

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015WH029
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Name of Service:	Mullingar Montessori & After School Care Ltd
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Address of Service:	Ardmore Road, Mullingar, Co. Westmeath
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Eircode:	N91 C434
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Name of Registered Provider:	Ursula Keenan
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Service type:	Full Day, Part Time
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Date of Inspection:	07/07/2025
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No of pre-school children:	AM	84	PM	63
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Address of the Early Years Inspectorate:	Early Years Inspectorate, SAP Office, St Loman's Campus, Springfield, Mullingar, Co Westmeath, N91 N4XC.
Inspection undertaken by:	T. Duignan and F. Maher
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

Mullingar Montessori & After School Ltd is registered as a full day care service with a capacity for 118 pre-school children aged between 2 – 6 years. The service is open Monday to Friday and is operated by an independent provider. A school aged childcare service is provided in the afternoon.

The Early Years' Service operates from two co-located buildings. Area one is single storey and purpose-built consisting of four pre-school rooms, a sluice room, a kitchen, an office and staff sanitary accommodation.

Area two is single storey and prefabricated consisting of two school age care rooms and a staff room.

An administration office is separately located between the two buildings.

A large outdoor play area is attached to the front of the service. Onsite parking and set down facilities are provided.

Staffing

The registered provider was not present for the inspection.

Thirty-one adults are employed in the service. On the day of the inspection there were eighteen adults present and of these, eleven were working directly with the children and one student was on placement. The person in charge, supervisor and two child care practitioners provided additional support to the care rooms as needed; a cook was employed to prepare food for the children daily and the administrator was onsite.

All staff members held a major award in Early Childhood Care and Education at Levels 5 to 8, or a qualification recognised as equivalent on the National Framework of Qualifications.

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

The inspection focused on an examination of compliance under

- Regulation 9 (1)(a)(b)(c), (2)(a)(b)(c)(d), (4) - Management and recruitment.
- Regulation 11(1),(2),(8)(a) – Staffing Levels.
- Regulation 23 – Safeguarding health, safety and welfare of child.
- Regulation 24 - Checking in and out and record of attendance.
- Regulation 25 (1), (2)(a)(b) – First aid.
- Regulation 26 – Fire Safety.
- Regulation 27 – Supervision.
- Regulation 28 – Insurance.

however, on inspection additional non-compliances were identified under:

- Regulation 15(1)(f) – Record of a Pre-School Child.
- Regulation 19(1)(b) – Health, Welfare and Development of Child.
- Regulation 21 – Equipment and Materials.
- Regulation 22 – Food and Drink.

These findings are outlined within the relevant regulations within this report.

A sampling process was used to assess compliance under

- Regulation 19(1)(b) – Health, welfare and development of child.
- Regulation 23 – Safeguarding health, safety and welfare of child.
- Regulation 21 – Equipment and Materials.
- Regulation 25 (1), (2)(a)(b) – First aid.
- Regulation 27 – Supervision.

As a result, the scope of the inspection included the Toddler (room 1), Toddler (room 2) and Room 3.

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

1. A written immediate action notice under Regulation 23 – Safeguarding Health, Safety and Welfare of child was issued to the registered provider by the Early Years Inspector on 7 July 2025.

The written response received by the Early Years Inspector on 8 July 2025 from the person in charge on behalf of the registered provider in relation to the immediate action notice was accepted. See body of report for details.

2. A written immediate action notice under Regulation 9 – Garda Vetting was issued to the person in charge (in the absence of the registered provider) onsite by the Early Years Inspector on 7 July 2025 in respect of a Garda Vetting disclosure not being available for one member of staff.

The written response received by the Early Years Inspector on 7 July 2025 from the person in charge on behalf of the registered provider in relation to the immediate action notice was accepted. See body of report for details.

Acknowledgments

The inspectors wish to acknowledge the cooperation of the person in charge, the supervisor, 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*
- (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) There was a designated person in charge and a named person to deputise as required, both remained on the premises for the duration of the inspection.

The files of 31 staff and one student were reviewed.

(2)

(a)(b) Two written and verified past employer references or references from a reputable source other than a past employer, were available in respect of 31 adults employed and one student and one written and verified reference from a past employer or from a reputable source was on file for 1 further staff member.

(c) Garda Vetting disclosures were available for 31 adults working in the service. The service also demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years.

(d) Police vetting was available for 7 adults who had resided outside the state for a period of longer than 6 consecutive months whose records were reviewed.

(4) 26 adults employed and working directly with children attending the service held at least a major award in Early Childhood Care and Education at Level 5 or higher or a recognised equivalent qualification on the National Framework of Qualifications.

Non-Compliance Information

(2)

(a)(b) One written verified reference was not available for one staff member employed whose record was reviewed.

(c) A Garda Vetting disclosure was not available for one adult working in the service.

A written immediate action notice under Regulation 9 – Garda Vetting was issued to the person in charge (in the absence of the registered provider) onsite by the Early Years Inspector on 7 July 2025 in respect of Garda Vetting disclosure.

(d) Police vetting was unavailable for one staff member employed who had lived in a state other than the State for a period of longer than 6 consecutive months.

(3) The procedures specified under regulation 9(2) had not been completed prior to persons being appointed, assigned or allowed access to or contact with a child attending the pre-school service.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(2)

(a)(b) A reference was sourced & checked.

(c) Garda Vetting is now on file for the adult.

(d) The police vetting has been applied for from the jurisdiction.

(3) All new starter employee & student information has been updated to clearly reflect requirements prior to employment /placement commenced in the service.

Supporting documentation submitted

(2)

(a)(b) Vetting document.

(c) Garda vetting document.

(d) evidence of postage receipt for the application documents.

Summary Comment

The written response and documentary evidence submitted by the manager on behalf of the registered provider has been reviewed by the Early Years Inspectorate.

Evidence of an application for International Police Vetting for one staff member was reviewed however, a copy of the completed International Police vetting has not been submitted to the inspector to date. The registered provider is required to furnish the required documentation to the Inspectorate on receipt of same. The non-compliance in relation to regulation 9(2)(d) remains outstanding.

Regulatory compliance is met for regulation 9(2)(a)(b).

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 eighty-four children attending the service and they were supervised directly by eleven adults. This included the three of the five persons available to provide relief to the care rooms as needed.

(2) The minimum ratio of adults to children was adhered to during the day.

(8)(a) There were at least two adults on the premises at all times for the duration of the Inspection. This was confirmed following review of the staff roster for the service.

Part IV – Information and Records

Regulation 15 – Record of pre-school child

(1) A registered provider of a pre-school service other than a pre-school service in a drop-in centre or a temporary pre-school service shall ensure that a record in writing is kept in respect of each pre-school child attending the service containing the following particulars:

(f) details of any illness, disability, allergy or special need of the child, together with all the information relevant to the provision of special care or attention;

Non-Compliance Information

(1)

(f) It is acknowledged that written health care plans were in place, however, the written health care plans for eleven preschool children attending the service did not contain all the information required to ensure the safe management of the child in the event they became unwell or required emergency administration of medication.

This is evidenced by the following observations:

- Prepopulated templates were used for management of anaphylaxis reaction, however, there was no dosage recorded for the antihistamine medication to be administered in the event of a mild reaction occurring.
- There was no written evidence that the registered provider had reviewed the health care plans with the parents including signatures from the parents, registered provider and where necessary oversight of the health care plan by the child’s medical/ healthcare practitioner.

This practice did not align with the medication management policy which stated that “Where medical conditions exist for a child, we will develop individual medical care plans which will include the management in the event of an emergency relating to the condition. This will be provided to you to complete in advance of your child start with the service. This will be developed in conjunction with the parents and the child’s medical advisers.”

- There was no date on a care plan for a child who required medication for a health condition.
This practice did not align with the medication management policy which stated that “A full medical and medicine history must be provided for each child.”
- Two further health care plans for children with other health conditions did not have any evidence of oversight by the registered provider.
- There was no written health care plan available for six children attending with medication in a container labelled with their names.
- The medication for one of the above children had expired.

- There was no evidence that reviews of each child’s health care plan had been completed regularly to update any changes in medication or management.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(1)
(f) Every child who has / have a healthcare plan have had a new action plan provided to them to complete. We added in new data for completion to include dosage for each medication, a yearly review date to be completed before the start of each new term, clear areas for signatures & dates. We have implemented a new system of recording all children with medications to include a clear expiry date on the log and date of review.

The medical actions plan will be signed off by the school supervisor as completed in full before the start of each term and checks will be done monthly alongside our first aid checks to ensure any expiring medication or reviews required are captured and actioned.

The school supervisor will now be responsible for checking any new child starting with the service to ensure all medical action plans are completed correctly.

A training session was given to our supervisor and the teacher on the medical actions plans, the requirements and the importance of their contents.

Supporting documentation submitted

Revised medication action plan & summary log.

Summary Comment

The written response and documentary evidence submitted by the manager on behalf of the registered provider has been reviewed by the Early Years Inspectorate. Regulatory compliance is met for regulation 15(1)(f).

Part V - Care of Child in Pre-school Service

Regulation 19 - Health, welfare and development of child

- (1) A registered provider shall, in providing a pre-school service, ensure that-
- (b) appropriate and suitable care practices are in place in the pre-school service, having regard to the number of children attending the service and the nature of their needs.

Non-Compliance Information

1. A child aged 2 years 5 months, attending on a part-time basis was observed asleep in the rest area on the floor in Room 1 from 12:00 – 12:45 approximately until the child was collected from the premises. The child was not placed in a sleep bed and sleep observations were not completed.

This practice did not align with the safe sleep policy which stated, “Children needing sleep during the session have access to a low-level bed or mat.....If children fall asleep within our settingwe will record a written check every 10 minutes.”

2. The children were observed to eat their snack from their lunch boxes however some children, who were observed to place their food directly on the table, were not provided with plates.
3. The children in Room 1 were attending on a part time basis and were not provided with a second meal.
4. Meals and snacks were served over 3 hours apart as it was observed that lunch was served to the children in room 3 at 12:15 hours and the afternoon snack was served approximately 15:30 hours.
5. The nappy changing and sanitary facilities used by Room 1 did not respect the privacy and dignity of the children as there was a clear glass viewing panel between Room 1 and the sanitary area. The door to the sanitary area could not be closed as the nappy change unit partially blocked the entrance.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

1. Where sleep time is required the appropriate sleep environment and sleep checks will be provided.
2. Plates have been purchased for the children in the service for the morning snack times. The teachers have been informed that plates are to be provided to the children during their snack times.
3. An early morning Snack has been added at 8.15am for the children. A hot breakfast will be offered to all children attending the service at 8.15am We have adjusted the timings of our meals daily – first morning snack will be offered at 8.15am, the second morning Snack will be offered at 10.30am, the third meal is offered at 12.15pm and afternoon snack is offered at 3.15pm
4. This revised meal time schedule means there is no longer than 3 hours between each meal. The school supervisor will maintain oversight.
5. The changing space was rearranged, and the teachers have been informed about the importance of the privacy of the children. The school supervisor will maintain oversight.

Supporting documentation submitted

1. Not required.
2. Photograph of snack time with plates.
3. Photograph of morning snack.
4. Not required.
5. Photograph of changing area in Room 1.

Summary Comment

The written response and photographic evidence submitted by the manager on behalf of the registered provider has been reviewed by the Early Years Inspectorate. Regulatory compliance is met for regulation 19(1)(a). This area of practice will be reviewed at the next inspection.

Part V – Care of Child in Pre-school Service

Regulation 21 – Equipment and materials

A registered provider shall ensure that there is adequate and suitable furniture, play and work equipment and materials available on the premises of the pre-school service.

Non-Compliance Information

1. The four tables used by the children in Room 3 for tabletop activities and meals were too high for the twenty - two chairs available. The tables were observed to be at the height of children’s chest/ shoulders when they were seated.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

1. The tables that were too high have been replaced with tables that are appropriate to the children’s height. All tables have checked to ensure they are the appropriate height for all children in each room.

Supporting documentation submitted

1. Photographs of new tables.

Summary Comment

The written response and photographic evidence submitted by the manager on behalf of the registered provider has been reviewed by the Early Years Inspectorate. Regulatory compliance is met for regulation 21.

Part V - Care of Child in Pre-school Service

Regulation 22 – Food and drink

A registered provider shall ensure that adequate and suitable, nutritious and varied food and drink is available for each pre-school child attending the pre-school service.

Non-Compliance Information

1. The main meal of ‘Cheesy pasta’ or an alternative of ‘plain pasta’ served for lunch on the day of the inspection was not nutritionally adequate as there was no meat and vegetables provided. This did not align to the Healthy Eating policy which stated “Well-balanced and nutritious meals are provided for the children. A variety of foods is selected from each of the four main food groups every day”

2. The three weekly menu reflected lunch menu only and there was no detail of the morning, afternoon snacks and the teas provided daily to the children attending on a full day care basis on a daily basis.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

1 & 2 The daily menu has been reviewed to ensure it includes a varied diet in line with our policy. The cheesy pasta dinner now includes ham & a selection of vegetables.

Supporting documentation submitted

Photographs

Summary Comment

The written response and photographic evidence submitted by the manager on behalf of the registered provider has been reviewed by the Early Years Inspectorate. Regulatory compliance is met for regulation 22. This area of practice will be reviewed at the next inspection.

Part VI - Safety

Regulation 23 - Safeguarding health, safety and welfare of child

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

Compliance Information

General Safety:

The service met the necessary safety requirements in respect of the indoor environment, toys and equipment and safe storage of cleaning agents. A risk management policy was available in the service.

Infection Control:

Thermostatically controlled hot water, liquid hand soap and air dryers were readily available for hygienic hand washing and drying. The staff members were familiar with the importance of handwashing practice as a means to control the spread of infection in the service. They supervised children's handwashing and handwashing routines were well established. Foot pedal operated bins were provided for the disposal of used tissues. Facilities were available for nappy changing. Electronic cleaning schedules were maintained for the room environments which were observed to be clean and tidy. An infection control policy was available in the service.

Administration of Medication:

Medicine was not given at the time of the inspection, written parental consent was available should medication be required to be administered to a child. The staff members were familiar with required practices when administering

medication in the service. Any medication administered was recorded on the child's electronic record. A medication policy was available.

Safe Sleep:

Twelve low level sleep beds and fourteen sleep mats were available for all children aged over 2 years who were provided with sleep at a designated time. The staff members demonstrated knowledge of the care of sleeping children in response to questions asked by the inspector. It was observed that 10-minute sleep check observations were completed and recorded electronically on all sleeping children. This included the colour, position and breathing of sleeping children in their care.

A rest area was available for the children in each care room if they wished to take a break from activities and rest.

Fire Safety:

Monthly fire drills had been carried out and staff members were familiar with fire safety evacuation procedures from the service. The internal fire exits were not obstructed.

Outing:

The service conducts outings and an outings policy is available.

Non-Compliance Information

General Safety:

1. The main entrance gate of the premises that accessed the outdoor play areas was not secured to prevent the potential direct entry into the service by unauthorised persons.

A written immediate action notice under Regulation 23 – Safeguarding Health, Safety and Welfare of child was issued to the registered providers by the Early Years Inspector on 7 July 2025.

2. The entrance doors to the two buildings that accommodate the six care rooms remained open throughout the day of the inspection. The internal doors to the care rooms were secured by an electromagnetic lock with the switch to disable the electromagnetic lock located high on the wall beside the door. A potential risk of unauthorised entry to a care room existed.
3. The entrance door to Room 3 was secured by an electromagnetic locking system. This door was not secured throughout the day of the inspection as the magnetic locking system was not working. A potential risk of unsupervised exit of a child or unauthorised entry to a care room existed.
4. A child was observed to wear an amber bead necklace which posed the potential risk of choking. The necklace was removed when it was brought to the attention of the staff member.

This practice did not adhere to the updated requirements of the Early Years Inspectorate Regulatory notice – Amber Bead Teething Jewellery.

5. A large roll of paper towel used to cover the wall mounted nappy change unit placed on top of a basket containing a roll of single use disposable aprons was placed on the windowsill above a toilet. This could cause potential injury to a child using the toilet if it fell down.
6. There were no visibility strips on the large window in Room 1. This posed a potential risk of injury to a preschool child if they failed to recognise the glass.
7. A fire safe restrictive opening device was not fitted to the window that opened outwards in Room 1.
8. The tall storage units in Room 3 were not anchored to the wall. They could potentially tip over causing potential injury.

Infection Control:

9. Nappy changing practices required to be reviewed for infection control purposes and best practice as the gloves and apron were not removed at the point that the soiled nappy and wipes were disposed of and prior to touching the new nappy and children's clothing.
10. The sanitary areas in Rooms 1, 2, 3 and 4 were used for storage of equipment, materials and personal belongings which was not appropriate for infection control purposes.
11. An uncovered nappy change mat was observed to be placed on a radiator in Room 2 sanitary area. This was not acceptable for infection control purposes.
12. Cloth towels were provided for adults to use for hand drying in the service in Rooms 1, 2 and 3. This was not acceptable for infection control purposes and increased a risk of cross infection. It was observed in Room 2 that a child used the towel and placed it on the hook, an adult then used it later. This did not align with the Infection Control policy which stated that the "Facilities for handwashing: we provide the following.....Paper hand towels and liquid soap."

This was a non-compliance following inspection conducted on 28 November 2019. The corrective action submitted by the registered provider following the inspection failed to prevent recurrence of this non-compliance.

13. Paper towels were not available in Rooms 1, 2, 3 and 4 and the attached sanitary areas.
14. A foot pedal operated nappy bin was not available in the sanitary area adjacent to Room 1.
15. The children's soothers that remained in the premises were not washed and air dried after being used for sleep. This did not align with the Infection Control policy which stated that the "soothers are..... sterilised regularly."
16. The children's bed linen was not stored individually for infection control purposes. Instead, the sheet was rolled in the blanket. These blankets were then placed on top of each other in a closed cupboard.

17. The safe sleep policy states “Parents must provide a large cellular blanket labelled with the child’s name. This will be sent home to be laundered monthly. This is not adequate for infection control purposes.”

Administration of Medication:

18. All emergency medications were placed in an open storage unit placed in the hallway between Rooms 3 and 4 and not in each child’s care room for immediate access. This created a risk to a child because it was not immediately available in an emergency.

19. This medication and associated paperwork were stored in an assortment of containers. It was observed that some were stored in freezer bags, medication was stored in containers which were too small for the boxes / bottle of medicine. This created a potential risk that some equipment could be misplaced, or medicine could fall out and break all of which impacts on the welfare of the children.

Safe Sleep:

20. The environmental temperature in Room 2 when used for sleep purposes was 25.5° Celsius. Open windows, one air conditioning unit and a fan were being used to cool the environment. Further corrective measures included opening the doors to allow air to flow through. The temperature reduced to 22.6° Celsius at 14:32 hours. Fourteen children were sleeping on a combination of low-level beds and floor mats.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1. A second lock was added to the inside of our gate preventing people arriving from opening the gate. In addition, a door bell with a camera was introduced at the entrance gate. All visitors have to request access to the school. The camera is connected to the supervisor school phone who has visibility on the entrance. Parents were informed on the new process of ringing the doorbell on arrival and all staff now are aware that access to the school must only be given by a staff member.
2. Teachers were informed of the importance of keeping inner doors closed at all times. A sign has been added as a reminder to all teachers. The school supervisor has been extra vigilant to ensure the doors outside are closed and inner doors are working correctly.
3. The inside doors were reviewed and where some sticking was found the door frames were shaved down now allowing the lock mechanisms to kick in correctly. Teachers were informed to make management aware of any issues with their inner doors. The school supervisor has been extra vigilant to ensure the doors outside are closed and inner doors are working correctly.

4. The teachers have all been reminded to be extra vigilant for any jewellery worn by children that does not align to the school policy. The school supervisor will be extra vigilant for this moving forward. The jewellery policy was resent to all parents.
5. The changing rooms were rearranged and wall mounted paper towel dispensers were introduced to all rooms in the school. The windowsill has been cleared of all items removing risk.
6. A full privacy screen was purchased for the window in room 1. This allows the children to see out, but nobody can now see in. The screen is tinted slightly highlighting its presence to the children. Images have been added to further increase visibility for children.
7. A fire safe restrictive opening device has been fitted to the window in room 1. All windows have been checked to ensure compliance.
8. All storage units in the school have now been anchored to the walls.

Infection Control:

9. The nappy changing guidelines have now been reviewed to align with the most up to date guidance. The policy has been printed at our nappy changing areas & staff have been retrained in the procedures.
10. All sanitary areas in Room 1, 2, 3 & 4 have been cleared of all items and are no longer used for storage of any items.
11. This nappy changing mat has been removed from Room 2 and the teachers will be using the correct nappy changing unit in place in line with policy.
12. All cloth towels have been removed from the classroom and paper towel dispensers have been introduced to every room.
13. Paper towel dispensers are now available in every room.
14. New nappy bins have been purchased for the school in line with sanitary requirements.
15. Soothers are now sent home with the children daily and returned the next day for sleep time use. The policy has been updated to reflect this.
16. Each blanket is now stored in its own individual bag and sealed between uses
17. We have updated our policy to reflect the children's blankets being laundered weekly. This has been communicated to parents, and it was actioned immediately.

Administration of Medication:

18. All medication boxes with medical action plan and medication have been added to each room where a child is present during the day. The teachers have been informed of the new locations in each of the rooms.

19. The policies have been updated to Inform that the medication box is provided by the service. A medical action plan is required to be completed with parents.

Safe Sleep:

20. An air conditioning unit has been purchased and introduced to Room 2 where the toddler children sleep allowing the teachers to control the temperature in the room.

Supporting documentation submitted

General Safety:

Points 1, 2, 3 – photographs.

Point 4 – document.

Points 5, 6, 7, 8 – photographs.

Infection Control:

Point 9 – document.

Points 11, 12, 13, 14, 15, 16, 17, 18, - photographs.

Administration of Medication:

Point 18 – photograph.

Point 19 – document.

Safe Sleep:

Point 20 – photographs.

Summary Comment

The written response, documentary and photographic evidence submitted by the manager on behalf of the registered provider has been reviewed by the Early Years Inspectorate. Regulatory compliance is met for regulation 23. This area of practice will be reviewed at the next inspection.

Part VI - Safety

Regulation 24 - Checking in and out and record of attendance

(1) A registered provider shall ensure that each pre-school child attending the service is checked in and out of the service by an employee or an unpaid worker.

(3) A registered provider shall ensure that-

(a) no person other than-

(i) pre-school child attending the service,

(ii) a person dropping or collecting such a child,

(iii) an employee, or

(iv) an unpaid worker, can enter the premises without his or her entry being approved by an employee, and

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

(4) A registered provider shall ensure that a record in writing referred to in paragraph (3)(b) is retained for a period of one year from the date to which it relates.

Compliance Information

(1) The registered provider ensured that each child was checked in and out of the service. This was confirmed by the electronic attendance records maintained in each care room.

Non-Compliance Information

(3) (a),(b) The registered provider did not ensure that any person entering the service was approved as a record in writing was not maintained.

(4) Not applicable, as no record in writing was maintained in the service.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(3)(a),(b) A visitor book has been introduced at the school entrance.

Supporting documentation submitted

Photograph of new visitor book.

Summary Comment

The written response and photographic evidence submitted by the manager on behalf of the registered provider has been reviewed by the Early Years Inspectorate. Regulatory compliance is met for regulation 24.

Part VI - Safety

Regulation 25 - First aid

(1) A registered provider shall ensure that a person trained in first aid for children is, at all times, immediately available to the children attending the pre-school service.

(2) A registered provider shall ensure that a suitably equipped first aid box for children-

(a) is safely stored in an easily accessible and conspicuous position on the premises, and

(b) is available to the children attending the pre-school service at all times.

Compliance Information

(1) Staff members present were trained in first aid response (FAR) and were immediately available to the children attending the service.

(2)

- (a) The first aid equipment was safely stored, in a conspicuous position in the care rooms inspected. Further supplies were stored in a storage unit positioned in the hall between rooms 3 and 4.
- (b) Suitably equipped first aid boxes for children were available at all times to the adults caring for the children attending the service.

Part VI - Safety

Regulation 26 - Fire safety measures

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

Compliance Information

- (1)
- (a) A written record was available of fire drills completed in the service. The last recorded fire drill was 18 June 2025.
- (b)
- A record was kept of the number, type and maintenance of the firefighting equipment and smoke alarms in the premises. Firefighting equipment was serviced in February 2025, and the smoke alarm was last serviced on 18 June 2025.
- (4) A notice of the procedures to be followed in the event of a fire was displayed in a conspicuous position in the premises.

Part VI - Safety

Regulation 27 – Supervision

A registered provider shall ensure that pre-school children attending the service are supervised at all times.

Compliance Information

The children were observed being supervised at all times throughout the inspection by the adults caring for them both indoors in their care rooms, while using the sanitary area and in the outdoor area.

Part VI - Safety

Regulation 28 - Insurance

A registered provider shall ensure that the pre-school service is adequately insured.

Compliance Information

There was evidence of current insurance cover valid until 27 March 2026. The insurance provided cover for 148 children.

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

Non-Compliance Information

(c)

- The environmental temperature in Room 3 was not maintained between 18° - 22° Celsius. The temperature was 24° Celsius at 14:25 hours. A fan was brought into the room and switched on. A wall mounted radiator was switched to cool setting in an attempt to reduce the environmental temperature. The temperature was rechecked at 14:37 hours and was noted to be 24.1° Celsius.

(d)

The service was not maintained and repaired as evidenced by the following observations:

- The paintwork on the walls, windowsills, skirting boards in Rooms 1, 2 and 3 and the adjoining sanitary areas was observed to be worn, chipped, peeling and very stained. Holes were observed on the walls in the care rooms and sanitary areas which revealed the cement layer and required to be repaired.
- The pipework under the sinks in all the sanitary areas attached to Rooms 1, 2, 3 and 4 were exposed. This required to be closed off and any holes repaired.
- There were no splash backs at the back of the sinks in the sanitary areas and the care rooms. The paintwork around the sinks was unclean and heavily stained, chipped and peeling. Exposed cement work was noted under the soap dispenser in the sanitary area adjoining Room 3.
- The area around a switch on the wall in sanitary area for Room 3 was observed not to be finished to a smooth surface and there was a build-up of debris around it.
- The sealant around the sink in Room 1 was observed to have come away from the wall creating a gap.

7. In the sanitary area for Room 1, two holes in the wall used to bring pipework to the sink in the outdoor area had not been sealed, skimmed and painted.
8. A build-up of dust was noted on the air dryer in the sanitary area adjoining Room 1 due to the dustpan placed on a hook above it.
9. There was no toilet seat on the child's toilet in the sanitary area used by Room 1. A trainer seat was placed on top of the toilet.
10. The plastic laminate covering on the work surface of the sink unit in Room 3 was worn and lifting off on the left-hand side exposing the inner compressed wood. The edge on the right-hand side had an area of inner high-density chipboard exposed as the protective metal cover was too short.
11. The edges of the shelving in Room 3 were unfinished and exposed the inner high-density chipboard.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

- (c)
1. New fans have been purchased for every room allowing much better ventilation and temperature control.
- (d)
2. The school has been repainted outside and inside including skirting boards and window sills, holes in all rooms have been refilled, repaired and repainted. A maintenance calendar has been introduced quarterly to ensure any items that require upkeep are maintained.
 3. All pipework has now been boxed off in rooms 1 2 3 and 4.
 4. Splash back have now been introduced behind the sinks in sanitary areas in the care rooms.
 5. The paintwork and holes have been completed in all rooms including Room 3. The area around the switch in Room 3 has been cleaned, replastered and repainted.
 6. The sealant around the sink in room 1 has been repaired.
 7. The area around the pipework in Room 1 has been sealed plastered & painted.
 8. The hook for the dustpan has been removed and a new location found for the dustpan.
 9. A toilet seat was added to the toilet in Room 1.
 10. The plastic laminate covering on the work surface of the sink unit in Room 3 has been mended. Regular maintenance calendar has been introduced quarterly to ensure any items that require upkeep are maintained.
 11. The edges on the shelving in Room 3 have been finished and mended.

Supporting documentation submitted

Points 1-11 photographs.

Summary Comment

The written response and photographic evidence submitted by the manager on behalf of the registered provider has been reviewed by the Early Years Inspectorate. Regulatory compliance is met for regulation 29. This area of practice will be reviewed at the next inspection.