

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015LK089
Name of Service:	Karibu Montessori
Address of Service:	The Newtown Centre, Annacotty, Co. Limerick.
Eircode:	V94DK02
Name of Registered Provider:	Liza Eyres
Service type:	Full Day, Part Time, Sessional
Day 1 Inspection:	28/05/2024
Day 2 Inspection:	04/06/2024

No of pre-school children:	AM	78	PM	72
No of pre-school children:	AM	83	PM	74

Address of the Early Years Inspectorate:	Tusla Early Years Inspectorate Office, 2 nd Floor Estuary House, Henry Street Limerick
Inspection undertaken by:	J Ryan E Browne
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

Karibu Montessori is a full day childcare service located in the Newtown Centre in Annacotty, County Limerick. It operates Monday to Friday from 7.45am to 6.00pm and provides full day, part time and sessional services to children of all pre-school ages. A service for school aged children is offered each afternoon.

The service operates from a two story, purpose build premises. At ground floor level there is a baby room, a wobbler room, a toddler room, 2 sleep rooms, a kitchen, a manager's office and a staff room. At first floor level there is a sleep room, 4 pre-school rooms and 2 rooms for the school aged children.

There are 2 large outdoor play areas located adjacent to the building, one to accommodate the younger pre-school children and the second for the older age groups and the school aged children.

Staffing

The registered provider has leased the business to another childcare provider and named them the designated person in charge. They in turn have appointed a manager and an assistant manager to manage and operate the facility on a day-to-day basis. There are twenty staff on the staff roster. Seventeen staff employed to work at the service have achieved a major award in early childhood care and education or a qualification deemed by the Minister to be equivalent in childcare.

Methodology

Tusla's Early Years Inspectorate is the independent statutory regulator of early years services in Ireland. The Childcare Act 1991 (Early Years Services) Regulations 2016 define the duty of a registered provider to ensure the safety and well-being of children and to comply with these regulations. This Act also gives Tusla the authority to assess compliance with the regulations. The purpose of regulation in relation to early years services is to ensure that the care, safety, and well-being of children attending such services is upheld. Inspections of early years services are planned based on the following:

- Previous inspection history
- Any information received in relation to the service

The findings on inspection are based on:

- Information obtained through examination of documentation
- Direct observation
- Discussion with relevant staff

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

The inspection focused on an examination of compliance under regulations 9,10,11,16,19,23,24 and 29.

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

28/05/2024. A Garda Vetting Immediate Action Notice was issued to the manager of the service on the day of the inspection as there was a member of staff who had access to children who did not have evidence of a garda vetting disclosure.

29/05/2024. A response was received which stated the person who did not have garda vetting was no longer working with the preschool children.

Acknowledgments

The inspectors wish to acknowledge the cooperation of the 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*

(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) A designated deputy person in charge of operating the service was present on the day of the inspection. There was a named person available who was able to deputise if required.

(b) During the period of the inspection, the designated deputy person in charge was present and the staff roster indicated that this person or their deputy were always available on the premises. The named person in charge was present on day 2 of the inspection.

(2)(a) Two written and validated references were available for nineteen of the twenty staff members employed to work at the service.

(b) References were submitted by staff from their past employers or from sources other than past employers.

(c) Garda vetting disclosures had been obtained for nineteen of the twenty staff documented on the staff roster. However, in the case of four staff members the service did not adhere to the re-vetting timeframes as outlined in the Early Years Inspectorate Regulatory Notice, requiring services to renew Garda vetting every three years. Please refer to the information outlined under regulation 23 of this report.

(d) Police vetting was available for seven staff members who had resided outside of Ireland for longer than six consecutive months.

(4) Seventeen staff working directly with children held an appropriate qualification in Early Childhood Care and Education or an equivalent such qualification.

Non-Compliance Information

(2)(a) Two written validated references were not available for one staff member working in the service. This issue was non-compliant on the previous inspections dated 22/11/23 and 15/07/22.

(c) Garda vetting disclosures had not been obtained for one member of staff working in the service on day 1 of inspection. An immediate action notice was issued to the person in charge on site on 28/05/2024 for this staff member.

This issue was non-compliant in previous inspection reports dated 15/07/2022, 09/09/2021 & 30/01/2020.

(3) Vetting procedures specified in paragraph (2) were not completed prior to all persons being appointed, assigned or allowed access to or contact with children attending the service. This issue has been ongoing, as incomplete vetting of new staff employed has been highlighted in previous inspection reports. Also, a staff file was not available for an adult who was present on both days of inspection who attends the service on an intermittent basis.

(4) There were three staff working directly with the preschool children who did not have documentary evidence of childcare qualifications or an equivalent qualification. This issue was non-compliant on the previous inspection dated 22/11/23.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(2)(c)
29/05/2024. A response was received which stated the person who did not have garda vetting was no longer working with the preschool children.

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(2)(a)(c) (3)

Both references in questions were validated by management.

The recruitment and vetting policy has been revised to include the correct information that was missing.

Management will follow the revised policy and ensure all relevant reference checks and vetting take place prior to a person commencing employment.

(4) The service has qualified staff in place to meet the adult: child ratios, cover breaks and school runs etc. Where the service cannot meet the adult/child ratio with suitably qualified, vetted and experienced staff the relevant rooms will close with immediate effect and an email will be sent to all parents to inform them.

Supporting documentation submitted

Staff Roster.

Verification of references.

The recruitment and vetting policy.

Summary Comment

The corrective and preventative actions submitted by the registered provider adequately addressed the non-compliances under 2(a)(c) 3 and 4.

Part III – Management and Staff

Regulation 10 - Policies, procedures of pre-school service

A registered provider of a pre-school service shall ensure that the written policies, procedures and statements specified in Schedule 5 are in place for the service.

Non-Compliance Information

The staff recruitment policy was not up to date as it referenced previous Childcare Regulations 2006 as opposed to the current Childcare Act 1991 (Early years Services) Regulations 2016 and Childcare Act 1991 (Early Years Services)(Amendment) Regulations 2016.

The policy did not set out the vetting requirements whereby,

- All staff must be Garda vetted prior to working directly with children in the service or allowed access to children.
- The requirement of police vetting if staff have lived in a jurisdiction outside of Ireland for a period of longer than six consecutive months.
- All staff must be re-vetted every three years.
- The qualification requirements for staff working directly with children.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

CAPA 2 08/07/2024

The recruitment and vetting policy has been updated to include the following information

- All staff must be Garda vetted prior to working directly with children in the service or allowed access to children.
- The requirement of police vetting if staff have lived in a jurisdiction outside of Ireland for a period of longer than six consecutive months.
- All staff must be re-vetted every three years.
- The qualification requirements for staff working directly with children.

Supporting documentation submitted

The recruitment and vetting policy.

Summary Comment

The corrective and preventative actions submitted by the registered provider adequately addressed the non-compliances under Regulation 10.

Part III – Management and Staff

Regulation 11 - Staffing levels

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

Compliance Information

(2)

Day 1 28/05/2024

The adult child ratio was correct in the following rooms.

Baby Room - There were 5 preschool children (1-2 yrs.) being supervised by 2 staff.

Wobbler Room - There were 5 preschool children (1-2 yrs.) being supervised by 1 staff.

ECCE Room 1 - There were 6 preschool children (3-4 yrs.) being supervised by 1 staff.

ECCE Room 3 - There were 14 preschool children (3-4 yrs.) being supervised by 2 staff.

ECCE Room 4 - There were 14 preschool children (3-4 yrs.) being supervised by 2 staff.

Day 2 04/06/2024

The adult child ratio was correct in the following rooms.

Baby Room - There were 5 preschool children (1-2 yrs.) being supervised by 2 staff.

- Wobbler Room - There were 10 preschool children (1-2 yrs.) being supervised by 2 staff.
- Toddler Room - There were 17 preschool children (2-3 yrs.) being supervised by 2 staff.
- ECCE Room 1 - Room Closed
- ECCE Room 2 - There were 11 preschool children (3-4 yrs.) being supervised by 1 staff.
- ECCE Room 3 - There were 20 preschool children (3-4 yrs.) being supervised by 2 staff.
- ECCE Room 4 - There were 20 preschool children (3-4 yrs.) being supervised by 2 staff.

Non-Compliance Information

(2)

The adult child ratio was not maintained in the following rooms on day 1 of inspection 28/05/2024 at 10.30am as outlined in the following table.

Room Name	Number and ages Children	Adult Child Ratio	Staff Present	Staff Required
Toddler Room	18 children aged 2 – 3 yrs. (attending full day care)	2-3 yrs. 1:6 (Full Day Care)	2	3
ECCE Room 2 (upstairs)	14 children aged 3-4 yrs.	2.5 – 6yrs 1:11 (Sessional/ECCE) 3 -6 yrs. 1:8 (Full Day Care)	1	2

The adult child ratio was not maintained in the Toddler room on day 1 of inspection 28/05/2024 at 15.30pm as outlined in the following table.

Room Name	Number and ages Children	Adult Child Ratio	Staff Present	Staff Required
Toddler Room	16 aged 2 – 3 yrs. (attending full day care)	2-3 yrs. 1:6	2	3

It is acknowledged that on day 2 of inspection the adult child ratio was maintained as the service had closed one room and staff and children were reassigned to other rooms.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

CAPA 2 08/07/2024

The staff rota has been amended to show that there is adequate staff onsite to cover breaks, kitchen duties and staff leave. Should a significant number of staff be absent and relief cover are not available a room closure will take place temporarily until the correct adult: child ratio is maintained.

Management will ensure that there is enough qualified staff onsite to ensure that the adult: child ratio is maintained at all stages of the day.

Supporting documentation submitted

Staff Roster.

Summary Comment

The corrective and preventative actions submitted by the registered provider have adequately addressed the non-compliances under Regulation 11(2).

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;*

Non-Compliance Information

(h) Details of attendance by each pre-school child on a daily basis were not recorded accurately and in a timely manner.

- In the toddler room at 15.39hrs there were 16 children present however 3 of these children were not recorded on the attendance record on 27/05/2024 and 28/05/2024. The details including the names of these children and their time of arrival and departure had not been recorded. Staff confirmed these children attended the service on both days.

(I) Details on the staff roster were unclear and incomplete as follows:

- The surnames of staff were not included.
- It did not set out the adult: child ratio on a daily basis for each room of the service.
- It did not record the start, finish and break times of each person in attendance each day.
- It did not demonstrate that there was sufficient cover for early arrivals, late collections, breaks, holidays, sick leave, school runs, kitchen duty, outings and any other situation where additional staff may be needed.
- It did not name who the first aid responder/s for each day.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

CAPA 2 08/07/2024

Staff present in the toddler room had been using an out-of-date rota which did not include the children in question who had recently moved to the toddler room.

Management will ensure all rooms are using up to date room attendance sheets and children's attendances are kept accurately.

A monthly staff rota has been amended and corrected to show the adult: child ratio in each room for the month of July and August.

Management will ensure the rota gives a clear indication of the running of the service and how the adult: child ratio is maintained at all times.

Supporting documentation submitted

A copy of the monthly staff roster was submitted.

Summary Comment

The corrective and preventative actions submitted by the registered provider adequately addressed the non-compliances under Regulation 16 (1) (h) (i).

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

Compliance Information

(1)(a) BASIC NEEDS

Healthy eating was promoted within the service with fresh hot meals provided. Children had all meals and snacks in their designated rooms and mealtimes were observed to be a sociable occasion for the children. At dinner time children were observed having enough time to eat and enjoy their food without being rushed.

Each room had a supply of tissues and wipes available to the children. Two separate sleep rooms were provided for children under 2 years who required a sleep, with enough standard cots accessible at all times for the children in the baby and wobbler rooms. The toddlers over 2 years who required a sleep had access to low level beds in a third sleep room on the first floor. Designated rest areas were assessable in all rooms of the service throughout the day.

PHYSICAL AND MATERIAL ENVIRONMENT:

The baby room had safe and comfortable spaces for the children not yet walking to lie, roll, creep and crawl with lots of soft floor mats to facilitate floor-based activities.

The wobbler and toddler rooms had low level tables and chairs to facilitate tabletop activities and dining at mealtimes. Open low-level shelving provided storage for toys and equipment.

Defined interest areas were provided where equipment and play materials were accessible in each room upstairs.

Adult seating was available to facilitate staff sitting with children during the day.

Non-Compliance Information

Basic Needs:

1. In the wobbler room children's drinking bottles/beakers were not accessible to the children as they were stored in a storage box on a shelf out of reach of the children. This posed a risk to the children in relation to being adequately hydrated for the duration of their day and did not promote independence and allow children to self-serve.
2. Children in the baby room were not outdoors to play on the day of the inspection and staff stated the children had not been outdoors on the previous day either. The weather was noted to be dry. Staff stated

the ground was wet in the outdoor play area and only one child had all weather wet gear to facilitate outdoor play. Children were denied the opportunity for fresh air and outdoor exploration.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

Wobbler Room staff have now set up a hydration area in the room which ensures children have access to their water bottles at all times throughout the day.

All staff will be reminded that children should have access to their water bottles at all times to ensure that they stay adequately hydrated and promote independence for the children.

Management will carry out checks to ensure water bottles are kept full and are accessible to all children.

Parents of the baby room children have been asked to supply wet gear for their child to ensure they have access to the outdoor area at all times.

Management will ensure parents are aware of the importance of wetsuits for the children as it ensures outdoor play is accessible.

Supporting documentation submitted

Photographic evidence submitted.

Summary Comment

The corrective and preventive actions submitted by the registered provider adequately addressed the non-compliance under 19(1)(a).

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

General Safety:

1. Garda vetting was available for all nineteen staff members, however for four of the staff their vetting disclosures were not dated within the previous three years in adherence to the Early Years Inspectorate Regulatory Notice 'EYI-RN12.3 Renewal of Garda Vetting'.
2. Jackets and handbags belonging to staff were accessible to children in the toddler room and ECCE room 4 and posed a safety hazard. This was highlighted in the last inspection report for the service dated 29/11/2023.

3. A nappy changing countertop had fallen off the wall and was stored on the floor in the sanitary accommodation off ECCE room 4 and posed a safety hazard.

Infection Control:

4. A sealed foot operated leak proof bin was not available for use for the disposal of nappies in the nappy changing off the wobbler room. An open bin was observed to be in use. This posed a risk of cross infection.
5. Open rubbish bins were observed in the playrooms throughout the service which posed a risk of cross infection.
6. The nappy changing mat in the wobbler room was torn which posed a risk of cross infection.
7. In the baby room children's hands were not washed by staff following nappy changes and before meals. This was at variance with the nappy changing/ infection control policy and posed a potential risk of cross infection.
8. After dinner staff were observed washing the children's food bowls and cutlery at the sink in the nappy changing area which posed a risk of cross infection to both children and staff.
9. A treatment cream stored in the fridge which staff stated was used for all children in the room posed a risk of cross infection and potential allergic reaction to children.

Safe Sleep:

10. Waterproof protectors were not available to cover the cot mattresses on four of the five cots in the baby sleep room and on eleven of the fifteen cots in the wobbler sleep room which posed a risk of cross infection as mattresses could not be cleaned sufficiently between use.

These mattresses in both the wobbler and the baby sleep rooms showed signs of wear and tear and were stained and posed a potential risk to the safety of the children.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

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1. The 4 outstanding garda vetting documents were not submitted.

Management will ensure that all staff have up to date garda vetting on file. A staff file checklist which each staff file will have to ensure each staff member has all the relevant documents in their files. Management will monitor the garda vetting documents to ensure that they remain in date at all times.

The garda vetting policy has been updated to ensure all staff will be re-vetted every 36 months.

2. Staff have been reminded that all personal belongings must be kept in the staff room and out of reach of children. Rooms will be monitored, and all staff's personal items will be kept out of all the rooms where children are present.
3. The nappy changing countertop has been removed from the sanitary accommodation and will be fixed to the wall securely. Items fixed to the wall will be checked regularly and ensured they are secure at all times.

Infection Control:

4. Pedal operated leak proof bins has been provided for all nappy changing areas. Room leaders will monitor their nappy changing areas and alert management if bins need to be replaced.
5. New bins have been provided for the rooms where the lids were broken. Room leaders will monitor their bins and alert management if they need to be changed.
6. Nappy changing mat has been replaced with a new changing mat. Room leaders will monitor changing mats in their nappy changing areas and alert management if they need to be replaced.
7. Staff have been reminded of the nappy changing policy and the importance of washing the children's hands after nappy changing in an effort to prevent the risk of cross contamination. Management will monitor staff and ensure all policies and procedures are followed at all times.
8. Staff have been reminded that all food bowls and cutlery must be washed in the kitchen only and that the sinks in the changing areas are strictly for handwashing only. Management will monitor staff to ensure that the proper procedure is followed in relation to the use of sinks in the changing areas.
9. Staff have been reminded that children cannot share any creams under any circumstance and each child's individual creams must be individually labelled. Creams in all rooms will be monitored by room leader to make sure that children are not sharing creams.

Safe Sleep:

10. Waterproof protectors have been purchased for the cots in both the baby sleep room and wobbler sleep room. Mattresses in both sleep rooms have been inspected and those which showed signs of wear and tear have also been replaced. Room leaders have been advised to inspect mattresses regularly and alert management if the mattresses are showing signs of wear and tear and need to be replaced.

Supporting documentation submitted

General Safety:

Staff file checklist submitted.

Infection Control:

Copy of Hand washing policy.

Safe Sleep:

Photographic evidence submitted.

Summary Comment

The corrective and preventive actions submitted by the registered provider did not adequately address the non-compliance under Regulation 23 General Safety Point 1.

Part VI - Safety

Regulation 24 - Checking in and out and record of attendance

(3) A registered provider shall ensure that-

(b) a daily record in writing is kept of the entry on the premises of any such person.

Non-Compliance Information

(3)(b) While it is acknowledged that entry to the service was through a buzzer entry method monitored by staff, the service did not maintain a daily record in writing of persons who visited the premises.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

A daily record attendance book has been placed at reception for visitors to sign in on upon arrival to the premises. Management will ensure all visitors are signed in upon entering the service.

Supporting documentation submitted

not submitted.

Summary Comment

The corrective and preventive actions submitted by the registered provider adequately address the non-compliance under Regulation 24 (3)(b).

Part VII - Premises and Space Requirements

Regulation 29 - Premises

A registered provider shall ensure that the premises of the service are-
(d) cleaned, maintained and repaired, as required.

Non-Compliance Information

- (d)
1. The outside play area used by the older age group of children was not cleaned and maintained as there were sections that were dirty, mucky and wet. There were sections under the two slides, wooden house and where the trees were growing which were dirty with mud and grime.
A section of the outdoor play area used by the younger children was waterlogged, covered in moss, leaves and dirt. Children could not use this area as it posed a potential risk to their safety.
This has been highlighted on a previous inspections dated 09/09/2021 and 22/11/2023. The person in charge had documented in their response previously that works would commence in January 2022 on the required maintenance of the all-weather surface. These works had not taken place.
 2. Play equipment in the outdoor play area used by the younger children such as sand boxes and prams were full of water. This posed a potential risk to the safety of children.
 3. Weeds were growing in the outside area used for the younger age group and there were holes in the ground which posed a potential injury hazard to the children.
 4. In ECCE room 4 the radiator cover was broken which posed a potential risk to the safety of children.
 5. Paintwork throughout the service was not maintained. Florescent lights in the wobbler room had been removed from the ceiling and the ceiling had not been repainted. Paint was flaking off the skirting boards and walls in many areas. The entrance doors to many of the rooms were stained and required cleaning.
 6. The windows in ECCE room 4 were observed to be dirty and stained and the floor covering in the sanitary accommodation adjacent to this room was worn and stained. Paint on the walls of this room was not maintained and was observed to be flaking off the walls in areas.
 7. In the baby sleep room a clothes horse and toys were stored in the room and posed a potential risk to the safety of the children.
 8. A light was broken in the lobby area off the nappy changing area in the baby room.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

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Work will commence on the outdoor area for the older children on Monday 8th July which will include the necessary work to rectify the retention of water issue. Following this the area will be power washed.

An outdoor surface specialist company will assess the baby outdoor play area and the corner area beside the baby play area. Following which the service will ascertain what repair or replacement work is required.

The weeds have been removed.

The holes in the ground have also been filled.

Management will carry out monthly checks on the outdoor areas and ensure they are maintained and kept clean and tidy.

An updated risk assessment form has been given to all room leaders which now includes to check daily for weeds/holes/ water logging in the outdoor area.

Supporting documentation submitted

Photo of water retention solution.

Photo of outdoor play area attached.

Photo of weeds removed.

Sample risk Assessment attached.

Summary Comment

While it is acknowledged that the person in charge has stated that work will commence on the outdoor area for older children on the 8th July. This remains non-compliant.

The corrective and preventive actions submitted by the registered provider do not adequately address the non-compliance under Regulation 29 (d) Point 1,2,4,5,6,7 and 8.