounted dispensers to ensure hygienic storage and dispensing. All sanitary areas will be reviewed to ensure toilet paper cubes are stored and dispensed in a hygienic manner at all times. Staff will be reminded of infection prevention and hygiene standards during daily room checks and staff meetings. Regular environmental hygiene checks will be conducted and documented to ensure sanitary areas remain compliant and to reduce the risk of cross infection.

Administration of Medication:

11. Two individual care plans were immediately created, shared with staff and in place to ensure thorough understanding and knowledge of the children's emergency medication. Going forward, the service will ensure that all relevant information in relation to children is shared with staff and plans to be put in place to ensure best practice and safety.
12. Staff were reminded of the requirement to complete all sections of medication administration records accurately, including parent consent, date, time, dosage, staff signatures, witness signatures, and parent acknowledgment. Any incomplete records were reviewed and rectified where possible. Medication administration procedures will be reinforced through mandatory refresher training for all staff, with a clear focus on documentation requirements and the two-person witnessing process. A revised medication checklist will be implemented to ensure all required information is completed before and after medication administration. Management will carry out routine audits of medication records to ensure accuracy, completeness, and compliance with the service's Administration of Medication Policy. Staff accountability will be strengthened, and non-compliance will be addressed promptly to ensure children's safety and adherence to best practice at all times.

Supporting documentation submitted

General Safety:

Photographic and documentary evidence submitted.

Infection Control:

Photographic and documentary evidence submitted.

Administration of Medication:

Photographic and documentary evidence submitted.

Summary Comment

The corrective and preventative actions provided by the registered provider are sufficient to address the non-compliances identified under 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) There was evidence to show that three adults held certification in First Aid Response training, three adults were rostered to be available during the operational hours of the service.

(2) (a) The first aid equipment was safely stored, and unobstructed if needed to access quickly.

(b) A suitably equipped first aid box was available at all times to the adults caring for children attending the service.