

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2015MO033
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<b>Name of Service:</b>	Claremount Early Learning and Childcare Centre Limited
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<b>Address of Service:</b>	Cluain Aoibhinn, Claremount, Claremorris, Co. Mayo
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<b>Eircode:</b>	F12 VE89
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<b>Name of Registered Provider:</b>	Thomas King
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<b>Service type:</b>	Full Day, Part Time, Sessional
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<b>Date(s) of Inspection:</b>	06/11/2025
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<b>Date 2 of Inspection:</b>	11/11/2025
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<b>No of pre-school children: Day 1</b>	AM	53	PM	45
<b>Day 2</b>	AM	48	PM	39

<b>Address of the Early Years Inspectorate:</b>	Early Years Inspectorate, Quality and Regulation Directorate, Child and Family Agency, 2nd Floor St Mary's HQ, Castlebar, Co Mayo. F23HP58
<b>Inspection undertaken by:</b>	B Lavin F Kelly F Duffy
<b>Title:</b>	Early Years Inspectors

### Authority to Inspect

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

<b>Conditions if applicable</b>	Not applicable
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### Description of service

Claremount early learning and childcare centre is in a residential area of Claremorris in county Mayo. The service is registered to provide full day care, part-time and sessional services to children aged from 0 to 6 years from 07:45-18:00 hours. The service is also registered to provide school aged childcare services. The service has 5 playrooms, a separate sleep room, a kitchen, office and sanitary facilities. There are enclosed outdoor play areas with play equipment provided for the children on the premises.

### Staffing

At the time of the inspection there were 12 adults in the service caring for the children, a cook and a student on work placement. The registered provider does not work directly with the children.

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

On inspection additional non-compliances which posed a risk were identified under Regulations 9, 16, 19, 20, 23 and 29. These findings are outlined within the relevant regulations within this report.

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

This inspection was triggered by information received by the early year's inspectorate.

### Acknowledgments

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

## Part III – Management and Staff

### Regulation 9 – Management and recruitment

*(1) A registered provider shall ensure that-*

- (a) the service has a designated person in charge and a named person who is able to deputise as required,*
- (b) at all times during the period when the pre-school service is being carried on, the designated person in charge or the named person referred to in subparagraph (a) is on the premises.*

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

- (a) consideration of references from the person's past employers, if any, and in particular the most recent employer, if any,*
- (b) consideration of references from reputable sources in the case of a person who has no past employers,*
- (c) consideration of the vetting disclosure received from the National Vetting Bureau of the Garda Síochána in accordance with the Act of 2012 in respect of the person, and*
- (d) ensuring, insofar as is practicable, that where a person has lived in a state other than the State for a period of longer than 6 consecutive months, he or she provides police vetting from the police authorities in that state.*

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

*(7) A registered provider shall ensure that all employees, unpaid workers and contractors are appropriately supervised and provided with appropriate information, and where necessary training, including in relation to the following:*

*(a) the policies, procedures and statements of the service specified in Schedule 5.*

### Compliance Information

1)(a) The manager was the designated person in charge and there was a named person who was able to deputise as required.

(b) During the period of inspection, the manager was in charge and facilitated the inspection.

Following a review of the service files and discussion with the person in charge, it was confirmed that there were 14 adults employed in the service, which included a cook and an early year's student on work placement. The secretary of the company was also present during the inspection. The registered provider did not work in the service on a daily basis.

It was confirmed that there were 3 new staff members and 1 student working in the service since the last inspection dated the 03/03/25. There were 4 staff garda vetting disclosures reviewed on the day of inspection.

(2)(a) Two of the required 8 written and appropriately validated references available were from the adult's most recent employer.

(c) Garda vetting disclosures were available for 8 of the adults working in the service. However, 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 3 years. Please refer to the information outlined under regulation 23 of this report.

(d) Police vetting was not required for 2 adults working in the service, as they did not live outside the jurisdiction for more than 6 months.

(4) All adults working directly with children had obtained an award in Early Childhood Care and Education ranging from level 5 to level 8 on the National Qualifications Framework.

### Non-Compliance Information

(9)

(2)(a) (b)

1. On the day of inspection, there were 2 adults that did not have 2 validated references each from a recent employer or a reputable source available for inspection.
2. There was 1 adult that had 2 references on file, but these references were not validated.

(2)(d) There were 2 adults that did not have a record of employment available for inspection; therefore, it was not possible to ascertain if police vetting was required for these 2 adults.

(7)(a) The registered provider did not demonstrate that they had taken all reasonable measures to ensure that all employees were appropriately supervised and provided with sufficient information and training to safeguard the children attending the service and to comply with the regulations. Practices observed were directly at variance with the policies and procedures in place in the service.

1. The staff training policy stated that training needs are identified through support and supervision which was not occurring regularly in the service.
2. Through review of records and discussions with staff and the person in charge, it was evident that staff had not received appropriate supervision. There were no records available and the person in charge told inspectors that no supervision meetings had been carried out. This was at variance with the service staff supervision policy which stated that all staff members must have regular, consistent and uninterrupted supervision.

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

#### Corrective and Preventive Action

(9)

(2)(a) (b)

1. Validated references are now on file.
2. References on file have been validated.

(2)(d) Records of employment are now on file.

Management will ensure that the Recruitment Policies are adhered to and all required vetting, references, ID and record of employment are in place and validated for the staff member before employment starts.

(7)(a) The policies and procedures have been updated. All staff will receive training on these policies and procedures. Support and supervision meetings have been scheduled to begin on 5th January 2026. An emphasis will be put on identifying training needs. Written records will be kept of the supervision. Supervision will take place every 2 months. Regular reviews of all policies and procedures will take place.

### **Supporting documentation submitted**

1. The registered provider submitted evidence such a copy of validated references and a copy of records of employment to the Early Years inspectorate for review.
2. A statement from the provider has been accepted.
3. A statement from the provider has been accepted.

### **Summary Comment**

The actions and evidence submitted were reviewed and the non-compliance's identified under Reg 9 have been adequately addressed.

### **Part III – Management and Staff**

#### **Regulation 10 - Policies, procedures etc. 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.*

### **Compliance Information**

The registered provider ensured that the following policies and procedures were in place as per schedule 5 for the service.

- (a) Statement of purpose and function
- (b) Complaints policy
- (e) Policy on managing behaviour
- (j) Accident and incident policy
- (t) Staff training policy
- (u) Supervision of staff policy

### 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) There were 12 adults working directly with children on the day of inspection. One student on placement was present in the toddler room under the supervision of staff members.

(2) Day one

The minimum adult to child ratios were provided on the morning of inspection in accordance with the required ratios considering the ages of the children and the length of time each child spent in the service as outlined below:

- Play school room: 2 adults cared for 9 children aged between 2 and 3 years of age.
- Toddler room: 3 adults cared for 13 children aged between 1 and 2 years of age.
- Wobbler room: 1 adult cared for 4 children aged between 1 and 2 years of age.
- Montessori room: 2 adults cared for 18 children aged between 3 and 4 years of age.
- Junior preschool room: 1 adult cared for 9 children aged between 2 and 3 years of age.

Two additional staff members provided relief cover for breaks and nappy changes.

Day two

The minimum adult to child ratios were provided on the morning of inspection in accordance with the required ratios considering the ages of the children and the length of time each child spent in the service as outlined below:

- Play school room: 2 adults cared for 9 children aged between 2 and 3 years of age.
- Toddler room: 4 adults cared for 12 children aged between 1 and 2 years of age.
- Montessori room: 2 adults cared for 17 children aged between 3 and 4 years of age.

- Junior preschool room: 2 adults cared for 10 children aged between 2 and 3 years of age.

Two additional staff members provided relief cover for breaks and nappy changes.

(8) There were at least 2 adults present in the service at all times during the inspection.

## Part IV – Information and Records

### Regulation 16 – Record in relation to pre-school service

*(1) A registered provider shall ensure that a record in writing is kept of the following information in relation to the service:*

*(i) details of staff rosters on a daily basis;*

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

*(3) A record referred to in paragraph (1) shall be open to inspection on the premises, and the documents and records referred to in paragraph (2)(a) shall be open to inspection whether on the premises or elsewhere, by an authorised person.*

#### Compliance Information

(3) The records referred to in paragraph (1) were furnished to the inspector on the premises.

#### Non-Compliance Information

(1) (i) Details of the staff roster on a daily basis was not available for inspection.

(k) The staff did not accurately record accidents and incidents that occurred in the service.

1. An accident/incident/injury report for an injury observed in the wobbler room on day 1 of inspection was not recorded. This may compromise the health and well-being of the child should the relevant persons not be informed of the incident/accident/injury or if the care administered while the child was in the service was not documented.
2. On review of the records of accidents and incidents in the Playschool room, the staff recorded a biting incident that occurred; however, they did not have any record of informing the parent of the child that did the biting. Only one record was available for inspection and that was signed by the parent of the child that was bitten.

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

##### **Corrective and Preventive Action**

(3)(i) Staff Rosters are now completed weekly, one week in advance and are on display on the notice board in the entrance hall.

(3)(k)

(1) The Accident and Incident Policy have been reviewed and updated. All staff have been reminded of the importance of recording all accidents and incidents, minor or otherwise, in the Accident and Incident Book as not doing so can compromise the health and wellbeing of the child.

(2) The Accident and Incident Policy and the Biting Policy have been reviewed and updated to state that, in the case of a child biting another child, an Incident Report must be completed for both the child that was bitten and the child who did the biting. All staff have been made aware of this.

The service manager will ensure that weekly rosters are in place. The manager will ensure that all staff including staff on induction are aware of the accident and incident policy in the service. The manager will review the accident and incident records regularly.

### **Supporting documentation submitted**

Statements from the provider have been accepted. Updated policies were provided to the office of the inspectorate.

### **Summary Comment**

The actions and evidence submitted were reviewed and the noncompliance's identified under Regulation 16 have been adequately addressed.

## **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**

#### **Basic Needs**

- Drinking water was available to all children in individual beakers throughout the day.
- Children were supported during mealtimes with feeding when needed. Independence was encouraged with self-help skills.

- Children sat at tables and chairs or highchairs which were appropriate for their height and or stage of development.
- The staff were observed sitting at the child's level and chatted in a respectful manner.
- Nappy changing was carried out regularly and promptly when required and handled in a positive and sensitive manner. Staff members were observed speaking to children during this time and using it as an opportunity for warm one to one interaction.
- The privacy and dignity of each child was respected during nappy changing and toileting.
- Older preschool children were facilitated with a scheduled rest period in the afternoon. For children who did not require a sleep, appropriate rest facilities were available in the care rooms and children were observed spending time in this area for short periods of rest throughout the day.
- The toddler room had its own sheltered outdoor play area with play materials designed for gross motor play. The children from the toddler room spent time in this outdoor space exploring, climbing and playing.

### Supporting relationships

- The staff members demonstrated warmth and sensitivity in their interactions with the children in some care rooms. The staff members in the preschool and wobbler room helped the children choose activities and allowed choice over activities. The staff members helped the children set up play and offered assistance and encouragement communicating using soft gentle tones.

### Non-Compliance Information

1. Two children within the service displayed behaviours that demonstrated the need for individual care planning. On discussion with staff the practice of using care plans to coordinate and care for these needs were not in place. This posed a risk to the child of not having a planned coordinated proactive approach to managing their needs.
2. Children in the wobbler room did not have the opportunity to practice their balance and coordination skills by not having the opportunity to move themselves using appropriate gross motor equipment.

On the 1<sup>st</sup> day of inspection, the following was observed.

3. In the Playschool room a child (2 years 3 months old) was unsettled and had been crying. The child was carried around the room by a staff member. The child appeared to want to get down on the ground, but the child's freedom of movement was compromised and the staff member continued to walk around the room while carrying them. This continued for a further 5 minutes before the child was left down on the ground to participate in an action song (head, shoulders, knees and toes) that another staff member was singing.
4. Staff in the Playschool room did not recognise a child's individual cues for tiredness, a young child was observed very upset, unsettled and wandering around the playroom not engaging in any activities. This child was not put down to sleep but was distracted by a member of staff by bringing her for walks around the service. When asked by the inspector why this child wasn't been put down to sleep, they were informed that the child usually goes home to sleep as they were new to the service and this was the approach taken by the service and the parent.
5. The programme of activity on display on the wall of the Playschool room was not adhered to on the day of inspection. The outdoor area was not in use on the day until after 15:30, even though the weather was suitable and two separate times were listed for outdoor play on the programme of activities. The staff could not explain why the children were not brought outside to play earlier during the session. Following discussion with the inspectors the children were brought out to the outdoor play area.
6. While the children in the Montessori room were having their afternoon snack, the atmosphere did not appear to be pleasant or relaxed and the interactions between a staff member and the children were negative in tone. The staff member was heard saying the following statements to the children in their care.
 

"Eat up your food, remember the children that don't have any food"

"Don't talk when you are eating, you can choke"

"We don't play with our food"

Children that were talking to each together in small groups were told to "shush".

Two children were observed to be happily chatting during snack but were told to behave or they would be separated.
7. There was no adult chair in the Toddler rooms for the nurturing, feeding and comforting the young children in this playroom. The staff were observed sitting on small child sized sofas and on the floor when they were comforting the young children.

- There was no record of a staff meetings taking place in the service. The staff members informed the inspectors that staff meetings had not taken place.

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

#### **Corrective and Preventive Action**

- Individual care plans are now in place for the children. Children who require additional support will be identified and their care needs planned for.
- Equipment necessary for the gross motor development is now present in the wobbler room. A review of the necessary equipment for the wobbler room has taken place.
- An individual care plan has been developed to identify and meet this child's needs in consultation with the parents and wider team.
- A review of the child's routine will be completed in consultation with the child's parents.
- All rooms have been reminded of the importance of including the outdoor play areas in their planning and daily activities as laid out in our Outdoor Play Policy and Procedures. Staff have been informed of the outdoor play policy.
- Our Healthy Eating Policy says that an adult should sit with the children at mealtimes to encourage conversation, good eating habits and to make the mealtime a rewarding experience for the children. This is important to nurture healthy attitudes towards food and eating. Negative language is unacceptable. Our policy has been reviewed and updated to reflect this. All staff have been reminded of the importance of positive language in all interactions with the children and have read the Healthy Eating Policy.
- Adult chairs have been purchased.
- Staff team meetings have been scheduled starting on the 12 January 2026. These will be held a room at a time. An agenda will be set prior to the meeting which will include a brief discussion of the policies reviewed by staff up to then. Team meeting will be scheduled for every 4-6 weeks and a full staff meeting every 3 months.

#### **Supporting documentation submitted**

Documentation and statements from the provider were submitted to the early year's inspectorate and accepted.

#### **Summary Comment**

The actions and evidence submitted were reviewed and the noncompliance's identified under Regulation 19 have been adequately addressed.

## Part VI - Safety

### Regulation 23 - Safeguarding health, safety and welfare of child

*A registered provider shall ensure that all reasonable measures are taken to safeguard the health, safety and welfare of a pre-school child attending the service and that the environment of the service is safe.*

#### Compliance Information

##### General Safety:

- A bell system was in place on an internal entrance door to the service to control admission of people to the service. This door was secured during the inspection to prevent children from leaving unsupervised.
- Cleaning products were safely stored on high shelving and out of reach of children.
- Access to the kitchen was secured from children with out of reach door handles.

##### Infection Control:

- The service had cleaning schedules in place.
- Refrigerators were provided to store children's snacks provided from home for snack times.

##### Administration of Medication:

No medication was observed to be administered to a child by staff on the day of inspection. Temperature reducing medication was available. It was safely stored and in date. In conversation staff were able to detail the procedures for administering medication to children.

##### Safe Sleep:

- Individual cots were available for the children under the age of 2 who required a nap.
- Stackable beds were available for the children aged over 2 who required a nap.
- Regular sleep checks were carried out on the children.

#### Non-Compliance Information

##### General Safety:

1. There were 8 garda vetting disclosures reviewed on the day of inspection. However, 1 these vetting disclosures was not dated within the previous 3 years in adherence to with the Early Years Inspectorate Regulatory Notice 'EYI-RN12.3 Renewal of Garda Vetting'.
2. Whole grapes were present in a child's lunch box in the Montessori room. Whole grapes are a choking risk to young children. It was noted on the day that a staff member present cut the grapes into smaller pieces, to reduce the risk of choking.
3. In the Playschool, room a child aged 2 years and 2 months was observed wearing hooped earrings, which may pose a risk of injury.

### Infection Control:

4. Handwashing prior to snack and mealtimes was not carried out consistently between all care rooms. A child's hands were not washed following a nappy change and where a child had injured themselves and had been bleeding.
5. A number of floor mats and couches within the service were torn. A blue chair in the Wobbler room and an adult chair in the Toddler room had exposed foam from the insert. This posed a risk of infection as they cannot be cleaned effectively.
6. There were no liquid soap or handtowels in the wobbler sanitary accommodation. This did not allow for effective handwashing after nappy changing.
7. Soothers in both the wobbler and playschool care rooms were stored in the children's bags or loose on a shelf and not in individual containers.
8. The nappy disposal bins in use in the service were not sealable and airtight and posed a risk of infection to children. This was also noted on the previous inspection.
9. The nappy changing mat in use in the wobbler room was torn. This posed a risk of infection to the children as it cannot be cleaned effectively.
10. The nappy changing area for the Wobblers was used as a storage area for toys, staff bags and staff clothing. This posed a risk of cross infection.
11. There were 2 containers of barrier cream and a tin of powder on the windowsill in the nappy changing area. There containers were not individually labelled and posed a risk of cross infection.
12. The insert in one of the highchairs was ripped, which did not allow of the effective cleaning of the highchairs, posing a risk of cross infection. This highchair was replaced by the second day of the inspection.
13. There were individual labelled bedsheets for the stackable beds for children over the age of 2 years, but all the used sheets were stored together in a cupboard in the staff room. A staff member was observed carrying them into the playroom when the beds were made up, they were left together on a small pile on a table in the playroom and the staff picked through them searching for the various sheets. This posed a risk of cross infection.

### Safe Sleep:

14. The sleep records used within the service did not record the required details necessary to monitor safe sleep. There was no record of the staff member completing the record, the room temperature at regular

intervals, the position and breathing of the sleeping child. The time of the sleep checks were pre-populated on each sleep sheet. This posed a safety risk to the sleeping child. This was also noted on the previous inspection. In corrective and preventative actions submitted following the last inspection in March 2025, the person in charge stated that the manager will do spot-checks at sleep time to ensure the sleep records are completed accurately. Through review of records and discussion with the person in charge it was evident that the person in charge was not carrying out these checks or aware of procedures being carried out within the care room which were at variance with the Safe Sleep Policy within the service.

### Action submitted by the Registered Provider

#### Corrective & Preventive Action

##### General Safety:

1. The in date garda vetting was not available to the inspectors at the time of inspection as it was misfiled.
2. Children's lunchboxes will be checked by staff members before children have access to their food to ensure there are no choking hazards present. The Healthy Eating Policy has been updated. Staff will be vigilant for choking hazards.
3. The child's parents were advised of the risk such earring pose. A new Jewellery Policy has been developed to address any future jewellery issues.

##### Infection Control:

4. The Nappy Changing Policy and Healthy Eating Policy have been reviewed with emphasis on handwashing after nappy change, before eating and when needed throughout the day. All staff have been informed of the updated policies.
5. Damaged items have been removed from the care rooms. Staff have been advised to complete daily risk assessments and advise management of any damaged items.
6. Handsoap and hand towels have been replaced within the sanitary accommodation. Staff have been advised to complete daily risk assessments and cleaning schedules and ensure these are completed fully.
7. Soothers will be stored in individual labelled containers.
8. Sealable, foot operated nappy bins have been purchased for the service.
9. The nappy changing mat has been replaced.
10. The Wobblers nappy change area has been cleared of all unnecessary items. Staff have been reminded that all personal items should be stored in the staff room and nothing other than nappy/toileting items should be stored in the area as this carries a risk of cross infection.

11. Unlabelled creams and powders have been disposed of. The Nappy Changing Policy has been reviewed and updated to address this.
12. The highchair has been replaced with a new highchair.
13. Individual labelled baskets are in place in the service and will be used to store the children's bed linen. The sleep policy has been updated to reflect this change.

### Safe Sleep:

14. Staff have been reminded of the importance of correctly completing the sleep sheets. The Safe Sleep Policy has been reviewed and updated to ensure that all staff are aware of the procedures for ensuring the children's health and safety during sleep. All staff will receive training on completing the sleep sheets before supervising in the sleep room. Manager's weekly checks have been updated to include checks that the sleep record sheets are being correctly completed.

### Supporting documentation submitted

#### General Safety:

Photographs and documentation submitted to the early year's inspectorate.

#### General Safety:

Photographs and documentation submitted to the early year's inspectorate.

#### Safe Sleep:

Documentation submitted to the early year's inspectorate.

### Summary Comment

The actions and evidence submitted were reviewed and the noncompliance's identified under Regulation 23 have been adequately addressed.

## Part VIII - Notifications and Complaints

### Regulation 31 - Notification of incidents

*A registered provider shall notify the Agency in writing within 3 working days of becoming aware of any of the following incidents occurring in the preschool service:*

- (a) the death of a pre-school child while attending the service, including the death of a child in hospital following his or her transfer to hospital from the service;*
- (b) the diagnosis of a pre-school child attending the service, an employee, unpaid worker, contractor or other person working in the service as suffering from an infectious disease within the meaning of the Infectious Diseases Regulations 1981 (S.I. No. 390 of 1981);*
- (c) an incident that occurs in the service and that results in the service being closed for any length of time;*
- (d) a serious injury to a pre-school child while attending the service that requires immediate medical treatment by a registered medical practitioner whether in a hospital or otherwise;*
- (e) an incident in respect of which a pre-school child attending the service goes missing while attending the service.*

#### Compliance Information

(a, b,c,d,e,f)

There were no notifications of incidents submitted to the inspectorate.

## Part VIII - Notifications and Complaints

### Regulation 32 – Complaints

- (1) A registered provider shall ensure that the complaints policy of the service specifies-*
- (a) the procedure to be followed by a person for the purposes of making a complaint in relation to the service,*
  - (b) the manner in which such a complaint shall be dealt with, and*
  - (c) the procedures for keeping a person who makes such a complaint informed of the manner in which it is being dealt with.*
- (2) A registered provider shall ensure that-*
- (a) a record in writing is kept of a complaint made to the provider in respect of the pre-school service, and*
  - (b) the complaint is duly dealt with in accordance with the provider's complaints policy.*

#### Compliance Information

(1) (a) (b) (c)

The service complaints policy sets out the procedures to be followed when making a complaint, the manner in which the complaint will be dealt with and the procedures for keeping the complainant up to date.

(2) (a) (b)

The person in charge informed the inspectors that there had been no written complaint made to the service since the last 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-*

*(a) having regard to the number of pre-school children attending the service, their respective ages and the amount of time they spend on the premises, there are adequate and suitable facilities for each child 19 to play indoors and, where required by these Regulations, outdoors, during the day*

### Non-Compliance Information

There was a lack of adequate and suitable equipment for children to play with:

#### **The wobbler room**

There was a lack of equipment to allow the children to pull to stand and there were 7 “cause and effect” toys that required batteries, however 5 of the toys did not work as required.

#### **The playschool room**

The playschool room was poorly stocked with play equipment and experiences for the children. This impacted the experience of the children attending this room. The book area had very poor selection of books and most of the books in the book box were torn and in poor condition.

The play kitchen present in this playroom was poorly stocked with accessories and did not offer the children a range of experiences.

The dress up clothes area was poorly stocked with dress up costumes for the children. The costumes present were in poor condition. They were all stored in a container and not stored in a manner that would be easy for the children to pick and choose which outfit they wanted to try on.

There were limited activities observed in the playschool room and the activities listed on the programme of activities did not take place. The staff member present was unable to say why an arts and crafts activity did not take place. At 14:33 the children were observed wandering around the room little or nothing to do.

## Corrective & Preventive Action submitted by the Registered Provider

### Corrective and Preventive Action

Wobbler Room – Batteries have been replaced in the cause-and-effect toys. A supply of replacement batteries available when needed. Some pull to stand toys were outside on the day of the inspection. Staff will ensure that some of these are always available indoors. A full review of equipment will be undertaken to identify what further equipment needs to be purchased to ensure that the development needs of the children are being met.

Playschool Room – There is a large selection of books in this room, but many are seasonal or themed so are rotated regularly. However, torn books that are too damaged to be read should be removed from the box and disposed of. Staff have been reminded to check the box regularly and remove any torn book and if they are unrepairable to dispose of them.

A new play kitchen and washing machine have been added to the home corner. There is a large box of accessories and a list has been made of further items to enhance the area. These will be purchased in the new year.

Dress up outfits have been hung on hooks in the dress up corner to make it easier for children to choose their outfits.

### Supporting documentation submitted

Documentation and statements submitted to the early years inspectorate have been accepted.

### Summary Comment

The actions and evidence submitted were reviewed and the non-compliance's identified under Regulation 20 have been adequately addressed.

## 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*

### Non-Compliance Information

(3) The registered provider did not ensure the sanitary accommodation in the wobbler room was adequately heated at the required temperature range of between 18 – 22 °C. At 12.27 on the second day of

inspection, the room temperature of the nappy changing room in the wobbler was recorded at 15.7 °C.  
This temperature did not ensure the comfort for the children within the room during nappy change.

## Corrective & Preventive Action submitted by the Registered Provider

### **Corrective and Preventive Action**

There was a fault in the radiator which was repaired. The temperature in the sanitary accommodation will now be maintained between 18 – 22 °C

### **Supporting documentation submitted**

Photographic evidence was submitted to the early year's inspectorate.

## Summary Comment

The actions and evidence submitted were reviewed and the noncompliance identified under Regulation 29 has been adequately addressed.