

Early Years Inspectorate Regulatory Report

Pre School

6Y7TUSLA Identifier:	TU2015LH042
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Name of Service:	Kidz Akademy Ltd
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Address of Service:	20 Greenacres, Avenue Road, Dundalk, Co. Louth
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Eircode:	A91 X432
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Name of Registered Provider:	Fiona McKenna
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Service type:	Full Day, Part Time, Sessional
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Date 1 of Inspection:	30/10/2025
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Date 2 of Inspection:	03/11/2025
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No of pre-school children:	AM	13	PM	7
Day 2	AM	22	PM	No.

Address of the Early Years Inspectorate:	Child Wellbeing Centre, Castleblayney, Co. Monaghan
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Inspection undertaken by:	M. Flood
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Title:	Early Years Inspector
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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

Kidz Akademy Ltd is a privately owned service that has been in operation since August 2005. The service provides full day care, part-time and sessional care and education to early years children aged from 1 to 6 years. The service caters for a maximum of 29 children from 07.30am to 6.00pm each weekday.

The service operates from a 2 storey purposively renovated premises in a residential area of Dundalk, Co. Louth. The premises consist of 3 care rooms namely The Senior Preschool Room located on the first floor and The Toddler room and Junior Preschool Room located on the ground floor. Ancillary accommodation includes sanitary areas, a kitchen area, a separate sleep room and storage. There is an enclosed outdoor play area to the rear and side of the premises

Staffing

There are 9 staff employed in the service including the registered provider and 5 childcare staff who work directly with the preschool children. Three staff provide relief in the service when required.

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

A sampling process was used to assess compliance under Regulation 16

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 referral was made to the Environmental Health Office for assessment and follow up if required.

Acknowledgments

The inspector would like to acknowledge the cooperation of the registered provider, person in charge, staff and children who were present on the days 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.

(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 service had a designated person in charge who is also the registered provider and a named deputy person to deputise as required. The deputy person in charge was on the premises when the inspector arrived unannounced to the service on Day 1 of the inspection. When the deputy person left the premises at 12.10pm an alternative person was available to deputise in their absence.

On the 2nd day of inspection, the registered provider and the deputy person were both present in the service for the duration of the inspection.

(2)(a),(b), (c), (d)

Following a review of the previous inspection information plus the information available during the inspection and a discussion with the registered provider it was confirmed to the inspector that there are no new members of staff

employed since the last inspection. As such, the information contained within the staff files related to the availability of written and validated references, Garda Vetting and international police vetting was reviewed at the last inspection and met the regulatory requirements.

The Garda vetting disclosures for all 9 staff members were reviewed and were found to adhere to the re-vetting timeframes as outlined in the Early Years Inspectorate Regulatory Notice, requiring services to renew Garda vetting every three years.

(4) All staff members who work directly with children had been found at the last inspection to hold an appropriate childcare qualification.

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) During the period of inspection there were an adequate number of adults working directly with the children attending the pre-school service.

(2) On Day 1 Inspection 30/10/25

On arrival to the premises at 11.00am, there were 2 rooms in operation namely The Toddler Room and the Junior Preschool Room which are located on the ground floor. The Senior Preschool Room was not in operation at this time due to a reported water leak. The following adult to child ratios were observed on arrival:

- **The Toddler Room:** There was 1 staff member working directly with the 6 pre-school children present aged 1 year – 3 years.

- **The Junior Preschool Room:** There was 1 staff member working directly with the 7 pre-school children (aged 3-4 years) and 9 children attending the school aged service.

The deputy person in charge was engaged in catering duties and also provided assistance in the care rooms as required.

On Day 2 Inspection 03/11/25

On arrival to the premises at 11.10am there were 3 rooms in operation namely, The Toddler Room and the Junior Preschool Room which are located on the ground floor and the Senior Preschool Room located on the 1st floor.

The following adult to child ratios were observed on arrival:

- **The Toddler Room:** There was 1 staff member working directly with the 6 pre-school children present aged 1 year – 2 years.
- **The Junior Preschool Room:** There were 2 staff members working directly with the 9 pre-school children (aged 3years)
- **The Senior Preschool Room:** There was 1 staff member working directly with the 7 pre-school children (aged 3years)

The person in charge who is the registered provider was engaged in catering duties and also provided assistance in the care rooms as required.

Non-Compliance Information

(8)(a) The requirement to have 2 adults on the premises at all times could not be determined as there was no staff roster available. While a staff sign in sheet was available for the week of the inspection, only 1 staff member had signed their arrival time to the service for the day of the inspection and the previous day.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(8)(a) Staff have been reminded of the importance of signing in and that they must do so upon arrival and when leaving the premises. A new sign in document has been drawn up and is now in use.

Manager will do spot checks to ensure that staff are signing in daily and make note of any changes and cover when needed.

Supporting documentation submitted

- Photographic evidence of updated staff rota and attendance record.

Summary Comment

The registered provider submitted details of the corrective and preventative actions taken in the service to address the non-compliance together with photographic evidence. Based on the information submitted the non-compliance identified under Regulation 11 has been addressed.

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:

- (g) the policies, procedures and statements the service is required to maintain in accordance with Regulation 10;
- (h) details of attendance by each pre-school child on a daily basis;
- (i) details of staff rosters on a daily basis;
- (k) details of any accident, injury or incident involving a pre-school child attending the service.

Compliance Information

(1)(h) Documentary evidence was available of the daily attendance of each child in the service and included the arrival and departure times of each child.

Non-Compliance Information

- (1)
- (g) The policies and procedure for the service were not in keeping with the requirements of Regulation 10. This does not support staff to standardise and implement best practice.
- For example: The policies and procedures were located in 2 separate folders. When questioned the registered provider was not sure which copy was the most up to date. On review of the folders by the inspector, one folder contained loose sheets and blank pages with no clear guidance what policies were contained in the folder. The 2nd folder contained policies and procedures which were dated June 2015 and also referenced the previous 'out of date' Childcare Regulations 2006.
- (i) A staff rota was not available for inspection in the service. When questioned on the 1st day of inspection the deputy person stated that she 'did not know where it was'. It was also confirmed by the registered provider on the 2nd day of inspection that there was no roster available.

This practice is at variance with the corrective and preventative actions submitted by the registered provider in response to a previous non-compliance for ‘an inadequate staff roster ‘which was found at the last inspection. This response stated that *“the staff roster was changed to provide the correct information. All staff have been informed about the new roster and how to implement it”*. These corrective and preventative actions submitted failed to prevent reoccurrence of this non-compliance.

(k) It is acknowledged that an accident report was completed for a child who tripped in the Toddler Room on the first day of the inspection. However, when the inspector reviewed a sample of 11 additional accident and incident reports, these were found to be incomplete. One of the reports did not contain a parental signature to indicate that that they were informed of the incident. Ten out of the 11 reports did not contain the registered providers signature indicating that they were informed about the incident or that they had reviewed or carried a risk assessment if deemed necessary.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(1)

(g) Policies and procedures have been updated with the support of an external company. The said documents are now in the one folder and a copy has been emailed to all staff for revision.

Staff have received, read and replied by return e-mail acknowledging confirmation of their understanding of the policies. Going forward, staff have been advised to reach out to management if they do not have an understanding of the policies or procedures.

(i) A roster has been drafted and has been placed on the same document as the sign-in sheet so all staff are aware of it and of any changes that may have been made to their hours.

Reviews and checks carried out regularly to ensure the roster is running smoothly and being completed correctly.

(k) Manager is always informed of any accidents that happen on the premises but due to managers own self-negligence the reports were not signed by her, however reports are always signed by key workers.

Manager is aware that she must sign all accident reports going forward.

Manager will check the accident report folder weekly to ensure that no accidents that have occurred, have been missed. The deputy manager will sign the forms if the manager is unavailable.

Supporting documentation submitted

- Confirmation that policies and procedures for the service have been updated in accordance with regulatory requirements.
- Photographic evidence of updated staff rota and attendance record.

Summary Comment

The registered provider submitted details of the corrective and preventative actions taken in the service to address the non-compliances together with documentary and photographic evidence. Based on the information submitted the non-compliances identified under Regulation 16 have been addressed. Implementation and sustainment of the corrective and preventative actions submitted will be reviewed at the next inspection.

Part V - Care of Child in Pre-school Service

Regulation 19 - Health, welfare and development of child

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

- (a) each child's learning, development and well-being is facilitated within the daily life of the pre-school service through the provision of the appropriate activities, interaction, materials and equipment, having regard to the age and stage of development of the child, and*
- (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)(a) The following examples demonstrate how the registered provider ensured that children's learning, development, and well-being was facilitated in the service.

Basic Needs

- The toilet trained children were encouraged to be independent with toileting and discreet supervision was also provided by staff as required.
- Nappies were changed regularly and in a timely manner with pleasant interactions observed between children and staff.
- Individual child-led sleep needs were facilitated in the service as the staff followed the children's routines. For example, two children were asleep when the inspector arrived at the premises, the staff reported that the children were displaying signs of tiredness and were put down to sleep.

- Dinner time was observed to be a social time with staff and children engaging in conversation. The children were encouraged to be independent with feeding, with one staff member observed encouraging the younger children to self-feed.
- The children attending the Junior Preschool room were observed to access the partially covered outdoor area off the care room. The door was open, so the children were facilitated to choose between the outdoor area or tabletop activities in the care room.

Supporting Relationships

- Parents were informally communicated with at drop off and collection times. The staff reported that most communication with parents is carried out through this method. Social media, email and phone calls are also reported as being used on a regular basis.
- When questioned staff in the Junior Preschool room were familiar with the strategies being implemented in the service for children who required additional supports.

Non-Compliance Information

The registered provider did not ensure that each child's learning, development, and well-being was facilitated within the daily life of the service in relation to the following:

1. The consistency of the dinners provided on both days of the inspection was not considered appropriate for the age and stage of development of the children in attendance. There was no variety in textures and all children ranging in age from 1 – 4 years were provided with a pureed dinner of 'Irish stew' and mash potato on the first day of inspection and a pureed dinner of mince and mash potato on the 2nd day.
2. The majority of toys and equipment in the Toddler Room were on high shelves, in heavy boxes and were inaccessible to the children. For example, the plastic blocks, kitchen equipment, jigsaws and some books were contained within heavy plastic containers or on high shelves and the children could not access them independently.
3. The physical and material environment in the Toddler room was not adequately resourced for the number and developmental stage of the children attending. Many of the toys were plastic or wooden with a limited variety of specific areas of interest, textures, shapes and sizes.
4. The programme of activities observed for the children attending the Toddler Room was limited e.g., on the 1st day of the inspection while it is acknowledged that the children were observed to engage in an adult initiated jigsaw activity and a reading activity when an additional staff member arrived on the premises. For most of the time prior to this the children (aged 1-2 years) were observed to wander around

the Toddler room without any engagement from the staff in attendance as they were more focused on meeting the children's basic needs or tidying up the room.

5. The children attending the Toddler Room did not get a change of environment to the outdoor areas on either day of inspection.
- 6.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

1. There are a variety of textured meals available (sausages, stew, mince, chicken, fish fingers) Food is provided by a HSE approved food supplier, vegetables (carrots, turnips) are mashed before they mixed with dinners as many children are reluctant to eat their meal when whole pieces of vegetables are visible, this ensures nutrient intake of the children's daily dietary needs.
Environmental Health Office has been contacted and completed a review of the menu and are satisfied with it. Manager will review menus monthly to ensure all dietary requirements are met and alterations will be made to the menu if needed.
2. Toys have been moved to the lower shelves at an appropriate level for the children to access them at all times. The room has been re-arranged to give the children more independence and access to materials.
The service has engaged with an external early years quality development agency to review the layout and materials within the service. Following contact, the agency is liaising with staff to review and change the layout of the room.
3. Additional materials have been added to the toddler room as there are many types of play that takes place in the toddler room which were not on display at the time of the inspection as they are stored in different areas of the building due to lack of storage space in the toddler room. The registered provider is engaging with the quality development agency regarding the materials, equipment and space in the toddler room.
4. The daily routine for the Toddler Room has since been revised. The updated daily room routine will be displayed in the room, including visual aids. Assistance will also be provided for staff with the classroom curriculum from the quality development agency.
5. Each room has their own set times to access the covered outdoor area.
Going forward the daily timetable will be placed in each room to ensure all staff are aware of times for access to the covered outdoor area in circumstances where the main outdoor area cannot be used

Supporting documentation submitted

Photographic evidence of:

- Outdoor Rota for each class room.
- A daily routine for the Toddler Room including morning and evening.

- Material environment including toys on low shelving that are accessible.

Summary Comment

The registered provider submitted details of the corrective and preventative actions taken in the service to address the non-compliances together with documentary evidence. Further information was requested by the inspectorate and additional photographic evidence was submitted. Assurances have been provided that the service has commenced engagement with an external quality development agency. Based on the information submitted the non-compliances identified under Regulation 19 have been addressed. Implementation and sustainment of the corrective and preventative actions submitted will be reviewed at the next inspection.

Part V - Care of Child in Pre-school Service

Regulation 20 – Facilities for rest and play

(1) Subject to this regulation, a registered provider shall ensure that-

(b) there are adequate and suitable facilities for a pre-school child to rest during the day, and in the case of an overnight pre-school service, during the day and the night.

Non-Compliance Information

(1)(b) The rest and sleep facilities in the service were found to be inadequate, as demonstrated by the following:

- There were no adequate rest facilities available in the care rooms for a child to rest or take a break from activities when they required. For example: one child in the Toddler room was observed to attempt to lie down on a wooden bench in the room and when they rolled off the bench they tried to lie down again but could not settle.
- One of the cot mattresses was unsuitable as it was ill-fitting and had a foothold present in the cot which is a potential safety hazard. This is a recurring non-compliance from the last inspection carried out on 15/07/2024 and is at variance to the corrective and preventative actions submitted by the registered provider in response to the previous non-compliance which stated that; *“Checklists for cleanliness and upkeep done for each cot to be carried out daily/weekly. All staff informed about checklists and how to implement them”*. However, when the inspector reviewed the checklists, the last recorded checklist was dated August/ September 2024. The corrective and preventative actions submitted following that particular inspection failed to prevent reoccurrence of this non-compliance.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(1)(b)

- A quiet/rest area has been added to the toddler room furnished with soft calming materials.

- Regular checks do be done on the resting area to ensure it is working and the children are benefiting from the addition. Soft furnishings will be taken home weekly and washed.
- A new mattress has been purchased. Checklists have been updated and are being carried out daily with the other daily checklists. This task has been delegated to a specific staff member.
- Manager will perform weekly checks on the new updated daily checklists.

Supporting documentation submitted

- Photographic evidence of a soft area.
- Photographic evidence of a receipt for the purchase of a mattress and sheet.
- Documentary evidence of a checklist for the cots in the sleep room

Summary Comment

The registered provider submitted details of the corrective and preventative actions taken in the service to address the non-compliances together with documentary/ photographic evidence. Based on the information submitted the non-compliances identified under Regulation 20 have been addressed. Implementation and sustainment of the corrective and preventative actions submitted will be reviewed at 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

It was observed that the registered provider has taken the following measures to safeguard the health, safety and welfare of the pre-school children attending the service including:

General Safety:

- The external and internal doors were appropriately secured to prevent the children from exiting unsupervised and to restrict unauthorised persons from gaining access to the Early Years' service.
- The outdoor play areas were gated and secured with walls and fencing to prevent a child gaining unsupervised access to a roadway or other source of danger.
- The designated emergency exit doors were clear and unobstructed.
- The staff were observed to accompany the children to the front door at collection time.

- The kitchen area was inaccessible to the preschool children.
- Two highchairs were observed in use during dinner time. The safety harnesses were also used to ensure the safety of the children.

Infection Control:

- There was a constant supply of thermostatically controlled hot water, liquid soap and paper towels to support effective hand washing practices.
- Pedal operated waste bins were observed in use and were appropriately maintained on the day of the inspection.

Safe Sleep:

- Physical safe sleep observations were carried out at 10-minute intervals in accordance with best practice guidelines and documented on the written log available.

Non-Compliance Information

The Inspectorate is not assured that adequate steps have been taken to ensure the health, safety and welfare of the pre-school children attending the service. Two of the five non-compliances observed at this inspection were found at the previous inspection on 15/7/2024. The registered provider submitted corrective actions to indicate that the non-compliances would be addressed and also gave assurances that they would not reoccur however these actions and assurances were inadequate.

General Safety:

1. The maintenance records for the firefighting equipment and smoke alarms detailed that the equipment was last serviced on 07/2024 and 24/03/2024 respectively. This is not in accordance with best practice guidelines that requires such equipment to be serviced at a minimum annually or more frequent if deemed necessary. This is a recurring non-compliance from the last inspection carried out on 15/07/2024 and is at variance to the corrective and preventative actions previously submitted by the registered provider in response to the non-compliance which stated that; *“Annual Fire safety maintenance carried out. New fire extinguishers purchased and fitted. Fire safety system has been set up for annual checks with a reminder system in place”*. The corrective and preventative actions submitted following that particular inspection failed to prevent reoccurrence of this non-compliance.

Infection Control:

2. Inadequate hand washing practices were observed on both days of inspection e.g. on Day 1 it was observed following nappy changing that the child’s hands or the staff member carrying out the procedure did not wash their hands. On both days of inspection, the children attending the Toddler room did not

have their hands washed before dinner. This is a recurring non-compliance from the last inspection carried out on 15/07/2024 and is at variance to the corrective and preventative actions previously submitted by the registered provider in response to the non-compliance which stated that; *“Staff meeting held to remind staff of the importance of correct hand washing. Infection control and good hand washing practises to be included regularly in staff meetings”*. The corrective and preventative actions submitted following that particular inspection failed to prevent reoccurrence of this non-compliance.

3. On both days of the inspection some perishable items e.g. yoghurt, cheese and chicken nuggets were observed inappropriately stored in the children’s lunch bags on the hall floor, rather than in a refrigerator.
4. A grey coloured hand towel was observed on the radiator in the downstairs sanitary. Some of the children were observed to use the hand towel to dry their hands after handwashing which is a cross-infection risk.
5. Nappy changing was not carried out in accordance with best practice guidelines. For example, the staff member observed carrying out a nappy change did not wear an apron during the procedure and did not wipe the unit down after the procedure was carried out prior to the next child having their nappy changed.

Corrective & Preventive Action submitted by the Registered Provider

Corrective & Preventive Actions

General Safety:

1. Fire equipment has been serviced, manager acknowledges that the inspection dates were not checked. The manager has recorded the dates in advance for the next inspection.

Infection Control:

2. A staff meeting was held and the importance of hand washing was discussed at length. Manager has overseen washing hands to ensure it is being done correctly. Random spot checks to take place during hand washing times by manager.
3. Staff have been reminded to visually check lunch bags in the morning for perishable foods, any perishable foods must be stored in the fridge with the child’s name on them. Spot checks carried out on children’s lunch bags to ensure perishable food is stored correctly.
4. Blue paper towels are available in the bathroom. Staff have been reminded to store items in their correct area. Manager will do checks to ensure there is no towels left in the bathroom and that children are washing and drying hands correctly.
5. A staff meeting was held and a step-by-step plan was printed, read and signed by each member of staff. The manager directly observed each staff member completing nappy changing and hand-washing

procedures to ensure full compliance with the required procedures. The Manager will be completing random spot checks on staff when completing nappy changes.

Supporting documentation submitted

- Documentary evidence of service record for firefighting equipment and fire alarm system dated 19/11/2025
- Nappy changing procedure including staff signatures
- Confirmation of staff meeting in the service.

Summary Comment

The registered provider submitted details of the corrective and preventative actions taken in the service to address the non-compliances together with documentary evidence. Assurances have been provided that the manager will provide oversight including additional checks on implementation of the actions detailed. Based on the information submitted the non-compliances identified under Regulation 23 have been addressed. Implementation and sustainment of the corrective and preventative actions submitted will be reviewed at the next inspection.

Part VI - Safety

Regulation 26 - Fire safety measures

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

Compliance Information

- (1)(a) A record was maintained of all fire drills which had been completed in the service. Fire drills were carried out monthly. The last recorded fire drill took place on 18/09/2025.
- (b) A record was kept of the number, type and maintenance of the firefighting equipment and smoke alarms in the premises. Firefighting equipment was last serviced on 07/2024 and the fire alarm on 24/03/2024.
- (4) Notices of the procedures to be followed in the event of a fire were conspicuously displayed in the premises.