

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2020GY005
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Name of Service:	Sonas Early Years Centre
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Address of Service:	Unit 11, Galway Retail Centre, Knocknacarra, Co. Galway
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Eircode:	H91 H6CY
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Name of Registered Provider:	Theresa Murphy
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Service type:	Full Day
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Dates 1 of Inspection:	25/02/2025
Date 2 of Inspection:	26/02/2025
Regulatory Compliance Meeting	06/03/2025
Regulatory Enforcement Meeting	12/05/2025

No of pre-school children: Day 1	AM	69	PM	68
Day 2	AM	70	PM	69

Address of the Early Years Inspectorate:	Tusla – Child and Family Agency, Early Years Inspectorate, Quality and Regulations Directorate, Clinical & Administration Building, Block A - (1st Floor- Green Corridor), Merlin Park, Co. Galway.
Inspection undertaken by:	S. Meehan, E. Friel and F. Duffy
Title:	Early Years Inspectors and Inspection and Registration Manager.

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

27th June 2025

Regulation 9, 19 and 23 of the Child Care Act 1991 (Early Years Services) Regulations 2016

The Registered Provider will be required to comply with the following conditions:

- Ensure that all staff members are appropriately supervised and provided with information and training in relation to the policies, procedures and statements of the service.
- Ensure that no practices that are emotionally or physically harmful are carried out in respect of a preschool child whilst attending the service.
- Ensure that sleep checks are conducted at 10-minute intervals on all sleeping children as per the service policy.

Description of service

This purpose-built early years service is based in an urban area of Galway city, in Knocknacarra, known as Galway retail centre. The service operating hours are 8 am to 6 pm, from Monday to Friday. While the service is registered to accommodate children aged 0 - 6 years it is currently accommodating children from 1 - 6 years. The service caters for full day-care, part-time care, Early Childhood Care and Education scheme (ECCE) and sessional pre-school care programmes from 9.30 am to 12.30 pm. This ground floor premises has a total of five playrooms- the Buttercups room, Bluebells room, Daisy's room, Daffodils room and the Sunflower room. The service has a designated kitchen where food is prepared and cooked on site by a resident chef. To the rear of the premises children have access to two outdoor play areas.

Staffing

The service currently employs 17 adults, which includes the manager, allocated area manager and a chef working in the service. There was also a student on placement who was not present on the days of inspection.

The registered provider does not work in the service and is not detailed on the staff roster.

On day one of the inspection two childcare staff were transferred from another service of this childcare chain to replace staff on leave.

On day two of the inspection a further two area managers were present in the service and two childcare staff were also transferred from two other services of this childcare chain to replace staff on leave. Their staff files were reviewed and documented in Regulation 9 Management and recruitment.

Methodology

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

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

The findings on inspection are based on:

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

This inspection was unannounced and focused on the area of governance, health, welfare and development of child, safety, premises and facilities.

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 Years Inspectorate.

25/02/2025

An immediate action notice was issued under Regulation 23 - Safeguarding, Health, Safety and Welfare of children on site regarding an interaction observed between a staff member and a child. Please refer to Regulation 19 (3) Health, Welfare and Development of the Child in the body of the report.

A response was received to the immediate action notice in the afternoon of the 25/02/2025 in which actions taken by the registered provider were detailed. These included planned additional mandatory training for all staff to include strategies for behaviour management, child protection, safeguarding and reporting procedures. These actions addressed the immediate risk identified.

06/03/2025

A regulatory compliance meeting was held by the Inspection and Registration Manager with the Registered Provider to discuss the immediate action notice issued and the actions taken by the registered provider.

01/04/2025

This service was referred to the National Registration Enforcement Panel in relation to unresolved areas of recurring and outstanding non-compliance within the early years' childcare facility. A regulatory enforcement meeting on the 12th of May 2025 was facilitated by the National Manager for Escalation and Enforcement and the National Inspection Manager with the registered provider. The meeting was convened to discuss the recurring non-compliances and non-compliances found on inspection.

Acknowledgments

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

Part III – Management and Staff

Regulation 9 – Management and recruitment

(1) A registered provider shall ensure that-

- (a) the service has a designated person in charge and a named person who is able to deputise as required,
- (b) at all times during the period when the pre-school service is being carried on, the designated person in charge or the named person referred to in subparagraph (a) is on the premises, and
- (c) there is a clear management structure in the service that identifies the lines of authority and accountability in the service and the specific roles and responsibilities of each employee and unpaid worker.

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

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

(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) On both days the area manager was the person in charge, the manager or deputy manager were available to deputise in their absence.

(b) The roster indicated that there was a designated person in charge during the inspection and indicated that a person was in charge while the service was carried out.

- (c) The inspectors observed that a clear management structure was in place in the service. The area, service and deputy managers were available. There were also room leaders assigned to each playroom.
- (2) There were 7 adults and 1 student who had begun working at the service since the previous inspection, undertaken on 16th of October 2024. The records of the two area managers and four staff transferred to work in the service from other childcare services in the chain were also reviewed. Therefore, recruitment records in relation to these 14 persons were reviewed.
- (a) Twenty-two of the required 28 written and validated references were from past employers.
- (b) Six of the required 28 written and validated references were from a source other than a past employer.
- (c) Garda vetting disclosures were available in respect of the 13 adults and 1 student working in the service. The service demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years.
- (d) International police vetting was available for nine adults working in the service who had lived in another state for a period longer than six months.
- (4) Thirteen adults working directly with the children held Early Childhood Care and Education qualifications ranging at Level 5 and 8 on the National Framework of Qualifications or a qualification deemed by the Minister to be equivalent. One student working in the service did not require a Level 5 qualification.
- (7)(a) Evidence was available that 17 of 24 adults had received induction training which included all policies of the service, each staff members role in the service, the governance structure, grievance and disciplinary procedures, code of behaviour and mandatory training required. A staff handbook was available.

Documented evidence was available for these staff that they had signed and received training in the following policies:

- Policy on Behaviour Management.
- Supervision policy.
- Complaints policy.
- Induction & Staff Training policy.
- Risk Management Policy.
- Child Safeguarding Statement.

Non-Compliance Information

(7)(a)

1.

There were no induction records available for 1 adult and 1 student working in the service.

Evidence that induction had been completed was not available for 5 staff as induction records including signing for having reviewed the service policies were incomplete. This posed a potential risk that these adults may be unaware of the regulatory requirements and the need to provide good quality practice to ensure the wellbeing, learning and development of the children attending the service.

2.

Supervision of staff was not taking place as per the supervision policy of the organisation. While the organisations policy stated that supervision took place every two months, the service policy did not state the period in which supervision should be carried out. Records documented that the last date recorded for supervision of staff taking place in the service was 30th of September 2024. This posed a potential risk that staff were not given the opportunity to engage in regular supervision to support their work practices and ensured that best practice in childcare was maintained.

Corrective & Preventive Action submitted by the Registered Provider

The registered provider stated in their response:

Corrective and Preventive Action

1. Inductions have been completed with both student and staff members following the inspection. These will take place in future on the first day of commencing employment in line with the training policy.
2. At the Regulatory Compliance Meeting 06/03/2025 the registered provider stated that a review of supervision practice had commenced and that management will be responsible for staff supervision checks and will carry out routine supervision of staff in care rooms. The service conducts supervision every two months with all staff in line with the service's supervision policy.

Supporting documentation submitted

1. Copy of signed induction for the student and staff members.
2. The staff training and supervision policy was submitted with a time frame of two months.

Summary Comment

On review of the documentation submitted the early years inspectors have deemed that the evidence has met the requirements of Regulation 9 (7) (a).

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 following policies, procedures and statements in Schedule 5 were reviewed and met the necessary requirements:

- Complaints.
- Administration of Medication.
- Induction and Recruitment.
- Supervision.
- Child Protection Policy.
- Behaviour Management.
- Risk Management.
- Accident and Incident.

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) An adequate number of adults were working with the children on both days of inspection.

(2) The registered provider ensured that the minimum ratio of adults to children was adhered to.

There were 17 adults working directly with 69 children on the 1st day of inspection and there were 14 adults working directly with 70 children on the 2nd day of inspection.

(8)(a) Documentary evidence on the roster indicated that at least two adults were on the premises when the pre-school was operating.

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:

- (a) the name, position, qualifications and experience of the person in charge and of every other employee, unpaid worker and contractor;
- (i) details of staff rosters on a daily basis;
- (j) details of any medication administered to a pre-school child attending the service with signed parental consent;
- (k) details of any accident, injury or incident involving a pre-school child attending the service.

Compliance Information

16(1)

- (a) The name, position and experience of all staff were available in the staff recruitment files in the service.
- (j) A sample of six records which were completed since the last inspection 16 October 2024 were reviewed. Details of medication administered to the pre-school children attending the service were recorded with signed parental consent and details of medication administered were issued to parents on the electronic application system.

Non-Compliance Information

- (i)

The staff roster was not maintained accurately. The roster for the week of inspection did not have the name of each staff member working in the service for each day recorded. Three staff working in the service on day 1 were not recorded and 5 staff were not recorded on the roster on day 2 for the hours present in the service. This posed a potential risk to the safety of both staff and children in the event of an emergency in the service.
- (k)

On day 1 a sample of 17 accident, injury or incident records involving pre-school children attending the service were reviewed. Nine of the 17 records reviewed were not completed as per the service accident and incident policy. These records were missing a combination of signed, parental, area manager, manager and/or staff signatures. Accidents, injuries or incidents records are issued to parents on the service’s electronic application system. It is

acknowledged that on day 2 of the inspection all signatures were present, this included 1 of the 9 records reviewed which was in reference to a notification of incident submitted in relation to an accident, injury or incident which occurred on the 13th of February 2025. Not maintaining accident, injury or incident records accurately could potentially impact on the continuity of care given at home if the parents or guardians have not signed to state they have read and are aware of, the actions taken and medications administered in the service if applicable.

Corrective & Preventive Action submitted by the Registered Provider

The registered provider stated in their response:

Corrective and Preventive Action

- (i) The roster has been revised and will be updated daily to reflect staff absence and cover. This is to prevent any potential risk to children or staff.
- (k) All accident, injury or incident records were updated and signed by management, parent/guardians and staff. Managers and staff have been briefed on the importance of completing the reports accurately.

Supporting documentation submitted:

- (i) A copy of the revised roster including staff absence and cover was submitted to the office of the inspectorate.
- (k) Copies of the accident, injuries and incident records were viewed by the inspectors on day 2 of inspection.

Summary Comment

On review of the documentation submitted the early years inspectors have deemed that the evidence has met the requirements of Regulation 16 (i) and (k).

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

(3) A registered provider shall ensure that no practices that are disrespectful, degrading, exploitive, intimidating, emotionally or physically harmful or neglectful are carried out in respect of a pre-school child whilst attending the service.

Compliance Information

(1) (a)

BASIC NEEDS:

- Healthy eating was promoted within the service and the food observed was healthy and nutritious. The hot meal of the day was served between 12:00 to 12:25 and on day 1 they were served cottage pie and an alternative vegan bean pie and on day 2 they were served spaghetti bolognese or vegetarian pasta. Children were offered extra portions of food as requested.
- The children were afforded plenty of time to enjoy their snack in a relaxed and unhurried manner.
- Crockery and plates were given to children during snack times, laid out on age-appropriate low tables.
- Children in highchairs in the Buttercups playroom were assisted as required with spoon feeding and independence was encouraged by the adults.
- Perishable items belonging to children were stored in the service fridge.
- The children had access to water, which allowed them the opportunity to take a drink if thirsty.
- The children had the opportunity to rest or relax on couches, in the designated rest and relaxation areas in the playrooms.
- On the day of inspection, the children were observed playing in the outdoor area, in circle time, at tabletop activities, artwork and free play.

SUPPORTING RELATIONSHIPS AROUND CHILDREN:

- A key person system was in place for each child and staff stated this was to inform curriculum planning.
- Staff were observed verbally providing parents with daily information on their child's experiences in the pre-school. Information to parents was provided at collection and drop off times, via text

messages, email, multimedia application and by phone calls. Examples of daily activities and observations were furnished to the inspectors.

- Each child had a learning journal identifying their likes, preferences and showing their art and craft work.

(3)

- It was observed on day 1 in the Bluebells playroom that a minor behavioural issue between two children over a toy was managed in a positive way by the adult who assisted both children to find a solution to the problem that both children were happy with. This was in accordance with the service behaviour management policy.
- Staff when questioned in the Daisy room, Buttercups playroom and Bluebells playroom displayed an awareness and understanding of the service behaviour management policy and steps to take if a child or children displayed challenging behaviour. No issues were noted in these rooms on the days of inspection.

Non-Compliance Information

(3)

1. An immediate action notice was issued on day 1 of the inspection on the 25 February 2025 regarding an interaction observed between a staff member and a child in the Sunflower playroom. The child appeared to be upset following this interaction. This was at variance to the service behaviour management policy and reported immediately to management in the service by the inspector.

A response was received to the immediate action notice on the afternoon of the 25/05/2025 in which actions taken by the registered provider were detailed. These included planned additional mandatory training for all staff to include strategies for behaviour management, child protection, safeguarding and reporting procedures. These actions addressed the immediate risk identified.

2. Behaviour management strategies on day 1, in the Sunflower and Daffodil playrooms, were observed not to be carried out in line with the behaviour management policy and training which had taken place for all staff in the service on 18 February 2025.
- On day 1 at 15:40 in the Daffodil playroom, where there were 17 children aged 2 to 2 years and 6 months old. One child was observed climbing and jumping off two child sized tables and the back of soft seating in the quiet area. This was brought this to the attention of two of three adults who were present in the playroom. Although one staff member temporarily assisted the child from the area there were no actions observed by

the staff member, or paperwork available, which indicated that staff enacted the behaviour management policy. In conversation, the staff member did not make any reference to the behaviour policy being in use.

(1)(a)

Basic Needs

Children were not afforded adequate rest on day 1 in the Daisy playroom. Six children aged 2 to 3 years were put down to sleep on beds from 13.20hrs. These children's sleep was disrupted at 13.55hrs when it was observed that 6 children and an adult who were returning from the outdoor play area walked in and woke the sleeping children. This posed a potential impact that the children need for sleep was not being met.

Corrective & Preventive Action submitted by the Registered Provider

The registered provider stated in their response:

Corrective and Preventive Action

(3)

1. At the Regulatory Compliance Meeting 06/03/2025 the registered provider stated that all staff have received training in behaviour management and child protection. Management had commenced staff supervision and mentoring in playrooms. Management was mirroring good practice and supporting staff as required. Management had completed designated liaison training which outlines roles and responsibilities regarding child protection.
2. Staff have received training in behaviour management and management are now mentoring all staff in this regard.

(1)

- (a) The sleep practices in the Daisy playroom have changed to ensure that children are not disturbed during sleep.

Supporting documentation submitted

(3)

1. and 2. Copies of policies including behaviour management, child protection, designated liaison training and supervision were submitted to the office of the inspectorate.

(1)

- (a) The statement from the area manager has been accepted.

Summary Comment

On review of the documentation submitted the early years inspectors have deemed that the evidence has met the requirements of Regulation 19 (3) and (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.

Compliance Information

General Safety:

- The service was secured upon arrival; a fob system was in place for adults working in the service. In addition, a buzzer operated camera system was in place at the entrance door to monitor the safe entry and exit of the children and to prevent unauthorised adults from entering.
- The outdoor areas were secured with high concrete walls and fencing to protect the children within.
- Cleaning agents were secured out of reach of the children.

Infection Control:

- The sanitary facilities were equipped with thermostatically controlled hot water recorded at 38.3 °C, liquid soap, hand paper towels and lidded, lined pedal operated bins for the disposal of paper waste.
- Child friendly handwashing posters were located above the wash handbasins to promote good handwashing practices.
- The prepared infant formula was stored correctly in a fridge in the playroom.
- The soothers were stored in individually labelled containers when not in use and a sterilising unit was available for use.
- Individually labelled containers were available for storing bedlinen and personal clothing.

Administration of Medication:

- No medication was administered on the days of inspection.

Safe Sleep:

- The designated sleep room had 14 standard cots available for children under 2 years of age. In addition, there were two stackable beds available for children over two years of age.
There were also 32 stackable beds available for children over 2 years of age who required to rest or sleep.
- The designated sleep room for children over 12 months was maintained between 18-22°C in the sleep room on both days of inspection. A thermometer was available for adults to measure and monitor the room temperatures.

Fire Safety:

- The fire exit doors and passageways were clear from obstruction.
- The fire exit routes and fire assembly points were readily identified with clear and illuminated signage.

Outing:

- The service did not conduct outings.

Non-Compliance Information

General Safety:

On day 1 in the Buttercups playroom there were six highchairs with lose harnesses, three of which were in use and couldn't be tightened. This may pose as a safety risk for a preschool child. It was acknowledged that one harness was repaired on day 2.

Infection Control:

The following non compliances may pose as a risk of cross infection for a preschool child.

1. On day 1, at variance with the service nappy changing policy, an adult was observed not washing their own hands or the child's hands before and after nappy changing. This was observed in the nappy changing room opposite the Buttercups playroom.
2. On day 1, a child's foam training seat, used to facilitate toilet training, was observed on the floor of the Daffodil sanitary area. It was observed that the child's training seat was appropriately stored on day 2.
3. On day 1, in the Buttercups playroom, it was observed at 12:55, that children were sitting on the floor where food remained from lunch which had been served between 12:00 to 12:15. It is acknowledged that on day 2 a staff member was observed removing food that fallen directly after lunch.
4. On day 1 in the Daffodil sanitary area there was a broken lid of a pedal bin with used paper towels overflowing in the sanitary area. It was acknowledged that a new pedal operated bin was in use on day 2.

Safe Sleep

5. Children sleeping in cots in the designated sleep room on day 1 of the inspection were not adequately supervised every 10 minutes as per the service's safe sleep policy. Two children's sleep records documented gaps of up to 18 minutes between each check, posing a safety risk to the children. This was noted as a non-compliance on two previous inspections, 23rd of April 2024 and the 16th of October 2024.

Action submitted by the Registered Provider

The registered provider stated in their response:

Corrective & Preventive Action

General Safety:

(1) All harnesses have now been checked and replaced as needed. Managers are required to check highchair straps as part of the daily risk assessment and report or repair as required.

Infection Control:

- (2) One to one nappy changing checks and demonstrations have taken place between staff and management to prevent any risk of cross infection.
- (3) Staff have been ensuring that the foam toilet training seat remains stored appropriately at all times.
- (4) On day 2 of inspection the inspector observed a staff member sweeping the floor directly after lunch. Staff have been informed on the importance of infection control and cleaning procedures in the creche.
- (5) The broken pedal bin was replaced in the Daffodil sanitary area.

Safe Sleep

(6) Management have implemented a new procedure; one staff member is physically in the sleep room when there are more than five children sleeping to ensure that physical sleep checks are carried out every 10 minutes in line with the service's safe sleep policy. Staff have been informed on the importance of safe sleep and maintaining 10 minute physical sleep checks.

The following documentation and photographic evidence was received in the office of the inspectorate:

Supporting documentation submitted

General Safety:

(1) A photograph of the highchairs with replaced straps in the Buttercups playroom.

Infection Control:

- (2) Records of nappy changing checks.
- (3) Daily risk assessments for the sanitary area in the changing room opposite the Buttercups playroom.
- (4) Risk checklist for cleaning of the room carried out daily.
- (5) The inspectors observed the new pedal bin in the sanitary area of Daffodil playroom on day 2 of inspection.

Safe Sleep

(6) Ten-minute sleep check sample.

Summary Comment

On review of the evidence submitted the early years inspectors have deemed that the requirements of Regulation 23 have been met.

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.*
- (2) The record referred to in paragraph (1) shall be open to inspection by-*
- (c) an authorised person.*
- (4) A notice of the procedures to be followed in the event of fire shall be displayed in a conspicuous position in the premises.*

Compliance Information

- (1)(a) A record in writing of fire drills indicated that the last fire drill was conducted on the 10 February 2025.
- (b) A record of the number, type and maintenance record of firefighting equipment was maintained. It was recorded that firefighting equipment was checked annually. Records confirmed that the firefighting equipment was serviced on the 15th of August 2024 and the fire detection and smoke alarms were maintained annually, the last date of maintenance was on the 03rd of July 2024.
- (2)(c) The fire records required in paragraph (1) were available for review in the service.
- (4) The fire evacuation procedure for the service which contained details in relation to the procedure to be conducted in the event of a fire was available on file and displayed in the service.

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)
- The outdoor play areas were observed to be poorly maintained- the artificial grass was covered with debris from overhanging trees and the toys and equipment were dirty and in need of cleaning. This was at variance with the risk assessments for the outdoor play area which stated “the playground should be assessed before use” there was no record of any risk assessments being carried out for the week beginning the 24th of February 2025.

Corrective & Preventive Action submitted by the Registered Provider

The registered provider stated in their response:

Corrective and Preventive Action

- The outdoor area was tidied and records have been maintained appropriately. Management have addressed the issue of incomplete risk assessments with staff in line with the service’s risk assessment policy.

Supporting documentation submitted

- A copy of an outdoor risk assessment completed on the 28th of February 2025 was received in the office of the inspectorate.

Summary Comment

On review of the documentation submitted the early years inspectors have deemed that the evidence submitted has met the requirements of Regulation 29 (d).

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.
- (3) A record in writing referred to in paragraph (2)(a) shall-
- (a) include the nature of the complaint and the manner in which the complaint was dealt with, and
 - (b) be open to inspection on the premises by an authorised person.
- (4) A registered provider shall ensure that a record in writing referred to in paragraph (2)(a) is retained for a period of 2 years from the date on which the complaint has been dealt with.

Compliance Information

- (1) A complaints policy was in place in the service and adequately outlined the following:
- (a) Details of the procedure to be followed by a person for the purposes of making a complaint in relation to the service.
 - (b) Details of how a complaint will be dealt with by the service.
 - (c) Details of the procedures in place outlining how the person who makes a complaint in relation to the service will be informed and how the complaint is managed.
- (2)
- (a) The area manager stated that the service had received a complaint on the 02nd of December 2024 that had been made directly to the service.
 - (b) The area manager detailed the procedures in place in the service for dealing with complaints, including maintaining a record in writing in line with the complaints policy. A record in writing was available in the service and the date of reply was noted to be well within the service's documented timeline.
- (3)
- (a) The area manager stated they were aware of the complaint policy to detail the nature of any complaint made and the way it will be managed.
 - (b) The documented evidence was open to review in the service by the inspectors.

(4)

The area manager in the service stated during discussions with the inspectors that all records relating to any child and family who have attended the service are retained for the required period of time, including any complaints made.