

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015KE132
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Name of Service:	Cocoon Childcare- Celbridge
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Address of Service:	The Close, Hazelhatch Park, Celbridge, Co. Kildare
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Eircode:	W23 YV48
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Name of Registered Provider:	Nicola Battams
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Service type:	Full Day, Part Time, Sessional
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Date of Inspection:	12/05/2026
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No of pre-school children:	AM	78	PM	75
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Address of the Early Years Inspectorate:	Early Years Inspectorate, Suite 7, Vista Primary Care, Ballymore Eustace Rd, Naas, Co Kildare
Inspection undertaken by:	R. Brien & S. Quigley
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).

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Description of service

Cocoon Childcare Celbridge is one of 17 childcare services operated by the registered provider. The service provides full day, part-time and sessional care and caters for children from 0 to 6 years. The service is registered to operate from 07:30 to 18:30, Monday to Friday.

The service is located in a purpose-built single storey premises in a residential area of Celbridge, Co. Kildare. There are six care rooms in the service. The Wobbler 1 and Wobbler 2 rooms cater for children aged 1 year. The Wobbler 3 room caters for children aged 1 to 2 years. The Toddler room caters for children aged 2 years. The Junior Preschool room caters for children aged 2 to 3 years, and the Preschool 3 room caters for children aged 3 to 5 years.

There are two dedicated cot rooms available for younger children. A fully enclosed outdoor play area is available to the rear of the premises.

Staffing

The service currently employs 20 staff members including two service managers, a chef and a cleaner. There were 18 staff working directly with the children on the day of inspection including the registered provider and the operations manager who arrived following the inspector's arrival.

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

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

The inspection focused on an examination of compliance under the following regulations:

- 9 (1)(a)(b),(2)(a)(c)(d),(4),(7)(a)(b)(c) – Management and recruitment,
- 11 (1),(2),(8)(a) – Staffing levels,
- 16 (1)(i)(j)(k) – Record in relation to pre-school service,
- 19 (1)(b) – Health, welfare and development of child,
- 23 – Safeguarding, health, safety and welfare of child,
- 25 – First aid,
- 26 – Fire safety measures.

A sampling process was used to assess compliance under the following regulations:

- 19 (1)(b) – Health, welfare and development of child,
- 23 – Safeguarding, health, safety and welfare of child.

As a result, the scope of the inspection included Wobbler 1, Wobbler 2, Wobbler 3, Toddlers and the outdoor area.

A sampling process was used to assess compliance under regulation 16 (1)(j)(k) – Record in relation to pre-school service.

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.

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Acknowledgments

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

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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
- (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,
 - (c) consideration of the vetting disclosure received from the National Vetting Bureau of the Garda Síochána in accordance with the Act of 2012 in respect of the person, and
 - (d) ensuring, insofar as is practicable, that where a person has lived in a state other than the State for a period of longer than 6 consecutive months, he or she provides police vetting from the police authorities in that state.
- (4) A registered provider shall ensure that, without prejudice to the generality of paragraph (2) and subject to paragraphs (5) and (6), each employee working directly with children attending the service holds at least a major award in Early childhood Care and Education at Level 5 on the National Qualifications Framework or a qualification deemed by the Minister to be equivalent.
- (7) A registered provider shall ensure that all employees, unpaid workers and contractors are appropriately supervised and provided with appropriate information, and where necessary training, including in relation to the following:
- (a) the policies, procedures and statements of the service specified in Schedule 5;
 - (b) Part VIIA (inserted by section 92 of the Child and Family Agency Act 2013 (No. 40 of 2013)) of the Act, and
 - (c) these Regulations.

Compliance Information

- (1)
- (a)(b)

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The service had two designated persons in charge who were both on the premises throughout the inspection.

(2)

The inspection focused on the full recruitment records for eight adults employed since the last inspection on 20 August 2025 and one adult from another centre operated by the registered provider who was present during the inspection. In addition, Garda vetting for two adults whose disclosures were identified as due for renewal were requested for review.

Documentation was reviewed in respect of these adults and met regulatory requirements as follows.

(a)

Eighteen validated, written references were available from a past employer.

(c)

Garda vetting disclosures from the National Vetting Bureau of An Garda Síochána were available for the 11 adults. The service also demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years.

(d)

Police vetting was required and was available for eight staff members who had lived outside the State for a period exceeding 6 months as an adult.

(4)

Evidence of completion of a major award in Early Childhood Care and Education at level 5 or above on the National Framework of Qualifications or a qualification deemed by the Minister to be equivalent was on file for nine staff members. One staff member held a letter of qualification recognition, and one staff member held a letter of eligibility to practice from the Department of Children, Disability and Equality.

(7)(a)(b)(c)

The registered provider demonstrated that some measures had been taken to ensure that employees were appropriately supervised and provided with sufficient information and training to safeguard the health, safety and welfare of children attending the service and to comply with the regulations as follows.

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- Records were available to demonstrate that staff had received regular support and supervision in line with the supervision of staff policy in place.
- Records of induction training were available and complete for new staff members who had commenced employment in the service and were working directly with the children.

Non-Compliance Information

(7)(a)

The registered provider did not demonstrate that they had taken all reasonable measures to ensure that all employees were provided with sufficient information and training to safeguard the health, safety and welfare of children attending the service and to comply with the regulations as follows.

- There were no records available in the service to evidence that two staff members had read, understood, and would adhere to the policies and procedures in place.

This non-compliance was found on the last inspection on 20 August 2025. The corrective and preventive actions as stated by the registered provider did not prevent recurrence of this non-compliance.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(7)(a)

Staff inductions are completed throughout the first week of a new team members employment. Two of the new team members inductions were completed on their first day of employment which includes training on all policies and procedures throughout the process. Once completed, the staff member and Manager both sign off on the centre induction form to document the completion and adherence to all company policies and procedures. Each staff member also has an individualised training record, and this was completed for both employees to indicate that they had been trained on all centre policies and procedures on their commencement of employment.

We have reviewed all induction forms for new team members to ensure that there is no oversight on the requirements of the induction. The Centre Manager will ensure that all of the staff induction documents are signed to support evidence that training is completed.

Supporting documentation submitted

Written evidence was submitted to demonstrate the corrective and preventive actions submitted by the registered provider.

Summary Comment

The corrective and preventive actions as stated by the registered provider have been deemed to address this non-compliance.

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Part III – Management and Staff

Regulation 11 - Staffing levels

(1) Subject to this Regulation, a registered provider shall ensure that there is at all times an adequate number of adults working directly with the children attending the pre-school service.

(2) Subject to paragraphs (4) and (5), a registered provider of a full day care service or a part-time day care service shall ensure that at all times the minimum ratio of adults to children specified in column (3) of Part 1 of Schedule 6 opposite a particular reference number specified in column (1) of that Part in respect of the age range of the children specified in column (2) thereof at that reference number is satisfied.

(8) Without prejudice to paragraphs (2) to (7)-

(a) a registered provider of a pre-school service other than a child-minding service or a sessional pre-school service shall ensure that there are at least 2 adults on the premises at all times

Compliance Information

(1)
An adequate number of adults were working directly with the children in the Wobbler 1, Wobbler 2 and Toddler rooms.

(8)(a)
There were at least two adults on the premises at all times.

Non-Compliance Information

(1)
An adequate number of adults were not working directly with the children attending the service during the inspection in the Wobbler 3, Junior Preschool and Preschool 3 rooms as outlined below.

(2)
The registered provider did not ensure that the minimum required ratio of adults to children was maintained at all times as follows.

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- In the Preschool 3 room from 11:30 to 12:30, there were 2 adults allocated to care for 18 children attending on a full day care basis aged 3 to 5 years. The minimum adult to child ratio for children in this age range is 1:8. Three adults were required at this time.
- In the Junior Preschool room from 11.30 to 12.00, there were 2 adults allocated to care for 20 children attending on a full day care basis, 8 aged 2 years and 12 aged 3 years. The minimum adult to child ratio for children aged 2 years is 1:6 and the minimum adult to child ratio for children aged 3 years is 1:8. Three adults were required at this time.
- In the Junior Preschool room from 12:00 to 12:46 there were 2 adults allocated to care for 16 children, 4 aged 2 years and 12 aged 3 years attending on a full day care basis. The minimum adult to child ratio for children aged 2 years is 1:6 and the minimum adult to child ratio for children aged 3 years is 1:8. Three adults were required at this time.

Staff members and managers stated that they operate a 1:11 ratio for children attending on a full day care basis from 09:30 to 12:30.

- In the Wobbler 3 room at 12:41 when children were sleeping, there was one adult allocated to care for 8 children, 2 aged 1 year and 6 aged 2 years. There was no one available to support this adult if they required assistance. They stated that they can call the managers if assistance is required. However, both managers were required in care rooms to maintain ratios and were working directly with children at this time.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(1)(2)

An adequate number of adults were available on the day to meet the adult to child ratios in all care rooms, however, as children were settling in the centre that morning, the management team were required to offer additional support in the junior rooms, and this delayed the lunch cover schedule. There was also a team member on long term sick leave who has since returned and is available daily for staff break and lunch support from 9:30am - 2:30pm. Since the inspection took place, the Garda vetting has returned for a third part time member covering from 9am - 2pm daily.

In the Preschool 3 room and Junior Preschool Room the children are availing of the ECCE programme which operates an adult to child ratio of 1:11 between the hours of 9:30am - 12:30pm which was in place on the day and

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facilitated the adult to child ratios being met. The Inspector informed the centre manager on the day of the inspection that whilst children in the service are availing of the ECCE scheme the service cannot avail of sessional adult to child ratio as the children remain in the centre beyond 12:30p.m. The centre has since recruited an additional part time staff member and will consider offering ecce places in the new term.

An additional part time break/lunch support team member was recruited for the service but her start date was significantly delayed due to delays in processing garda vetting. This staff member has now commenced employment. A current employee has also returned from long term sick leave as staff break/lunch support.

Supporting documentation submitted

Written evidence was submitted to demonstrate the corrective and preventive actions submitted by the registered provider.

Summary Comment

The corrective and preventive actions as stated by the registered provider have been deemed to address these non-compliances.

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:

- (h) details of attendance by each pre-school child on a daily basis;*
- (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

- (h)
- Details of the attendance of each child in the service were recorded at the time of entering and leaving the service.
- (i)
- The staff roster was available on the day of inspection and accurately reflected the adults working in the service.

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(j)

A sample of 25 medication administration records were available and were reviewed. These records were signed by staff and parents and were completed appropriately.

(k)

A sample of 13 accident and incidents records were available and were reviewed. These records were signed by staff and parents and were completed appropriately.

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)

Meals were provided at regular intervals, and drinking water was accessible to children throughout the day. Dinner was served from 11:30. Younger children were given bibs for dinnertime. Staff sat with children during their dinner and children were encouraged to feed themselves. Staff supported children who needed assistance with their meals and children were given time to eat their meal.

Children's care needs were observed to be met promptly. Staff were observed cleaning children's noses as required and children's hands and faces were cleaned after meals. Children's nappies were changed regularly, and staff were observed engaging warmly with children when providing this care.

An area was provided within the rooms where the children could rest or take a break from activities. There was a designated nap time for children.

Suitable cots and beds were provided appropriate to the children's age and stage of development. During the designated nap time all children were made comfortable for sleep; staff removed children's shoes and outer clothing; they provided the children with blankets, and they offered soothers to those who used them. The environments were calm and conducive to sleep, with staff soothing the children as needed.

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The service had a key person system in place. Staff displayed warmth and sensitivity during all interactions with the children. Children were comforted promptly when they became upset. Staff were observed holding children and speaking to them softly. Staff addressed children by their name, used gentle tones and praise and interacted with them in a positive manner.

The staff described how they communicate with parents daily about their child at arrival and collection times and by using a daily handover sheet detailing information on food, sleep and nappy changes.

A fully enclosed outdoor play area was located to the rear of the premises and had artificial grass surfacing. The play area was divided into three sections. A range of developmentally appropriate play equipment was provided in the outdoor play area. Children were provided with the opportunity to play outdoors and were dressed appropriately to the weather. Staff were observed applying suncream to children before they used the outdoor area.

Non-Compliance Information

(1)(b)

The registered provider did not ensure that appropriate and suitable care practices were in place for all children in the service as follows.

1. Provision for children's sleep requirements were inadequate to meet the needs of all children in the Wobbler 1 room and were contrary to the service policy on safe sleep.

Three children, aged one year, were observed displaying signs of tiredness from 10:47, 10:49 and 11:05 respectively. The children were observed crying intermittently and then sitting on a staff member's lap quietly. Staff acknowledged that one of these children was tired but stated that they were waiting for a staff member to complete nappy changes before they could bring the child to bed. One child was brought to the cot room at 11:15, while the two other children were observed to fall asleep on a staff member's lap at 11:20.

Children were not provided with the opportunity to sleep when they displayed signs of tiredness. The sleep practices observed during the inspection do not meet the basic care needs of all children and are not in line with suitable child centred care practices.

2. During the inspection, some children in the Wobbler 1 and Wobbler 2 rooms were observed to have a soother in their mouth in the care rooms. During these times children were engaged in play in the care

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rooms and were sitting at the table at dinnertime. This is at variance with the service's policy on soother use which states that soother use is limited to sleep unless the child is upset. The children were not observed to be upset. Overuse of soothers may inhibit language and oral motor development and prevent children from interacting with their peers and is not in line with suitable child centred care practices.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

1. On the day of inspection, the Wobbler 1 room had some new children that were settling into the centre. Many of which co- sleep with parents at home and struggle with being placed to sleep in a cot as they seek the comfort of falling asleep in the staffs' arms. The wobbler team staff have been working on supporting the children in integrating them into the cot room and learning their cues of tiredness and responding quickly. The staff have been supported by their operations manager and centre management team to establish an effective sleep routine and promote best practice with each child's individual care plans. Staff members are also aware to call for additional support where required to facilitate cover when assisting a child to sleep. This allows the carer to follow the needs of the child and support sleep when required.

The service management team will continue to actively monitor the sleep routine of the children and ensure that all sleep needs are being met daily to facilitate needs led sleep.

2. Team members were re-trained on the service soother policy and soother usage. Team members will be proactive in reducing the usage of soothers throughout the day and only offer to children when necessary.

The service management team held a team meeting in response to the inspection which included re-training on soother usage. This will be actively monitored by the centre management team.

A second Assistant Manager has been implemented to support staff mentoring and development.

Supporting documentation submitted

Written evidence was submitted to demonstrate the corrective and preventive actions submitted by the registered provider.

Summary Comment

The corrective and preventive actions as stated by the registered provider have been deemed to address these non-compliances.

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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 to the service was adequately secured to ensure the safety of the children within and to avoid unauthorised persons accessing the service or children exiting unsupervised.
- The toys and play equipment observed in use by the children on the day of inspection appeared in good working order.
- Cleaning agents and medicines were stored safely out of reach of children.
- All storage facilities were inaccessible to children.

Infection Control:

- Liquid soap, warm water and paper towels were available to facilitate hand washing. Children were observed to carry out hand washing as appropriate.
- Children's nappies were changed in line with the service's nappy changing policy to reduce the risk of the spread of infection.
- Waste was managed appropriately with the use of pedal bins.
- A system was in place for effective sterilisation of soothers.
- Individual bed linen was provided for children and was laundered weekly or as required.
- All cot mattresses in use had waterproof covers.

Administration of Medication:

- Staff demonstrated, through discussion, that they were familiar with the procedures and practices in place for the administration of medication in line with the service policy on medication administration.

Safe Sleep:

- An adult remained in the room at all times where children were sleeping on low beds.

Fire Safety:

- All fire exits were clear of obstruction.

Non-Compliance Information

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General Safety:

1. In the Toddler room, the corner or a rug was observed to be curled up posing a tripping risk. It is acknowledged that the registered provider rotated the rug to remove the risk of a child tripping.

Infection Control:

2. Some handwashing practices observed were inconsistent and at variance with the policy in place in the service posing a risk of the transmission of infection. In the Wobbler 1 room, staff were observed cleaning children's noses but did not wash their hands afterwards.
3. The laminate layer on the side of the wooden nappy changing unit in use by the Wobbler 2 room had worn away. This surface could not be cleaned effectively and could harbour bacteria.

Safe Sleep:

4. Procedures and practices in place in relation to safe sleep for children in the Wobbler 1 and Wobbler 3 rooms were inadequate and contrary to the service's policy on safe sleep posing a potential risk to the health and safety of children as follows.
 - a. In the Wobbler 1 cot room, sleep checks were not carried out and recorded every 10 minutes. There was no sleep check carried out and recorded on 3 children aged 1 year for a period of 34 minutes, 26 minutes and 24 minutes respectively.
 - b. Sleep checks for children sleeping in the Wobbler 1 cot room during this period were recorded at 10-minute intervals retrospectively.
 - c. In the Wobbler 3 room at 12:44, 6 children aged 1 to 2 years were sleeping. Sleep checks were not carried out and recorded every 10 minutes for the sleeping children. A sleep check had been recorded at 12:25 for 2 children and there were no sleep checks recorded for the other 4 children.

Fire Safety:

5. Monthly fire drills were not completed. The last recorded fire drill was on 20 March 2026. Failure to carry out monthly fire drills may impede the safe evacuation of children and staff in the event of a fire on the premises.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1. The rug was rotated on the day to remove any immediate risk, and the team were refreshed on the service risk assessment form and identifying risks. The rug has since been replaced.
The centre management team and centre team will actively monitor and complete daily risk assessments to ensure that any risks identified are corrected immediately or removed where required.

Infection Control:

2. The team were re-trained on the service's handwashing policy, and this is being actively monitored by the centre management team.
Handwashing will be actively monitored throughout the centre-by-centre management team.
3. The laminate layer on the side of the wooden nappy changing unit was removed and replaced with a new safety barrier to ensure effective cleaning can take place.
The centre management team will continue to review changing areas regularly and ensure maintained for cleaning.

Safe Sleep:

4. (a-c) The team were re-trained in the service safe sleep policy, and a team meeting was held by the centre manager and operations manager to follow on training for sleep checks and demonstrations completed of how to complete a sleep check and the frequency of how they should be completed. The operations manager will continue to support the centre manager in observing sleep practice and providing hands on, on-site training to ensure safe sleep policy and sleep checks are completed at 10-minute intervals and recorded at the same time.
The centre management team will actively monitor sleep in all care rooms facilitating sleep and ensure all sleep checks are carried out and records are maintained.

Fire Safety:

5. The service has held a fire drill since the inspection took place and has a schedule set in place to ensure these are completed monthly.

Supporting documentation submitted

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General Safety:

Written evidence was submitted to demonstrate the corrective and preventive actions submitted by the registered provider.

Infection Control:

Written and photographic evidence was submitted to demonstrate the corrective and preventive actions submitted by the registered provider.

Safe Sleep:

Written evidence was submitted to demonstrate the corrective and preventive actions submitted by the registered provider.

Fire Safety:

Written evidence was submitted to demonstrate the corrective and preventive actions submitted by the registered provider.

Summary Comment

The corrective and preventive actions as stated by the registered provider have been deemed to address these non-compliances.

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)

A person trained in first aid was immediately available to the children at all times on the day of inspection.

(2)

(a) First aid boxes were safely stored in an easily accessible and conspicuous location within the service.

(b) A first aid box was available to the adults and children in the service at all times.

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Part VI - Safety

Regulation 26 - Fire safety measures

- (1) A registered provider shall ensure that a record in writing is kept of-*
- (a) any fire drill that takes place in the premises, and*
 - (b) the number, type and maintenance record of fire fighting equipment and smoke alarms in the premises.*
- (4) A notice of the procedures to be followed in the event of fire shall be displayed in a conspicuous position in the premises.*

Compliance Information

(1)(a)

A written record was available for the most recent fire drill which was carried out on 20 March 2026.

(b)

The number, type and maintenance record of firefighting equipment and smoke alarms on the premises was available. There was a record to show that the firefighting equipment had been serviced in August 2025, and that maintenance of the smoke alarm system had taken place on 27 March 2026.

(4)

The procedures to be followed during a fire drill and in the event of a fire were displayed in conspicuous locations within the service.