

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2015FL180				
<b>Name of Service:</b>	Sutton Little People				
<b>Address of Service:</b>	33A Baldoyle Road, Sutton, Dublin 13				
<b>Eircode:</b>	D13 H2R2				
<b>Name of Registered Provider:</b>	Brendan O'Brien				
<b>Service type:</b>	Full Day, Part Time, Sessional				
<b>Date of Inspection:</b>	14/11/2024				
<b>No of pre-school children:</b>	<table border="1"> <tr> <td>AM</td> <td>37</td> <td>PM</td> <td>34</td> </tr> </table>	AM	37	PM	34
AM	37	PM	34		

<b>Address of the Early Years Inspectorate:</b>	Early Years Inspectorate, Floor 7 Brunel Building, Heuston South Quarter, St. John's Road West, Kilmainham, Dublin 8
<b>Inspection undertaken by:</b>	E. Finnegan Hayes & C. Harte
<b>Title:</b>	Early Years Inspectors

### Authority to Inspect

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

Conditions if applicable

Not applicable.

### Description of service

Sutton Little People is a privately operated childcare service based in a purposely adapted residential unit in Dublin 13. The service offers full day care to children aged 0-6 years from 7:30am to 6pm, Monday to Friday and participates in the Early Childhood Care and Education scheme (ECCE). There are five care rooms in the service namely the Wobbler room 1 which caters for children aged 12-18 months, Wobbler room 2 which caters for children aged 12-18 months, Toddler room which caters for children aged 2-3 years, Junior montessori room which caters for children aged 3-4 years and Senior montessori room which caters for children aged 3-4 years. The service also has a kitchen, an office, staff room and the necessary sanitary facilities. An enclosed outdoor area is located to the rear of the service

### Staffing

The registered provider employs nine staff all of whom were present on the day of inspection including the person in charge, 7 childcare staff and a cook. The registered provider does not work in the service but did attend the service briefly on the day of inspection.

### 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 and facilities. The inspection may also focus on other areas as required.

The inspection focused on an examination of compliance under regulations;

Regulation 9; Management and Recruitment,

Regulation 11; Staffing Levels,

Regulation 16 (1) (j)(k); Records in relation to the preschool service,

Regulation 19(1)(a); Health, Welfare and Development of child,

Regulation 23; Safeguarding the Health, Safety and Welfare of child,

Regulation 25; First aid,

Regulation 26; Fire Safety Measures,

Regulation 30; Minimum space requirements.

However, on inspection additional non-compliance which posed a risk was identified under Regulation 29(e) Premises. These findings are outlined within the relevant regulation within this report

A sampling process was used to assess compliance under regulation 16 (1)(j)(k), regulation 19 (1)(b), regulation 23. As a result, the scope of the inspection included Wobbler room 1, Wobbler room 2, Toddler room and Junior Montessori room. Regulation 30 was only assessed in Wobbler room 1 in relation to a recent change which has occurred since the last inspection.

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

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

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

### Additional Information

A regulatory compliance meeting was held on the 14 January 2025 to discuss a number of outstanding non-compliances following the CAPA process. This meeting was attended by the service manager. The response received following this meeting was deemed to address some of the non-compliances however some non-compliances remained outstanding.

A referral was made to the fire officer on 29 January 2025 in relation to non-compliances under Regulation 26 Fire Safety.

### Acknowledgments

The inspectors wish to acknowledge the cooperation of the 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,*

*(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)(b) The registered provider ensured there was a designated person in charge and a named person to deputise as required. The person in charge was on the premises when the inspector arrived unannounced to the service and remained in the service for the duration of the inspection.
- (2) A review of the roster and conversation with management confirmed there are nine staff currently employed in the service including the person in charge. The files of all nine staff were reviewed.
- (a) (b) Eighteen written and verified references were available in relation to nine staff members.
- (c) Garda vetting disclosures had been obtained for all nine staff. The service had also adhered to the re-vetting timeframes as outlined in the Early Years Inspectorate Regulatory Notice, requiring services to renew Garda vetting every three years.
- (d) Police vetting was available for four staff members who had resided outside of Ireland for a period of more than 6 months as an adult.
- (4) Evidence was available to show that eight staff members who 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

- (3) Evidence showed that the checks required under (2) were not conducted prior to the start date of one staff member who commenced employment since the previous inspection. The start date provided by the person in charge was two months before the date of the Garda vetting declaration and reference checks provided.

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

#### Corrective and Preventive Action

- (3) Sutton Little People will not have any new employees begin working onsite until Garda Vetting is received.

#### Supporting documentation submitted

No supporting documentation submitted.

### Summary Comment

The corrective and preventative action proposed by the registered provider are sufficient to address the non-compliance 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.*

#### Non-Compliance Information

- (1) The registered provider did not ensure that an adequate number of staff were available to ensure the needs of the children were met at all times throughout the day. The following was observed;
- Between 11:05am and 11:21am a second adult was required in Wobbler room 1 to meet the needs of the children. The staff member present was attempting to feed a child 11 months. The three other children present in the room had finished eating and required additional support to manage their behaviour and engage them in activity. Please see regulations 19 and 23 for further details of the risk posed to the children during this time.
  - Between 12:10pm-12:30pm only five staff were available to care for 37 children aged 11 months- 4 years. Six staff were required based on the individual ages of the children present.
  - Timely sleep checks at 10-minute intervals were not carried out on children aged 11 months to 18 months who were asleep in two cot rooms between 12:20pm and 12:45pm as the person monitoring the cot rooms was also in ratio in another group who were in the garden area. When the inspector queried the monitoring of the cot rooms the staff member advised they were waiting for a staff member to return from changing a nappy so they could leave the garden to complete the checks.
  - A review of the staff attendance records for the previous week showed that insufficient staff are available on a daily basis to cover lunches in the service for example one staff member is allocated to cover two staff to take their break from 12pm-1pm daily in the montessori room.

(2) The registered provider did not ensure that the ratios were maintained in the service at all times. The following was observed;

- Between 11:12pm-12pm one staff member was caring for 13 children aged 3 - 4 years old in the Senior Montessori room. The second staff member was on their lunch break. A second staff member was required to meet the required ratio of 1 adult to 11 children.
- Between 12:10pm-2pm one staff member was caring for nine children; eight of whom were aged 2 years and one of whom was aged 3 years old. A second staff member was required to meet the required ratio based on the individual ages of the children present.

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

#### Corrective and Preventive Action

- (1) (2) Sutton Little People have begun to recruit for a member of staff to help with break times and covering. Whilst we are in the process of recruiting, a weekly creche schedule was put together outlining break times and nappy covering throughout the day. This spreadsheet gives a clear overview to all staff members of their breaktimes and staff members covering them.

#### Supporting documentation submitted

A copy of the service roster for the week of 13<sup>th</sup> January and a schedule of cover was reviewed.

### Summary Comment

Having reviewed the corrective and preventive actions and supporting documentation provided by the registered provider in relation to the non-compliance the inspectorate is not assured that the service has sufficient staffing to meet the needs of the children or maintain ratios at all times throughout the day. This will be reviewed on the next 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;
- (j) details of any medication administered to a pre-school child attending the service with signed parental consent;
- (k) details of any accident, injury or incident involving a pre-school child attending the service.

### Compliance Information

- (k) A sample of twelve records containing details of accidents and incidents that occurred were reviewed all of which were observed to be completed in full.

### Non-Compliance Information

- (i) The service roster did not detail the staff breaks and who would be covering each break. Having this information clearly documented supports the correct staffing levels and maintenance of ratios.
- (j) A sample of four records were available for review of these three did not contain the signature of the person who witnessed the administration or the parent initial confirming that they were made aware of the administration.

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

#### Corrective and Preventive Action

- (i) Staff breaks times are now outlined in the roster and on a creche schedule outlining break times.
- (j) Medication administration forms have since been signed. Going forward staff have been reminded to get signatures from parents. Creche Manager will also be completing checks on the administration forms.

#### Supporting documentation submitted

A copy of the updated roster was reviewed.

Copies of the completed medication records were reviewed.

### 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-
- (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

- A calm atmosphere was present in the service when the inspectors arrived and children were observed to be engaged in a range of activities.

- The children are provided with meals and snacks at regular intervals throughout the day in line with the service menu and healthy eating policy. Children receive three meals and one snack per day; Breakfast which is served between 7:30-9am, a fruit snack at 10am, dinner between 11-11:30am and tea at 3pm.
- Drinks were provided to the children throughout the day with meals.
- A daily communication book is used to communicate information about the younger children's day with the parents; food nappies and sleep are detailed, and parents can also use this to provide messages to the service.
- Nappy changing is conducted on a set schedule three times per day and as needed for the children's comfort.
- Low level tables and chairs are available in the care rooms to allow children to engage in mealtimes and activities comfortably.
- Staff were kind and caring in their approach to the children in the service offering help and support as needed.
- Children are encouraged to engage in classroom activities and feel part of the group for example in the Junior montessori room children have daily jobs which supports identity and belonging.

### Non-Compliance Information

(1) (b)

1. One child aged 11 months was not observed to go to the garden with her class on the day of inspection which is not in line with the service policy. The service advised this was a parental request however no documentation was available for review. In line with the service policy children should be provided with appropriate clothing to allow outdoor play on a daily basis. Outdoor play allows children to engage in a variety of play experiences and promotes gross motor development.
2. An additional portion of food was not provided to a child aged 14 months old who was observed to indicate that they would like additional food at dinner time. The child was observed to finish their dinner and proceed to attempt to take food from the other children. The staff member repeatedly removed the child from the other children who were eating but did not recognise the child's cue for additional food despite acknowledging to the inspector that additional food would be available should anyone want it. The cook was heard asking staff if they would like the leftover dinner during staff lunch breaks.

3. The toilet located beside the Junior montessori room does not protect the privacy of the children when toileting. The door remained open throughout the day and children were visible to passersby's in the corridor and children near the care room door.
4. One toilet located opposite the stairs near the Senior montessori room was not fitted with a toilet seat to ensure the children's comfort while using the toilet.

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

#### Corrective and Preventive Action

1. This child has since been provided with garden gear.
2. We have asked the chef to go around each room to remind staff extra portions are available should they need it. All members of staff have been reminded that there is always extra food available, and the kitchen staff will make a routine of asking all rooms if more food is needed for their children.
3. All children who use our Junior Montessori toilet have since been shown how to properly slide over the door. Staff members monitoring toilets will ensure that the door is protecting the children's privacy.
4. A new toilet seat has been provided for the toilet. Sutton Little People Creche will make a conscious effort to update the maintenance sheet and monitor regularly.

#### Supporting documentation submitted

1. No evidence submitted.
2. No evidence submitted.
3. No evidence submitted.
4. A photo of the new toilet seat was reviewed.

### Summary Comment

The corrective and preventive actions provided by the registered provider are sufficient to address the non-compliances under Regulation 19. This 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 service entrance was securely locked on arrival to the service. Staff must attend the door to allow access which prevents unauthorised entry to the service and to prevent children leaving unsupervised.
- The kitchen was adequately secured with a safety gate to prevent children accessing.
- Safety catches were fitted to low presses in the care rooms preventing the children from accessing the contents.
- Blind cords were secured safely.
- Radiators are mounted out of reach of the children.

##### Infection Control:

- Individual labelled cubbies were available to store children's personal items.
- Cleaning and sterilisation records for toys and equipment within the care rooms were available and completed to date.
- Bedlinen was reported to be laundered weekly and as required.

##### Safe Sleep:

- Adequate sleep equipment was provided for children who required sleep based on their specific ages for example all children under 2 years old were placed in a cot to sleep while children over two slept on low level beds.
- Cots and low-level beds were maintained in a good state of repair.

##### Fire Safety:

- Notices detailing the steps to take in the event of a fire were displayed throughout the service; in the hall and care rooms.

#### Non-Compliance Information

##### General Safety:

1. The water temperature in two sinks in the nappy changing area at the Senior montessori room was not maintained at 43°C or less to prevent scalds. The water temperature was recorded as 43.3°C in the sink on the left and 43.7°C in the sink on the right. This posed a potential risk of scalds.

2. Cleaning sprays were accessible to the children in the sanitary area outside of the junior montessori room and in the junior montessori room. Nappy sacks were also accessible in the sanitary area outside of the junior montessori room. This posed a potential risk of injury to the children.
3. Trailing flexes which were not adequately secured and were accessible to the children was observed above a cot in both cot rooms and in Wobbler 2 and Junior montessori care rooms. This posed a potential risk of injury should a child pull the flex.
4. Chairs were observed to be stacked nine high in the Junior montessori room which posed a potential risk of injury to the children.

### **Infection Control:**

5. Handwashing was not routinely completed at the required times throughout the day for example after outdoor play, before meals and after nappy changing. Handwashing is required as an infection control measure to prevent illness in the children.
6. A nappy changing unit was present in the corner of Wobbler room 1 which the person in charge and staff advised was used for nappy changing of the children present. Nappy sacks containing nappies were observed in the bin and the children's records showed that two children had soiled nappies before the inspector arrived in the room. This posed an infection control risk to the children present and the possibility of cross contamination of the toys and equipment in the care room.
7. An apron was not used by a staff member who was changing a soiled nappy. Aprons are required to prevent contamination of the staff members clothes.
8. Nappy changing creams were not routinely labelled, and an unlabelled cream was observed to be used for a child in Wobbler 1 room. This cream was located in a nappy changing area not normally used by that room and was not owned by the child. This posed a potential risk of cross infection.
9. A child was observed to access and remove the contents of a bin in the wobbler 1 care room which contained food, plastic gloves and soiled nappies on four occasions between 11:12am-11:20am. The staff member removed the child from the bin but did not complete adequate handwashing to ensure the child's hands were clean. This posed a potential cross contamination and infection control risk.
10. Mattresses in the cot room used by Wobbler room 2 were not fitted with protective covers or waterproof wipeable lining which prevented adequate cleaning and posed an infection control risk.
11. The flooring in two of the sanitary areas opposite the stairs were observed to be cracked and lifting and did not provide an easy to clean surface which posed an infection control risk.

12. The corner of the nappy changing mat in the area used by the Toddler room was torn at the corners and did not provide an easy to clean surface which posed an infection control risk.
13. Pedal operated lidded bins were not provided in two of the children's sanitary areas for example one toilet was observed to have an open top bin while a second toilet has no bin. Pedal operated lidded bins are required for the disposal of contaminated items such as tissues.

### Safe Sleep:

14. An ambient temperature of 16-20 °C was not maintained in the cot room in Wobbler room 1 where a child aged 11months was sleeping. The temperature of the room was recorded to be 21.2°C at 12:20pm on the inspector's calibrated thermometer. The thermometer used by staff to monitor the temperature was 21.6°C at the same time.
15. Staff did not adequately monitor or record the room temperature of the cot rooms for example the record for the cot room used by Wobbler room 2 was for two days prior to the inspection.
16. The record used for monitoring sleeping children had the time of the checks prepopulated. Monitoring of the times the sleep checks were physically conducted by staff showed that these times did not reflect the actual times the sleep checks were conducted. This was a non-compliance on the previous inspection in January 2023. The corrective action detailed by the registered provider of using a sheet which did not contain pre-populated times has not been sustained.

### Fire Safety:

17. A gate in the outdoor area which forms part of the emergency evacuation route has dropped slightly and does not fully open because it catches on the ground which could delay the evacuation of the children in the event of a fire emergency. It is acknowledged that a second evacuation route is available to the front of the service.

### Action submitted by the Registered Provider

#### Corrective & Preventive Action

#### General Safety:

1. Sutton Little People have begun monitoring the water temperature with a temperature monitoring sheet. The water heater will be turned off after one hour in the morning and in the afternoon to maintain warm water efficient enough for hand washing. The temperature monitoring forms will be completed daily until we have maintained the correct water temperatures for a consistent length of time.

2. A child safety lock has been put on the under the sink shelving in the Junior Montessori bathroom with all items secured behind it. All staff have been reminded cleaning supplies are to be stored behind child safety locks only including gloves, nappy sacks and other supplies needed in the bathrooms.
3. Trailing flexes have since been removed out of the children's reach. The cot room radiator will be unplugged during sleep times. The cot room will be pre-heated in the morning time before children's sleep times. Each staff member will check wires in cot rooms going forward to ensure no hazards are within reach of the children. Any maintenance required will be noted and reported to the creche manager.
4. Staff have been reminded to ensure the safety of the children when stacking the chairs after mealtimes. Staff have been advised to stack their chairs no higher than 4 chairs per stack which is perfect height for the children.

### Infection Control:

5. Staff have been spoken to about the importance of handwashing and infection control. Signs for handwashing have been erected throughout the building.
6. This nappy changing unit is not being used anymore and has been changed into a unit to hold children's resources. The changing mat and materials have been removed to prevent this area being used for nappies in the future.
7. All staff members have been reminded to wear aprons during nappy changes. An updated nappy procedure has been put up in our nappy changing bay. Also, a reminder to wear aprons sign has been displayed.
8. All Nappy creams have been labelled since inspection. Going forward staff have been reminded to label creams, wipes and any belonging to children when they are brought in from parents.
9. The waste bin for Wobbler 1 room has been removed and re-located out of children's reach. Going forward staff have been reminded to be mindful where they locate their bins. Staff have also been reminded of hand washing.
10. Mattress protectors have been provided for the cot room. Sutton Little People will ensure mattress protectors are used at all times. Creche Manager will be informed if new protector is needed.
11. Work is due to be completed on 27<sup>th</sup> January to fix the flooring in the bathrooms. Going forward this will be flagged with the service provider and the works will be arranged and organised by the Creche Manager.

12. The changing mat in the toddler area has been removed. A new changing mat has been put into the nappy changing area. Staff members have been reminded to let creche manager know if new changing mats are needed going forward.
13. Open top bins have since been removed and replaced with two new foot pedal bins for both bathrooms. Going forward only foot pedal bins will be supplied in the service.

### Safe Sleep:

14. The temperature of the radiators in our cot room have been turned down. Going forward the cot room is going to be preheated before any children go to bed. Once it has reached the temperature needed it will be switched off.
15. Staff members have been recording temperatures daily for the cot rooms since inspection. Staff members have been reminded of temperatures in cots rooms and importance of recording and monitoring the temperature.
16. Sutton Little People have removed all pre-populated sleep sheets in the service. Staff members have been shown the new sleep sheet with un pre-populated sleep times on it. Attached is the revised sleep sheet that will be used in all sleep rooms going forward.

### Fire Safety:

17. The Garden gate has since been fixed and no longer dragged on the grass. Going forward a staff member has been allocated the job of garden maintenance who will let the creche manager know if work is required.

### Supporting documentation submitted

1. A water temperature record template was reviewed.
2. Photo of child proof lock on bathroom cupboard reviewed.
3. Photo of trailing flax removed from above cot.
4. A photo of the stacked chairs was reviewed.
5. Photos of handwashing signs in situ were reviewed.
6. A photo of the shelving was reviewed.
7. No supporting evidence submitted.
8. A photo of labelled creams was reviewed.
9. Photo of bin location reviewed.
10. Photo of new mattress protectors reviewed.
11. Note stating due date of completion reviewed.

12. Photo of the new changing mat was reviewed.
13. Photo of new pedal bin reviewed.
14. Up to date room temperature records were reviewed.
15. Up to date room temperature records were reviewed.
16. Updated sleep record sheet reviewed.
17. Photo of gate reviewed.

### Summary Comment

The registered provider has addressed points 1-10 and 12-17 and has attempted to address point 11. Point 11 will remain outstanding as the work has not been completed. This will be reviewed on the next inspection.

### Part VI - Safety

#### Regulation 25 - First aid

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

*(2) A registered provider shall ensure that a suitably equipped first aid box for children-*  
*(a) is safely stored in an easily accessible and conspicuous position on the premises, and*  
*(b) is available to the children attending the pre-school service at all times.*

#### Compliance Information

- (1) The registered provider ensured that an adequate number of staff were trained in First Aid Response (FAR) and that a staff member trained in FAR was available on the premises throughout the opening hours of the service.
- (2) (a)(b) Adequately stocked first aid boxes were observed in the service. These were stored out of reach of the children but accessible to staff if needed.

### 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) A record of monthly fire drills was available in the service. The most recent fire drill took place on 21 October 2024.
- (4) A notice of the procedure to be followed in the event of a fire were displayed throughout the service in communal areas and care rooms.

#### Non-Compliance Information

- (1) (b) A record of maintenance of the firefighting equipment and smoke alarms were not available for review on the day of the inspection.

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

##### Corrective and Preventive Action

- (1) (b) It has been brought to the service providers attention that there is no record of maintenance of our firefighting equipment. A request has been made to the company who maintain the service fire equipment. Creche Manager has arranged with a representative from the company to supply a fire folder and do a maintenance check on the service. Going forward in order to stay organised and on top of the fire system and equipment, a service will be pre-booked in advanced after the servicing that is happening week beginning 27<sup>th</sup> of January. A Fire folder will be supplied and available at the front of the creche.

##### Supporting documentation submitted

No evidence of servicing of the firefighting equipment or smoke detection system was provided.

#### Summary Comment

Following a review of the corrective and preventive actions and supporting information provided by the registered provider the inspectorate is not assured that the service is compliant with the requirement of annual servicing of

the firefighting equipment and smoke detection system. This will remain outstanding and be reviewed on the next inspection.

### Part VII - Premises and Space Requirements

#### Regulation 29 - Premises

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

*(e) equipped with adequate and suitable sanitary facilities.*

#### Non-Compliance Information

- (e) The registered provider did not ensure adequate and suitable nappy changing facilities were available in line with the number of children present who required nappy changing for example;
- One suitable nappy changing unit was available for 17 children who were present on the day of inspection and required nappy changing.
  - A nappy changing unit which was present in Wobbler room 1 was not suitable for use as it is not in line with the *Health Protection Surveillance Centre Management of Infectious Disease in Childcare Facilities and Other Childcare Settings* which states that “The nappy changing facilities should not communicate with any occupied room or food room, except by means of a hall, corridor, ventilated lobby or ventilated space”. While there was evidence that this was used on the morning of inspection the person in charge advised staff to use the other nappy changing unit once the issue was flagged by the inspectors on arrival in the care room.

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

##### Corrective and Preventive Action

- (e) A new designated nappy changing area has been provided in the sanitary facilities previously used as the staff toilet. This nappy changing unit is being used by our Wobbler 1 room only for child aged 12-15months. Sutton Little People were unaware of the ratios for nappy changing units. All staff members and manager have been made aware of this since inspection.

##### Supporting documentation submitted

- (e) A photo of the new changing area was reviewed.

#### Summary Comment

The corrective and preventive actions provided by the registered provider are sufficient to address the non-compliances under Regulation 29.

## Part VII - Premises and Space Requirements

### Regulation 30 - Minimum space requirements

*(1) Subject to paragraphs (2) to (6), a registered provider shall ensure that adequate clear floor space is available in the premises for the work, play and movement of children attending the pre-school service.*

#### Compliance Information

(1) The registered provider ensured there was adequate floor space in Wobbler room 1 for the number of children present on the day of inspection. The clear floor space in the room was measured to be 13.088m<sup>2</sup> which was sufficient for the three children aged 1 year old and one child aged 11 months who were present on the day of inspection.