

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015LH078
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Name of Service:	Pugwash Bay Ltd
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Address of Service:	Lis na Dara, Carrick Road, Dundalk, Co. Louth
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Eircode:	A91 VR66
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Name of Registered Provider:	James Moore
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Service type:	Full Day
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Date(s) of Inspection:	06/03/2025
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No of pre-school children:	AM	61	PM	44
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Address of the Early Years Inspectorate:	Early Years Inspectorate Child Wellbeing Centre, Castleblayney Co. Monaghan
Inspection undertaken by:	M. Flood and S. Skinnader
Title:	Early Years Inspectors

Authority to Inspect

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

Conditions if applicable	Not Applicable.
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Description of service

Pugwash Bay Ltd, Lis na Dara is one of a chain of 5 Pugwash Bay services operated in Co. Louth and Co. Meath in addition to a further 6 early years services operated by the registered provider nationally. This full day care service is registered to accommodate 72 pre-school children and caters for babies and preschool children up to the age of 6 years. The service operates from 8.00am to 6.00pm each weekday There are two sleep rooms in place, the larger of which contains 8 standard cots, and which is located between and accessible from both the Jelly Babies Room and the Smarties Room. The second smaller sleep room which is not currently in use, is located on a corridor adjoining the Jelly Babies Room. A fully enclosed outdoor play area is provided on the premises

Staffing

There are 24 staff employed in this service, 18 of whom work directly with the children including the service's Quality & Governance Co-ordinator, the manager and deputy manager. Six staff members are employed to carry out administrative, catering, housekeeping, and maintenance duties. Four students are also currently present in the service.

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 and as a result, the scope of the inspection included the Smarties and Rolos Rooms and Little Buttons and Marshmallow Rooms.

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

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

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

Acknowledgments

The inspectors wish to acknowledge the co-operation 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, and*
- (c) there is a clear management structure in the service that identifies the lines of authority and accountability in the service and the specific roles and responsibilities of each employee and unpaid worker.*

(2) A registered provider shall ensure that each employee, unpaid worker and contractor is suitable and competent taking into consideration the nature of the needs of children, including by-

- (a) consideration of references from the person's past employers, if any, and in particular the most recent employer, if any,*

(b) consideration of references from reputable sources in the case of a person who has no past employers,

(c) consideration of the vetting disclosure received from the National Vetting Bureau of the Garda Síochána in accordance with the Act of 2012 in respect of the person, and

(d) ensuring, insofar as is practicable, that where a person has lived in a state other than the State for a period of longer than 6 consecutive months, he or she provides police vetting from the police authorities in that state.

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

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

Compliance Information

(1)(a) & (b) The service had a designated person in charge and named deputy person to deputise as required. The person in charge and deputy person were on the premises when the inspectors arrived at the premises and were present throughout the inspection.

(c) When questioned staff were familiar with the management structure within the service and the roles and responsibilities of the various staff members.

(2) Twenty-four staff files and 4 student files were reviewed

The following was observed:

(a) & (b)

- There were 2 written references from a past employer or an alternative source available for 24 members of staff and 3 students.
- One student had 1 written reference available.

Fifty- two out of 55 written references available were validated as required.

(c) A processed Garda Vetting Disclosure was available for 24 members of staff and the 4 students. The registered provider 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) International police vetting was available for 10 staff and 2 students who had resided outside the Irish jurisdiction for a period of 6 months or more as an adult.

(4) Documentary evidence was available to confirm that 16 members of staff who works directly with the children held at least the minimum required level 5 childcare qualification on the National Framework of Childcare Qualifications or a qualification deemed equivalent.

Non-Compliance Information

The following documents were not available and were not in place prior to the staff member commencing in the service;

(2)(a)(b)

1. One student did not have a 2nd written and validated reference available for inspection.
2. Insufficient documentary evidence was available to indicate that 3 written references were appropriately validated

(d) Documentary evidence of the required international police vetting was not available for one student and one staff member who had resided outside the Irish jurisdiction for a period of 6 months or more as an adult.

(3) The required documents relating to written and validated references were not complete prior to 2 students and 1 staff member commencing in the service.

(4) From the documentary evidence reviewed there was insufficient evidence to demonstrate that 2 members of staff, who work directly with the pre-school children held at least the minimum required level 5 Childcare Qualification or a qualification deemed equivalent by the Minister.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(2)(a) Second references for the individual were obtained and verified on 07.03.2025. References for the relevant staff member have been added to the Tusla staff folder. A vetting checklist will be carried out for all new staff and students to ensure that all required documents (including two verified references and police clearance) are tracked and followed up promptly. The designated person responsible for recruitment and vetting will review the file before any staff or student commences placement to confirm all documents are in place. Monthly audit checklist will be carried out for all staff to ensure everything is in the file. This be followed by quarterly audit done by area manager.

(d) Police clearance has now been received for the student in question. The staff member, whose police clearance was outstanding, has submitted a new application to ensure compliance. Regular internal audits of staff files will be conducted on a monthly basis to prevent any future oversight.

(3) To address the identified non-compliances, references for one staff member and two students have been obtained, verified, and securely filed in accordance with regulatory requirements. Prior to any staff or student commencing placement, the manager will ensure that all required documentation, including references and the completed student placement application form, is collected and verified. A monthly internal audit will be carried out by the manager to ensure compliance with documentation requirements. A quarterly audit will be conducted by the area manager to provide an added layer of oversight and accountability.

(4) Additional documentation confirming the qualifications of one staff member has been obtained and filed appropriately. We have now received the results from the second staff member. Additionally, their qualification is included on the DCYA list of approved qualifications. A strict policy is in place to ensure that no staff member will commence work until official documentation confirming full qualification has been received and verified. This includes a certified letter or certificate explicitly stating that the individual is fully qualified and has successfully completed their training.

Supporting documentation submitted

- Evidence of outstanding written references and validations.
- Evidence of international police vetting for 1 student and evidence of a police vetting application for 1 staff member.
- Evidence of staff and student staff checklist templates.
- Evidence of the required qualification, translation and the early years qualification recognition document.
- Evidence of college results for 1 staff member.

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. This information was reviewed and based on the information submitted the non-compliances identified under Regulation 9 (2) (a)&(b) and (3) have been adequately addressed.

However the following remains outstanding:

Regarding Regulation 9 (2)(d) It is acknowledged that a record of international police vetting was received for 1 student, however this was the incorrect student and therefore this remains outstanding. Evidence of a police

vetting application for 1 staff member has been received, however the completed certificate has not been received to date. Regulation 9 (2)(d) has not been adequately addressed.

Regarding Regulation 9 (4) Documentary evidence of the required qualification documents for 1 staff member has been received and accepted. However, insufficient evidence has been submitted to confirm that a 2nd member of staff has the required minimum level 5 childcare qualification, or a qualification deemed equivalent by the Minister. Therefore Regulation 9 (4) has not been adequately addressed.

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) On the day of inspection there was an adequate number of staff members working directly with the children attending the service.

(2) The adult to child ratios were correct in the service when the inspectors arrived unannounced at 10.45am and remained so throughout the inspection.

The following adult to child ratios were observed during the inspection:

- In the Jelly Babies Room there were 9 preschool children aged 1 year being cared for by 2 staff members. One student was also present in the room.
- In the Smarties Room there were 9 preschool children aged 1 to 2 years being cared for by 2 staff members. One student was also present in the room.
- In the Little Buttons Room there were 10 preschool children aged 2 to 3 years being cared for by 3 staff members (One of these staff members was providing relief in the care rooms for break times). One student was also present in the room.

- In the Skittles Room there were 8 children aged 3 years 5 months to 4 years being cared for by 1 staff member.
- In the Rolos Room there were 17 pre-school children aged 3 to 5 years being cared for by 2 staff members. One student was also present in the room.
- In the Marshmallows Room there were 8 pre-school children aged 3 to 5 years being cared for by 1 staff member.

The person in charge and deputy person in charge were on the premises and provided assistance in the care rooms as required. Two administration staff and 1 staff member who was engaged in catering duties were also present in the service. The services Quality and Governance Co-ordinator arrived on the premises at 11.35am and was present in the service for the duration of the inspection.

(8)(a) The registered provider ensured that 2 adults were present on the premises at all times, verified by staff rosters and staff attendance records maintained at the service.

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;
- (k) details of any accident, injury or incident involving a pre-school child attending the service.

Compliance Information

- (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. This information is recorded on the services record and communication tablet.
- (i) Up to date daily/weekly staff rosters were available in the service and were reflective of the staff present in the service.
- (k) Documentary evidence was available of accidents and incidents involving a preschool child that occurred in the care rooms. All incidents reviewed were complete and were also signed by the service manager and child's parents indicating that had been informed about the incident

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.

Compliance Information

There were 6 rooms in operation on the day of the inspection namely the Jelly Babies, Smarties, Rolos, Marshmallows, Little Buttons and Skittles Rooms.

A sampling process was therefore used and as such the Smarties, Rolos, Marshmallow and Little Buttons Rooms are the subject of this inspection.

(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 Care Needs

- The children's care needs were attended to on a regular basis for example, hands were washed before snack times, after messy play and outdoor play. The children's noses were cleaned regularly throughout the day.
- Healthy eating was promoted in the service as was evidenced by the dinner and snacks provided by the service. All hot meals are provided by an external catering company and reheated by the service. On the day of the inspection the lunch time/dinner was provided at 11.10am in the Jelly babies and Smarties rooms. Dinner was provided a little later at approximately 11.30am for the children attending the other rooms. Dinner was observed to consist of coconut chicken curry and potato cubes. Breakfast was reported to consist of breakfast cereal and was also provided by the service between 8.00am and 8.30am. All snacks were brought in by the children from home, and these were stored appropriately in the service. The cook on the day advised that the afternoon tea consisted of custard, fresh fruit and raisins. The children who required assistance were supported with feeding as required. Independence was encouraged for the older children who were also supported to tidy up after they were finished. Hydration stations were available in the care rooms where the children could access their drink bottles/cups as they required.

- The children who were toilet trained were encouraged to be independent with toileting. Discreet supervision was also provided by staff as required. Gentle handwashing reminders were given to the children after toileting.
- Nappy changing was observed to be carried out promptly and good interactions were observed between the staff members and children during this time. Staff sang songs and engaged in conversation with the children.
- Individual child-led sleep needs were facilitated in the service as the staff followed the younger children's routine. The older children were facilitated to sleep at the allocated sleep time after dinner/lunch.
- All children had a change of environment into the outdoor area. All children who accessed the outdoor area were dressed appropriately to go outside.

Supporting relationship around children

- A key person system was in place in the service with staff members allocated a group of children. The key person took the lead in supporting that group's transitions, recording their daily activities, maintaining relationships with their families, and documenting their learning and development.
- Communication between the parents and staff was informal at drop off and pick-up and through the use of an electronic application, an "app", emails and also through parent/ teacher meetings. The staff also reported that they plan to develop a monthly 'newsletter' to inform parents of upcoming activities and events.
- Individual plans for children who required additional supports in the service were available and were being implemented. When questioned the staff were familiar with the strategies being used in the service to support children to participate.
- Soft tones, positive and respectful language were observed in interactions between the children and staff present. For example *"Are you finished dinner baby...would you like me to help you....?"* During sleep time *"are you ok babywould you like me to cover you...?"*

The staff were supportive and responsive in promoting positive behaviours

Physical and Material Environment

- Adequate child sized furniture and equipment was in use throughout the service.
- Toys and equipment were adequate for the children in attendance and were positioned on open low-level shelving in all rooms. This promoted independence and facilitated choice for the children.
- A variety of the children's art activities were on display throughout the service which included; jellyfish, shamrocks, St. Patricks Day flags.

Non-Compliance Information

1. In the Little Button's Room, transition periods were generally chaotic and noisy. For example, when the children were getting ready for their dinner the noise levels in the room increased and at one stage 3 different members of staff were observed to ask the same child had they washed their hands within a few seconds of each other. Additionally, when the children were getting ready for bed and the room was being prepared for sleep time this transition was protracted and took from 11.57am – 12.27pm until all children were eventually lying down on their mattresses to sleep. During this period the room was chaotic for example; some children were observed running around, climbing on mattresses as they were being set up and going to get toys, while staff assisted children with getting settled and comforted a child who was upset.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Actions

The manager has collaborated with the staff in the room in question to develop and implement a new routine aimed at improving structure and consistency. A designated task sheet has been introduced to clearly assign responsibilities to each staff member, supporting a smoother daily transition and improved workflow. The supervisor has been appointed to support the team during sleep time, providing additional oversight and assistance with preparation and transition activities.

Monthly staff room meetings have been scheduled to review progress, address any emerging challenges, and ensure continued improvement. Daily check-in by management is being conducted to monitor routines, provide support, and maintain consistent communication with room staff.

Supporting documentation submitted

- Evidence of The Little Buttons daily routine.

Summary Comment

The registered provider submitted details of the corrective and preventative actions taken in the service to address the non-compliances together with photographic evidence. Based on the information submitted and the assurances given that management will monitor routines and provide support for staff, the non-compliance identified under Regulation 19 has been adequately addressed. Implementation and sustainment of the corrective and preventative actions detailed will require assessment 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.

(3) A registered provider of a full day care service, a part-time day care service or a childminding service, other than such a service to which paragraph (2) applies, shall ensure that-

(a) a suitable, safe and secure outdoor space to which the pre-school children attending the service have access on a daily basis is provided on the premises,

Compliance Information

(1)(b)

- There were 2 separate sleep rooms in the service. On the day of the inspection 1 of the sleep rooms was being used for storage and is not currently being used for sleep. The 2nd larger sleep room adjoining The Jelly babies' room and Smarties Room was observed in use. The room consisted of 8 standard cots which were adequately spaced. An adult chair was present in the room for staff to sit and comfort a child who required it. The room temperature was maintained within the required safe sleep range.
- The Smarties Room and Little Buttons rooms were converted to a sleep room after dinner time. A number of age-appropriate cots beds and day beds were observed in use.

(3)(a) Outdoor area

The children have access to an enclosed outdoor play area to the rear of the building which was divided into 3 separate areas:

Area 1: is located directly off the Jelly baby's room is reported not currently in use as repair works are planned to be carried out.

Area 2 'The Small garden' is located off the Smarties Room. The area was partially covered and had an artificial grass surface. The area is enclosed and secured by fencing and gates. A number of pieces of age-appropriate play equipment were available including, a fence mounted gadget board, plastic kitchen, toy boxes, foam cushions, chair, push toys.

Area 3 "The Large garden" is located to the rear of the building. This area was spacious and had a variety of surfaces including artificial grass surface and concrete paths. It was secured with fencing and gates.

Non-Compliance Information

(1)(b)

1. The soft/rest area within the Rolo's room was inadequate as the rest area was considered too small and consisted of 2 child size chairs, a bathmat on the floor and 3 cushions for the 17 preschool children in attendance.

(3)(a)

In the large outdoor area, the following hazards were identified:

1. There was a broken plastic toy pram in the area which was a potential injury hazard.
2. In the area directly outside the Skittles Room there was a piece of one of the metal drain covers missing which was a potential trip hazard.
3. The concrete around the manhole outside the Skittles Room was cracked and chipped away, this was a trip hazard.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Actions

(1)(b)

1. The soft/rest area within the Rolos room has been improved. A new rug and additional cushions have been added to enhance comfort and ensure the area meets the needs of the children using it. The curriculum is now being planned with a specific focus on ensuring that all defined areas within the room are appropriately set up. This includes providing adequate resources and equipment to support the developmental needs of the children and accommodate the number of children present in the room.

(3)(a)

1. A broken plastic toy pram was identified and has been removed from the premises to eliminate risk of injury.
2. The missing piece of the outdoor drain has been reported to the maintenance to ensure safety and prevent tripping hazards we have temporary obstructed the area.
3. The concrete surrounding the manhole outside the Skittles room has been repaired to eliminate uneven surfaces and potential safety risks.

The manager will now conduct daily morning safety checks of the outdoor garden area. Any hazards identified will be immediately removed or reported, with the maintenance person contacted without delay to ensure timely resolution of any safety concerns.

Supporting documentation submitted

Photographic evidence of soft area and manhole area.

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 20 have been addressed. Implementation and sustainment of the corrective and preventative actions detailed will require assessment 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.

Non-Compliance Information

The registered provider did not ensure that all reasonable measures were taken to safeguard the health, safety and welfare of a preschool child in relation to the following:

General Safety:

1. A number of sharp corners on low-level storage units were exposed in both The Rolos and Little Buttons care rooms. This is a potential injury risk.
2. The corners of the floor mats in the Marshmallow and Little Buttons Room were curling up and potential trip hazards.

Infection Control:

3. There was an infection control risk observed due to the lack of appropriate sanitary and washing facilities servicing the Jelly baby's room. A lidded bucket was being used to hold the contents of a potty for a child who was being toilet trained. This bucket wasn't immediately emptied after use and was held on at least 2 occasions. The staff reported that the contents of the bucket were then transferred to the staff sanitary area on the other side of the building to be emptied.
4. Four out of 8 cots in the Sleep Room were in an unhygienic condition. Large cobwebs were observed extending over the latts and base of the cots.
5. When the Little Buttons Room was being set up for sleep time, the staff member was observed to place the children's individual sheets and blankets on the sleep mats and then to stack the sleep mats on top of each other. This is a cross-contamination risk. In addition, a few different children were observed to climb and lie on the mats when they were being placed out on the floor.

Corrective & Preventive Action submitted by the Registered Provider

Corrective & Preventive Actions

General Safety

1. All sharp corners in the relevant areas have been safely covered to reduce the risk of injury.
2. Two new rugs have been purchased and placed in the rooms to improve safety and comfort for the children. The manager will carry out daily morning safety checks in all rooms to identify and address any potential hazards, including exposed corners or inadequate soft furnishings. This will ensure a consistently safe environment for the children.

Infection Control

3. The child has been moved to a room with toilet facilities, as a space became available in an older group. Staff have been reminded of maintaining hygiene and adhering to infection control protocols. The Infection Control Policy has been circulated to all staff members.
4. The cots room and the cots have been cleaned immediately. The manager has implemented a new cleaning checklist and routine for the cleaner, which includes daily cleaning of the cot room. Daily checks during sleep time are now carried out by the manager or supervisor to monitor hygiene and general room standards.
5. The involved staff member was spoken to by the manager regarding the importance of following hygiene protocols, specifically relating to infection control.

Supporting documentation submitted

- Photographic evidence of cleaning sheet template
- Infection control policy review confirmation by staff members

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. Further information and assurances were also provided by the services designated person in charge that adequate and suitable toilet facilities were available for the children attending all care rooms. Based on the information submitted the non-compliances identified under Regulation 23 have been addressed. Implementation and sustainment of the corrective and preventative actions detailed will require assessment at the next inspection.

Part VII - Premises and Space Requirements

Regulation 29 - Premises

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

- (c) kept adequately lit, heated and ventilated*
- (d) cleaned, maintained and repaired, as required, and*
- (e) equipped with adequate and suitable sanitary facilities.*

Non-Compliance Information

- (c)
1. A strong odour was evident in a number of areas in the service indicating that the ventilation may be inadequate e.g. in the nappy changing area off the Smarties Room and the toilet area off the Rolos Room.
- (d)
2. Some areas of the premises were in a state of disrepair as evidenced by the following observations; Large brown stains were observed on the ceiling and pillar of the nappy changing area off the Smarties Room. Paint was observed chipping off the walls in the sanitary area off the Rolos Room. This is a recurring non-compliance from the last inspection which was carried out on 25/06/2024. As a corrective action, the registered provider stated that measures were put in place to investigate and repair the matter and to ensure it did not reoccur. However, the remedial and preventive measures outlined were inadequate as the non-compliance was evident at this inspection.
 3. Some of the sanitary areas on the premises were in an unhygienic condition. For example; large accumulations of dust were observed in the toilet and lobby areas off the Rolos Room and ingrained dirt was on the floor at the sink of the toilet area. Large cobwebs were observed extending over the walls and the ceiling of the nappy changing area off The Jelly Babies room. The extractor fan covers in the toilet area of the Rolos room and the nappy changing area of the Smarties room were caked with dust and dirt. Black staining was observed behind the sink in the Marshmallow room and the paint on the wooden plinth was beginning to peel.
 4. The top of one of the tables in the Marshmallow Room was chipped and in disrepair.
 5. Shelving units in some of the rooms were in a state of disrepair as the veneer on the bottom of the units was peeling /hanging off.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Actions

1. All ventilation systems throughout the premises have been thoroughly checked and confirmed to be in full working order. Any dust or blockage issues were addressed immediately to ensure proper airflow and compliance with health and safety standards. The manager will now conduct monthly ventilation checks as part of the site's routine maintenance schedule. Any issues identified will be addressed promptly to ensure continued compliance and a healthy environment for children and staff.
2. The walls of the Smarties Room and the nappy changing room have been cleaned, and necessary areas have been freshly painted to maintain hygiene and appearance. The sanitary area in the Rolos Room has also been cleaned and refreshed.
3. The toilet and lobby areas were immediately cleaned, and all cobwebs throughout the building were removed. The wooden plinth in the Marshmallow Room has also been repainted to improve cleanliness and visual condition. The manager will conduct weekly spot checks of walls across all rooms, as part of the ongoing maintenance and cleanliness audit to ensure walls are clean and well-maintained. A new cleaning checklist and routine has been implemented for the cleaner to follow daily. In addition, management is exploring the option of hiring an additional cleaning staff member to support daily cleaning duties and ensure a consistently high standard is maintained.
4. A corner protector has been installed on the top of the table in the Marshmallow Room to eliminate risk of injury. The manager will perform weekly spot checks of all room corners to ensure corner protectors remain in place and in good condition, and that corners are free from damage or buildup.
5. Shelving units have been covered with connecting paper to enhance cleanliness and safety. The manager will also carry out weekly checks on shelving units as part of regular maintenance reviews to ensure protective coverings remain intact and hygienic.

Supporting documentation submitted

- Manager monthly checklist.
- Photographs of painted parts, table and shelving units.
- Cleaning sheet templates

Summary Comment

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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 29 have been addressed. Implementation and sustainment of the corrective and preventative actions detailed will require assessment at the next inspection.