



**Compliance Guide
for
Approved
Providers**

**Early Childhood
Care and
Education
(ECCE)**

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An Roinn Leanaí, Comhionannais,
Míchumais, Lánpháirtíochta agus Óige
Department of Children, Equality,
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government supporting communities

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Acronyms used in this document:

AIM	Access and Inclusion Model
CCC	City/County Childcare Committee
CCSP	Community Childcare Subvention Plus
DCEDIY	Department of Children, Equality, Disability, Integration and Youth
ECCE	Early Childhood Care and Education
ELC	Early Learning and Care
EYPC	Early Years Provider Centre
NCS	National Childcare Scheme
SAC	School Age Childcare
VO	Visit Officer

1. Introduction

Pobal is contracted by the DCEDIY to conduct compliance inspections with participating childcare approved providers who operate one or more of the national childcare programmes. These national childcare programmes are:

- Early Childhood Care and Education (ECCE), including Access and Inclusion Model (AIM)
- National Childcare Scheme (NCS)
- Community Childcare Subvention Plus (CCSP) Saver Programme

Access to compliance inspection outcomes is available through the Hive.

A range of standardised compliance checks are carried out during the course of the compliance inspection to ensure that providers are complying with DCEDIY rules and conditions as outlined in the Programme Funding Agreements, the Programme Rules and guidance documents (and legislation under NCS). The purpose of the compliance inspection is to provide assurance to the DCEDIY and the Exchequer that the significant amount of funding distributed through the Early Learning and Care and School Age Childcare programmes is protected.

This document provides guidance and assistance to providers when preparing for an ECCE compliance inspection (there are separate Compliance Guides for providers for the CCSP Saver programme and the NCS programme). This document outlines the overall compliance process, which incorporates the reviews conducted for quality control purposes together with the possible compliance outcomes. It also outlines the rectification actions which may be required from providers during the follow up process and any possible sanctions process.

The **Compliance Checklist for ELC Approved Providers 2023-2024** (see **Appendix 1** and also available on the Hive) details the information/documents that will be requested during a compliance inspection. **Appendix 2, ECCE Post Inspection Rectification Actions 2023-2024** provides details of all non-compliance outcomes and the requirements on the provider to rectify the issue(s) identified, with the relevant timeframes outlined.

It is the responsibility of the provider to ensure compliance with their contractual requirements. It is important to note that failure to provide the necessary information and/or records on the day of the compliance inspection may result in the service being deemed non-compliant and in breach of contractual requirements under the DCEDIY Funding Agreements.

Therefore, it is recommended that providers prepare a compliance file containing the relevant documentation to accommodate a compliance inspection. The compliance file should be maintained and easily accessible on-site at all times (see Section 2. *Preparing for your Compliance Inspection* below).



This document includes references to certain clauses within the Funding Agreement, the Rules Documents and/or programme guides associated with some of the individual compliance checks, i.e. identifying the rule(s) it stems from. It should be noted however that this document cannot be considered an exhaustive list of every check that could be conducted as it does not cover every funding agreement clause and/or rule. Similarly, by exception, an inspection may not cover all checks listed.

DCEDIY programme requirements and the compliance checks do not remain static and there can be changes from time to time. It is essential that providers familiarise themselves with the most up to date programme information including:

- Funding Agreements
- DCEDIY Rules for the ECCE Programme
- AIM Rules

The Rules documents are available on the Hive. Any changes/amendments to these will be communicated through the Hive. There is also supplementary information available within the Resources section on the Hive and Pobal/DCEDIY websites including the Pobal programme guides and FAQ's.

1.1 How to Use this Document

	<p>This icon indicates a reference to the Funding Agreement, DCEDIY Rules for Childcare Programmes, programme Guides or other resources which can be referenced for more detailed information and/or guidance.</p>
	<p>You will see this icon throughout the document to indicate important or helpful information which you may need to consider further.</p>

2. Preparing for Your Compliance Inspection


Advance preparation is key to a successful compliance inspection. To help you plan and prepare for your compliance inspection it is recommended that you prepare a compliance file with all the requisite documentation and ensure it is maintained and easily accessible on-site at all times. There is an individual compliance checklist available for each DCEDIY funded programme which is updated each programme cycle. The ECCE checklist is included in **Appendix 1** and is also accessible on the Hive –*Compliance Checklist for ELC Approved Providers 2023-2024*. It may be useful to place a copy of the individual checklists for each of the programmes you are participating in at the front of your compliance file.

It is important that the key documentation is kept up to date and readily available to facilitate the compliance inspection and to reduce the duration of the inspections. It might be useful to consider the following questions on a regular basis:

- Do you have all the necessary documentation in your compliance file?
- Do you have adequate children's attendance records on-site which record actual arrival and departure times, completed by staff in each room/session and which facilitate the review of patterns of attendance?
- Are your Hive registrations up to date and reflective of attendance levels throughout the cycle?

- Is there a designated staff member on-site at all times who can facilitate a compliance inspection and has access to the relevant documentation?

It is acknowledged that all providers do not use the same method to maintain their records. However, the method used must meet programme requirements and enable the Visit Officer (VO) to complete the compliance inspection within a reasonable timescale.

	<ul style="list-style-type: none"> • Become familiar with the programme information, including the Funding Agreements, DCEDIY Rules for Programmes, programme Guides and the Compliance Checklists for Approved Providers. • Collate all documents required from the checklist and build a compliance file of documents so that records are maintained and readily available at all times. • Set aside time regularly to review and amend the Hive registrations so that they are accurate and reflect the level of attendance.
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3. The Compliance Inspection – Overview

Further detailed information on the types of compliance checks undertaken during an inspection is provided in section 4 of this guidance document.


3.1 Duration of Compliance Inspections

A VO may arrive at a facility at any time during operational hours, as indicated by programme calendars on the Hive. A compliance inspection may be conducted on one or more programmes being operated and the duration of an inspection will vary depending on several factors:

- Number of programmes operating
- Number of children registered on the programme(s)
- Availability of records/ timely presentation of records
- Format of attendance records
- The timing of the inspection, i.e., point in time in the cycle
- The number of any incorrect registrations identified

Inspections are conducted within operational hours and the VO will not request staff to be available outside of these hours. On occasion an inspection may not be completed within the first day and the VO may be required to return on subsequent day(s).

3.2 Compliance Inspections

	<ul style="list-style-type: none"> • Please note all Pobal VOs are Garda vetted and hold official Pobal photographic ID. • A VO has a specific role within a facility i.e., checking adherence to programme rules and cannot be alone in the presence of children at any time during the inspection.
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On arrival, after initial introductions and briefing, the VO will request access to ECCE rooms and make enquiries as to the number of ECCE sessions in operation, staff cohort and the numbers of ECCE & non-ECCE children enrolled in each session.

The VO will also request access to attendance records and documentation detailed on the Compliance Checklist for ELC Approved Providers. The VO will inspect records from the start of the current programme cycle.

The VO will endeavour to keep disruption to a minimum in so far as possible, however, a designated staff member will be required to facilitate the inspection. Advance preparation for the inspection will assist in reducing the time required of the designated staff member. If all the requisite documentation is readily available in the compliance file, and in a suitable format, the designated staff member may not be required to remain with the VO for the full duration of the inspection (Note: If records are difficult to follow, then more interaction is required).

The VO may require clarifications during the course of the inspection and will require a member of staff to be available upon conclusion of the inspection to discuss the preliminary findings.

A record of the compliance inspection is completed by the VO on a computer tablet and a separate compliance form is completed for each programme inspected. The compliance reports are issued for each programme separately on the Hive.

On completion of the inspection, the VO will go through the preliminary findings with the staff member facilitating the inspection, highlight any compliance issues identified, and request that the staff member review the information recorded on the form. The staff member will then be requested to provide an electronic signature confirming/declaring that all documentation and explanations provided to the VO and recorded on the form are true and correct.

All inspection findings are subject to a further review for quality control purposes by a Compliance (Quality Assurance) Reviewer. This is an additional measure in the interest of ensuring consistency and accuracy across all compliance inspections/outcomes nationwide. This can on occasion result in amendments to the preliminary findings. Non-compliant issues identified on-site may be deemed to be compliant or additional non-compliances may be identified.

VOs reserve the right to take copies of any records, books or other documents or extracts therefrom, in support of non-compliances that they find during the course of their inspection.

Please note that a provider may receive more than one inspection during a cycle.

3.3 Compliance Outcomes

As the compliance inspection is conducted on-site, the outcomes are based on the documentation/information made available for review on the day of the inspection. With the exception in certain circumstances of staff qualifications, information submitted to Pobal post inspection cannot be considered in determining the final outcome.

Once the quality assurance review is completed, the provider receives a notification to the PAU on the Hive informing them that the Compliance Report is now available.

The compliance outcomes in relation to ECCE are as follows:

- Compliant
- Minor non-compliant
- Moderate non-compliant
- Major non-compliant

If there are non-compliant issues identified, the overall compliance outcome for ECCE will reflect the highest non-compliant categorisation. The Compliance Report includes an 'Outcome Summary' which details the overall outcome per inspection category. The Compliance Report also includes any non-compliant outcome reasons and where relevant, the 'Action Required' to address the non-compliant issues identified.

The provider is required to submit a self-declaration to confirm that appropriate actions will be taken to address the non-compliant issues identified. In some cases, the rectification action will also require submission of evidence that the action has been taken. It is required that rectification actions are undertaken by services by the Rectification Due date as outlined in the Compliance Report.


The table below provides a summary of the compliance outcome categorisations and examples of the main reasons for a given outcome. More detailed information on ECCE compliance categorisations is available in **Appendix 2, ECCE Post Inspection Rectification Actions 2023 - 2024**

Table 1: Summary of Compliance Categorisations:

Outcome	Reasons
Major non-compliant	<ul style="list-style-type: none"> • Failure to facilitate an inspection • Records not available for review • Incorrect Hive registrations* • Inadequate attendance records* • Parent charged for core ECCE hours • ECCE calendar requirements not met* • AIM Level 1 requirements not met
Outcome	Reasons
Moderate non-compliant	<ul style="list-style-type: none"> • Moderate instances of * above • Signed Applicant Declaration Form not on-site* • Signed Parent Statement not on-site * • Fee Table requirements not met • Staff qualification requirements not met* • Inadequate Fee Records* • Fees/Subvention issues • ECCE room not meeting minimum staff ratio requirements
Outcome	Reasons


Minor non-compliant	<ul style="list-style-type: none"> • Minor instances of * above • Document display issues (Calendar and Fee Table) • ECCE Minimum enrolment requirements not met
Outcome	Reasons
Compliant	<ul style="list-style-type: none"> • No compliance issues identified (based on sample records checked)

3.4 Compliance Outcomes – Request for review

	<ul style="list-style-type: none"> • The local City/County Childcare Committee (CCC) are available to provide on-going support with all DCEDIY Childcare Funding programmes. • To support providers, there is a Guide available on the Hive portal called 'Accessing the ECCE / CCSP Compliance Report on Hive' with step-by-step guidance on how to access, open, review and take action on the compliance report received. • Providers can submit a query in relation to the Compliance process by raising a request on the Hive portal (Hive → Requests → select 'Compliance' as request type) • Providers can also contact the Early Years Provider Centre (EYPC) by phone 01 5117 222 or eypc@pobal.ie
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If a provider believes an outcome is incorrect, a request for a review of the outcome can be made by raising a request on the Hive. The review of the outcome will be undertaken by the Compliance Team or the Early Years Team depending on the circumstance of the request and a response issued through the Hive to the provider explaining the rationale for the outcome. All requests for review should be made within 30 calendar days from the date the Compliance Report is issued.

3.5 Rectification Actions

	<p>ECCE Funding Agreement: Clause 9.3 (v): Term and Termination</p>
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Under the ECCE Funding Agreement, where a provider commits a breach of any term or condition of the Agreement, they are required to remedy any such breach (where such breach is capable of remedy).

Providers will be informed of all relevant rectification actions that they are required to take in relation to the specific non-compliances identified during the compliance inspection. This will be referred to as the 'Action Required' within the 'Non-Compliance Detail' section of a provider's Compliance Report. Providers are required to take this action by the 'Rectification Due' date outlined.

Providers will also receive automated weekly reminders via the Hive prompting them to review their Compliance Report if there are any relevant rectification actions which are outstanding.

There are two types of action that may be undertaken by the Compliance team following the compliance inspection:


- On-site revisit where an inspection is not facilitated and/or where attendance records were not available at initial inspection.
- Desk-based follow-up for all other relevant non-compliance rectification actions that the provider is required to complete on the Hive.

Each of the rectification actions submitted by the provider will be verified by the VO or the system. After this verification is completed a status update in relation to each non-compliance issue will be outlined on the compliance record as:

- Rectified
- Not Rectified
- N/A

3.6 Sanctions

'Failure to comply with any of these rules and/or terms of the ECCE Funding Agreement may result in a suspension of ECCE funding and/or DCEDIY funding or part thereof may be withdrawn and/or a termination of the ECCE Funding Agreement.'

	<p>ECCE Funding Agreement: Clause 3: Term and Conditions of Funding DCEDIY Rules for ECCE Programme: 2.1, 3.5.2, 9.1, 11.1</p>
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After the Compliance Report has been issued, the provider may be asked to take rectification action(s) within a specified timeframe i.e., by the Rectification Due date. Where a provider has failed to take the required rectification action(s) within the specified timeframe, a sanction may apply.

4. Compliance Checks

This section gives details of compliance checks and possible non-compliant outcomes as well as the most common reasons for these outcomes. Examples have been given as a guide but please note it is not an exhaustive list and there may be additional reasons for particular outcomes which are not documented below.



The following is not an exhaustive list of all possible outcomes and depending on circumstances during an inspection, additional checks may be required, and the outcomes / rationales may differ.

4.1 Pre-requisites

i. Programme Rules, Terms & Conditions:

'Approved providers must facilitate compliance visits which will be made without notice, to include access to the premises, personnel and relevant records.'



ECCE Funding Agreement:

Clause 8: *Right of Verification, Compliance Visits/Checks and Audits*

DCEDIY Rules for ECCE Programme:

9.3.1

All compliance inspections will only be undertaken during dates and operational hours when the service calendar submitted on the Hive indicates that the facility is open. ECCE inspections may be undertaken following the end of an ECCE cycle if the service is open for other DCEDIY funded programmes. It is important that all ECCE documentation is kept on-site and available for review to cover the above eventuality.

ii. Compliance Check/s:

The VO will request access to a provider's facility to conduct a compliance inspection. If a VO is unable to gain access to the facility this could result in a non-compliant outcome for that inspection¹. It is requested that the provider give details of the reason that the inspection is not being facilitated, which will be recorded on the compliance form. The designated staff member will be requested to provide a signature confirming the information recorded.



- **Pobal compliance inspections are unannounced.** No notification will be made of the Pobal VO arriving at the facility to conduct the on-site compliance checks.
- In the absence of a manager/owner on-site, it is important there is a designated staff member on-site who has access to the compliance file and responsibility for liaising with the Pobal VO.

¹ If a service is operating but no one is on-site for good reason, e.g., outings this will not be deemed a compliance issue. Evidence of communication in relation to these events may be required at a later date to confirm the reason why no children or staff were on-site.

iii. Possible Non-Compliant Outcomes:

Inspection Category	Compliance outcome	Compliance categorisation	Reason for outcome
Pre-requisites	Approved Provider did not facilitate the inspection – 1 st occurrence	Major non-Compliant	Inspection could not proceed as admittance to facility was not facilitated.
Pre-requisites	Approved Provider did not facilitate the inspection – 2nd occurrence	Major non-Compliant	Inspection could not proceed as admittance to facility was not facilitated at the revisit.

iv. Rectification Action

The provider must grant the VO access to the facility and to the relevant records pertaining to the programme(s) under review. A revisit may occur if the initial inspection is not facilitated.

Failure to facilitate the VO and make records available for inspection on the second occurrence may result in the application of a sanction.

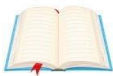
4.2 Service Reference Number & Tusla registration

i. Programme Rules, Terms & Conditions:

‘An approved provider must be registered with Tusla to receive funding from DCEDIY. Tusla registered services who provide both an ELC and an SAC service must be registered with Tusla for both services. All facilities/locations operated by an approved provider must be registered with Tusla, have an individual Service Reference Number and children must attend the facility/location in which they are registered. Proof of Tusla registration must be available on the premises for inspection if required.’

‘Approved providers must be registered with Tusla for the places being provided, e.g. approved providers cannot be funded for part-time places when registered with Tusla as a sessional service.’

‘The approved provider must be registered with Tusla under Part VIIA of the Child Care Act 1991 as a prescribed Early Years Service. An approved provider who provides both Early Learning and Care and School Age Childcare must have a valid Tusla registration for both service types.’

	<p>ECCE Funding Agreement: Clause 4.3 <i>Undertakings and warranties</i></p> <p>DCEDIY Rules for ECCE Programme: 2.2; 2.4</p>
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Each facility/location operated must obtain a separate Service Reference Number and be subject to the appropriate Tulsa inspection and Change of Circumstance requirements.

Providers must operate within the parameters of their Tulsa registration. Pabal will notify Tulsa where it cannot be determined if a provider is registered correctly with Tulsa.

4.3 Attendance Records


i. Programme Rules, Terms & Conditions:

*'Approved providers must keep an accurate record of each child's **actual attendance** to include daily arrival and departure times for each child. The approved providers' registrations on the EY HIVE must match actual attendance as recorded in the attendance records (actual child attendance and not opening times of session/service).'*

'The arrival and departure of each child must be recorded in real time by the approved provider. Attendance records must be kept in an appropriate manner that is sufficient to establish actual duration of attendance of each named child in terms of hours.'

'Failure to maintain attendance records may result in an assumption of zero hour's attendance. DCEDIY may withdraw future payments from the approved provider and/or require repayment of over-claimed monies already paid for the period concerned.'

'Failure to maintain sufficient attendance records may result in an assumption of minimal hour's attendance. E.g. where attendance records are kept, but in a format which does not allow a compliance visit officer to determine the hours which a child has attended, i.e. sessional/half sessional service, such as through the use of "ticks."'

	<p>ECCE Funding Agreement: Clause 7: Access, Reporting Requirements and Retention of Records</p> <p>DCEDIY Rules for ECCE Programme: 8.1, 8.2, 8.3</p> <p>Good Practice Guide – Attendance Records included in Rules document and available on the Hive</p>
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ii. Compliance Check/s:

Providers in receipt of DCEDIY childcare funding are required to keep appropriate records of attendance for all children and to make these records available for inspection. The VO will request the records that are maintained by staff members in each of the ECCE sessions and completed as children arrive and depart the facility. These records are considered the source record.

The source records must be retained for inspection. The source records are reviewed by the VO to establish that attendance records are adequate and to confirm that:

- Attendance records for all rooms are available on-site for inspection.
- Available attendance records are in an adequate format to allow compliance to be checked.
- Attendance records are free from any gaps/inadequacies (e.g., absences are recorded).

- Actual arrival and departure times are recorded by staff in each session.
- Hive registrations are correct in terms of days per week, session type attended
- ECCE Provision (e.g., service opening times/days/weeks) are in line with the calendar submitted on the Hive.
- ECCE staff to child ratio requirements are being met.
- ECCE minimum staff qualification requirements are met in each session.
- ECCE minimum enrolment requirements are met every day and in each session.

For periods where no attendance has been recorded, or records have not been made available for review, it may be deemed that the service was not operating for this period.

Details of the minimum requirements for attendance records are laid out in detail in the **ECCE Rules documents and Good Practice Guide – Attendance Records**.

iii. Possible non-compliant outcomes:

Inspection Category	Compliance outcome	Compliance categorisation	Reason for outcome
Attendance Records	Attendance Records do not exist	Major non-compliant	Attendance records have not been maintained for all or part of the cycle to date of inspection
Attendance Records	Attendance records for all rooms are not available on-site for inspection on day of initial inspection.	Major non-compliant	Attendance records are maintained, however, records for all rooms are not available/kept on-site for all or part of cycle
Attendance Records	Attendance records for all rooms are not available on-site for inspection on day of revisit	Major non-compliant	Attendance records are maintained, however, not available/kept on-site for all or part of cycle on the day of the revisit.
Attendance Records	Attendance records are not in an adequate format to allow compliance to be checked	Major non-compliant	Attendance records do not meet requirements as laid out by DCEDIY. Compliance with programme rules cannot be confirmed. Examples: <ul style="list-style-type: none"> • Records do not allow the VO to accurately track attendance of all registered children • Records do not allow the VO to review registrations in a timely manner • Attendance is recorded in advance

Attendance Records	Attendance records have gaps/inadequacies	Moderate non-compliant	Attendance records do not meet requirements as laid out by DCEDIY but do allow the VO to track attendance of all registered children. Examples: <ul style="list-style-type: none"> • Children’s times of arrival or departure are not recorded or are not recorded by staff in real time i.e., as child arrives and departs • Number of gaps during the programme cycle of times in/out but pattern of attendance could be established • Absences are not recorded
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iv. Rectification Action required:

Providers must ensure that attendance records are maintained and on-site from the start of the current cycle for all registrations. Where inadequacies have been identified these should be addressed immediately to ensure appropriate records are being maintained going forward.

The provider is required to complete a self-declaration to this effect by the Rectification Due date. In some instances, the provider will be required to submit evidence of attendance records.

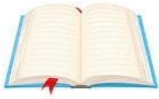
4.4 Registrations and Hive Updating Requirements

i. Programme Rules, Terms & Conditions:

‘Where attendance has been less than the registered hours in each of the previous 4 weeks, the approved provider must adjust the registration to reflect this, unless they apply to the Scheme Administrator for special circumstances, where they may be able to retain the registrations beyond 4 weeks.’

‘An update on the EY HIVE must occur immediately after the 4 weeks of the reduced attendance pattern commencing. Failure to update registrations to reflect the actual attendance pattern may result in an over-claim due to the Department. Over-claims will be recouped in accordance with the terms of the ECCE Funding Agreement.’

‘Where a child has not attended the service for 4 consecutive weeks without a qualifying special circumstance as outlined in 7.3 below, the approved provider must enter the child as a “leaver” on the EY HIVE stating the date the child last attended the service.’



ECCE Funding Agreement:

7.1; 7.2; 7.6 Access, Reporting Requirements and Retention of Records

DCEDIY Rules for ECCE Programme:

7.1; 7.2; 7.3; 7.4; 7.5

ii. Compliance Check/s:

The VO will review the attendance records to evidence and confirm that each ECCE registered child is included on the attendance record. The VO will then review the attendance patterns for a sample of ECCE children chosen to confirm that each child has attended as registered. The source attendance record, (see 4.3 ii above) is the only record that is used to establish attendance. If a provider confirms a child has attended, but the child has not been recorded in the attendance record, this will be identified as a non-compliance.

Special circumstance² exemptions approved by Pobal prior to date of inspection will be taken into account when reviewing attendance patterns.

The VO will highlight to the staff member facilitating the inspection each incorrect registration identified within the sample of records reviewed, if any, with reference to the attendance records. The VO will record on the compliance form that the review has been completed and all of the incorrect registrations identified have been discussed with the staff member (note that this is subject to a second desk-based quality assurance review, post-inspection).

It is the responsibility of the provider to ensure that all relevant attendance records for each registered child are made available to the VO on the day of inspection for review. Where the attendance record for a registered child is not made available this may result in the registration being deemed incorrect and/or ineligible.

iii. Possible non-compliant outcomes:

Inspection Category	Compliance outcome	Compliance categorisation	Reason for outcome
Overclaims	Hive was not reflective of all absenteeism	Major/Moderate/Minor non-compliant determined by the percentage of incorrect registrations identified	Examples: <ul style="list-style-type: none"> Child has been absent for more than 4 consecutive weeks and a special circumstance exemption has not been approved
Overclaims	Hive was not reflective of all leavers	Major/Moderate/Minor non-compliant determined by the percentage of incorrect registrations identified	Leavers not updated on the Hive or incorrect leave date entered

² See ECCE Rules document 7.3 *Special Circumstances* for further details on criteria and how to apply.

Overclaims	Hive was not reflective of all under-attendance of 4 weeks or more	Major/Moderate/ Minor non-compliant determined by the percentage of incorrect registrations identified	Attendance differs from registration in a consistent pattern for a 4-week period or more and Hive has not been updated and/or a special circumstance exemption has not been approved Example: <ul style="list-style-type: none"> Child registered for 5 days but only attending 3 days
Overclaims	Hive was not reflective with regards to actual start dates of child/ren	Major/Moderate/ Minor non-compliant determined by the percentage of incorrect registrations identified	Registration start date incorrect
Overclaims	Not all registered Hive children have taken up their place in the Service	Major/Moderate/ Minor non-compliant determined by the percentage of incorrect registrations identified	Child registered but did not take up a place
Overclaims	Not all registered Hive children have been evidenced in the attendance records	Major/Moderate/ Minor non-compliant determined by the percentage of incorrect registrations identified	Child does not appear in the attendance record.
Overclaims	Hive Registrations were incorrect with regard to facility the child is attending	Major/Moderate/ Minor non-compliant determined by the percentage of incorrect registrations identified	A child is attending a different/sister DCEDIY registered facility to which they are registered.

iv. Rectification Action required:

Pobal will action a compliance correction in relation to all identified overclaims. The adjustments to the Allocations i.e., the Allocation Value (the financial impact) will be outlined on the 'Compliance Correction' section of the Compliance Report.

Going forward, the provider will be required to ensure that all registrations on the Hive are kept up to date in line with the rules of the programme and are based on actual attendance as per the attendance records maintained and are reflective of:

- absenteeism and/or leavers

- under-attendance
- correct start dates
- correct facility to which the child is attending
- children who have taken up their place with the provider

The provider is also required to complete a self-declaration to this effect by the Rectification Due date.

4.5 Documentation

4.5.1 Documentation Display Requirements – Fee Table and Calendars

i. Programme Rules, Terms & Conditions:

‘A copy of the up-to-date fees list, together with copies of any standard documentation (including Parent Statement) that relate to DCEDIY funded programmes issued to parents/guardians, must be displayed at all times in an area of the service accessible and visible to parents/guardians, as well as being clearly displayed on any online platform maintained by the approved provider which is for the purpose of advertising its services.’

‘An up-to-date copy of the service calendar, together with copies of any standard correspondence that relate to DCEDIY childcare funded programmes issued to parents/guardians, must be published in an area of the service accessible and visible to parents/guardians. An up-to-date service calendar must also be published on any online platform maintained by the approved provider for the purpose of advertising its services.’

	<p>ECCE Funding Agreement: Appendix 1, <i>General Terms & Conditions</i>, Point 9,11</p> <p>DCEDIY Rules for ECCE Programme: 3.10; 4.3</p>
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ii. Compliance Check/s:

The VO will confirm if all the required documentation for the ECCE programme is on display and accessible to parent/guardians.

Where the most up-to-date version of both the submitted Hive Fee Table and calendar are on display and on any online platform used for advertising purposes, this is deemed sufficient for compliance.

Where required information is not on display this may result in a minor non-compliant outcome.

iii. Possible Non-Compliant Outcomes:

Inspection Category	Compliance outcome	Compliance categorisation	Reason for outcome ³
Fee Table	The Approved Provider is not displaying the most up to date Fee Table, as per the Hive, within the Service in an area accessible to parents	Minor non-compliant	<ul style="list-style-type: none"> • Fee Table is not on display within the service in an area accessible to parents at date of inspection. • Fee Table has been updated on the Hive and documents on display are not the most up to date version.
Fee Table	The Approved Provider has not published its most up to date Fee Table, as per the Hive, on all its online platforms	Minor non-compliant	<ul style="list-style-type: none"> • Fee Table is not published on all online platforms maintained for advertising purposes at date of inspection. • Fee Table has been updated on the Hive and documents published are not the most up to date version
Service Calendar	The Approved Provider is not displaying the most up to date Calendar, as per the Hive, within the Service in an area accessible to parents	Minor non-compliant	<ul style="list-style-type: none"> • Service Calendar is not on display within the service in an area accessible to parents at date of inspection • Service Calendar has been updated on the Hive and documents on display are not the most up to date version
Service Calendar	The Approved Provider has not published its most up to date Calendar, as per the Hive, on its online platforms.	Minor non-compliant	<ul style="list-style-type: none"> • Service Calendar is not published on all online platforms maintained for advertising purposes at date of inspection. • Service Calendar has been updated on the Hive and documents published are not the most up to date version

iv. Rectification Action Required:

The provider is required to ensure that all required programme documentation is on display within the service in an area accessible to parents and published on all online platforms maintained by the provider for advertising purposes from the date of inspection. This includes where the Fee Table and/or calendar is updated during the programme cycle.

³ The outcome reasons in this table are applicable when there are children currently registered on ECCE as at date of the compliance inspection.

The provider is required to submit photographic evidence to this effect and complete a self-declaration by the Rectification Due date.

4.5.2 Parent Statement

i. Programme Rules, Terms & Conditions:

*'Parents/Guardians **must** sign and date, where applicable, the Parent Statement, to indicate that they understand the charges that the approved provider will apply.'*

	<p>ECCE Funding Agreement: Appendix 1, <i>General Terms & Conditions</i>, Point 20</p> <p>DCEDIY Rules for ECCE Programme: 3.8; 3.11</p>
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Providers must have a signed and dated parent statement on file within the facility for each family with a child registered on the ECCE programme. The parent statement must be signed by the parent/guardian and the provider.

Note: One parent statement per family covers all children registered on any DCEDIY programme.

ii. Compliance Check/s:

The VO will check that there is a signed (by both parties) and dated parent statement on file in the facility for a sample of currently registered children under ECCE, from the start of the current cycle.

iii. Possible non-compliant outcome:

Inspection Category	Compliance outcome	Compliance categorisation	Reason for outcome
Parent Statements	Signed Parent Statement not on file for all currently registered children selected for inspection	Moderate/Minor non-compliant determined by the percentage of Parent Statements not signed/not on file.	Parent Statements for sample of registrations not on file, or not fully signed, or not made available for review at time of inspection

iv. Rectification Action required:

The provider is required to ensure that parent statements for the families of all currently registered children availing of the ECCE programme are signed by both parties and dated and retain these on file for compliance purposes.


The provider is required to complete a self-declaration to this effect by the Rectification Due date.

4.5.3 Applicant Declaration Form

i. Programme Rules, Terms & Conditions:

'Approved providers must ensure that parents/guardians sign and date an ECCE Applicant Declaration Form to indicate that they understand the terms of the programme, that all of the child registration details are accurate and they agree to the fee payable to the service is applicable.'

'Approved providers must keep copies of the Parent Statement and the Applicant Declaration Forms for compliance purposes on site, in order to be available for inspection.'

	<p>ECCE Funding Agreement: Access, Reporting Requirements and Retention of Records 7.7 Appendix 1 point 20.</p> <p>DCEDIY Rules for ECCE Programme: 3.8, 3.9, 3.11, 6.2</p>
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ii. Compliance Checks:

The VO will check that there is a signed (by both parties) and dated Applicant Declaration Form on file in the facility for a sample of currently registered children under ECCE. The VO will check that the Applicant Declaration is up-to-date to reflect the current registration level and correct ECCE fee for the child (if any).

iii. Possible non-compliant outcome:

Inspection Category	Compliance outcome	Compliance categorisation	Reason for outcome
Applicant Declaration	An up-to-date signed Applicant Declaration Form not on file for all currently registered children selected for inspection	Moderate/Minor non-compliant determined by the percentage of up-to-date Applicant Declaration Forms not signed/not on file.	Up-to-date Applicant Declaration Forms for sample of registrations not on file, or not fully signed, or not made available for review at time of inspection

iv. Rectification Action required:

The provider is required to ensure that Applicant Declaration Forms for all currently registered children availing of the ECCE programme reflect current registration level, current ECCE fee (if any), are signed by both parties, dated and retained on file for compliance purposes.

The provider is required to complete a self-declaration to this effect by the Rectification Due date.

4.6 Fee Tables and Calendars


4.6.1 Fee Table

i. Programme Rules, Terms & Conditions:

'Approved providers must complete a fees list at the beginning of each programme year. An approved provider's fees list must show details of all the fees charged to parents/guardians, ECCE fees must be reflected on a weekly basis over the ECCE programme year, as well as

details of any additional childcare hours, optional extras (as approved by the local CCC), or any discounts applied by the approved provider.'

	<p>ECCE Funding Agreement: Appendix 1 <i>General Terms & Conditions</i> Points 10, 11, 12, 14, 16</p> <p>DCEDIY Rules for ECCE Programme: Chapter 3</p>
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	<p>The accuracy of a services Fee Table may also be checked by CCCs and Early Years throughout the programme cycle</p>
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Providers must complete a Fee Table when on-boarding. This must show details of all fees charged to parents, and include details of any additional charges, discounts, optional extras etc. applied by the provider. Please note, the fees outlined on the Fees Table must be weekly.

ii. Compliance Check/s:

For the purpose of the compliance inspection, the VO will check that the current Fee Table on the Hive:

- Is completed correctly according to the programme guides,
- Reflects actual fees charged in the service, and
- Includes all required information.

Please note that partner services must comply with Core Funding requirements regarding any changes in fees.

iii. Possible non-compliant outcomes:

Inspection Category	Compliance outcome	Compliance categorisation	Reason for outcome
Fee Table	The Fee Table on the Hive does not comply with programme requirements	Moderate non-compliant	<p>Fee Table does not comply with requirements laid out in rules or programme guides document and/or is incorrect or inaccurate.</p> <p>Examples (not exhaustive):</p> <ul style="list-style-type: none"> • Fee Table not completed correctly as per Rules documents and Programme guides • Optional extras not included or inadequate e.g., listed together with one cost • Discounts not included • All session types offered not included • Fees incorrect (e.g., weekly rate incorrectly calculated / full

			subvention not applied / fees have increased but Fee Table not updated) <ul style="list-style-type: none"> • Non-pro rata rates not included
Fees Charged	The Approved Provider is charging for inappropriate optional extras	Moderate non-compliant	Fees charged for optional extras that are not included in the DCEDIY ECCE Optional Extras Approved List

iv. Rectification Action required:

Providers must update the Hive Fee Table to resolve any issues identified during a compliance inspection and the revised Fee Table⁴ must be displayed in the facility as well as on any online platforms maintained by the provider for the purpose of advertising its services.

The provider is required to submit photographic evidence to this effect and complete a self-declaration by the Rectification Due date.


Any fee change should be reflected in the parent statement and shared with parents/guardians. Where appropriate, parents/guardians should be requested to sign an amended ECCE Applicant Declaration Form.

4.6.2 Calendars and Closures

i. Programme Rules, Terms & Conditions:

‘Approved providers must submit a service calendar to the EY HIVE prior to the signing of the Funding Agreement, but no later than 2 weeks before the opening of the 2023/2024 programme year. The calendar is subject to review by the Department/Scheme Administrator/CCC.’

‘The approved provider will distribute to parents/guardians a service calendar indicating the days the service is due to be closed over the ECCE programme year 2023/2024.’

	<p>ECCE Funding Agreement: Clause 5, Operation of the ECCE Programme. Appendix 1, 9 and 11</p> <p>DCEDIY Rules for ECCE Programme: Chapter 4</p>
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Providers are required to submit a service calendar on the Hive with details of all days/weeks that they intend to operate for the cycle.

ECCE providers are contractually required to operate 182 days over 38 weeks (with the exception of those operating a 41-week service).


⁴ The rules of the programme require any changes to Fee Table and Service Calendar to be approved by the local CCC

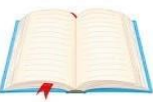
The service calendar must be updated with any changes to operating days including for unplanned closures during the programme cycle. Any changes to a service calendar must first be approved by the CCC⁴.

In certain limited circumstances where an unplanned closure has occurred a calendar may not require an update, subject to a force majeure approval. However, if force majeure is not approved the service calendar must be updated to reflect the closure.

ii. Compliance Check/s:

The VO will review the provider's attendance records to verify that records confirm calendar opening days.

	<ul style="list-style-type: none">• If force majeure has been approved (or applied for) the Visit Officer will review evidence of the approval and/or application on Hive.• Force majeure should be formally applied for no later than 5 days after the incident, even if the incident is ongoing.
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	<p>ECCE Funding Agreement: Clause 11 – Force Majeure</p> <p>DCEDIY Rules for ECCE Programme: Chapter 10</p>
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Where a provider has not been operating as per the calendar submitted on the Hive this will be found major non-compliant regarding Closures if the service is closed for 2 or more days across the programme cycle. Where an ECCE provider has not been operating as per calendar submitted but it is limited to one day, this will be found moderate non-compliant.

iii. Possible non-compliant outcomes

Inspection Category	Compliance outcome	Compliance categorisation	Reason for outcome
Closures	Calendar requirements have not been met: more than 1 day closure not reflected on calendar	Major non-compliant	ECCE – provider not operating 182 ⁵ days as required. Force majeure not approved/applied for.
Closures	Calendar requirements have not been met: 1 day closure not reflected on calendar	Moderate non-compliant	ECCE – provider not operating 182 ⁵ days as required. Force majeure not approved/applied for.

iv. Rectification Action required:

Provider must action a calendar correction/update in relation to any identified unreported closure day(s). This may require the provider to open for additional days during the ECCE cycle. If a provider is unable to open additional days this may result in a reduction of funding relevant to the closed days where the service is found non-compliant.

Going forward, the provider is required to ensure that the calendar on the Hive is up to date, reflects all closure days and is displayed in the service as well as on any online platforms maintained by the provider for the purpose of advertising its services.


The provider is required to complete a self-declaration to this effect by the Rectification Due date.

4.7 Fees

4.7.1 Fees Records

i. Programme Rules, Terms & Conditions:

'All documentation related to the financial affairs of the approved provider, accounts, fees records...must be on-site at all times. These records must be kept for a minimum period of 6 years from expiry of the ECCE Programme Funding Agreement.'

	<p>ECCE Saver Programme Funding Agreement: Clause 7.4 Access, Reporting Requirements and Retention of Records</p> <p>DCEDIY Rules for ECCE Programme: 9.3, 11.1</p>
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Providers in receipt of DCEDIY childcare funding are required to keep appropriate records of fees charged to parent/guardians and to make these records available for inspection.

⁵ With the exception of those operating a 41 week service.

ii. Compliance Check/s:

The VO will review the fee records to establish that they are maintained in a format which allows confirmation that the correct fee and capitation is being applied. It must be possible for the VO to confirm that the subsidy received has been passed on to individual families in full.

Fees records are not checked where no fees are charged e.g., ECCE 3 hour only service

iii. Possible non-compliant outcomes

Inspection Category	Compliance outcome	Compliance categorisation	Reason for outcome
Fees Records	Fee records are not available for inspection on-site	Moderate non-compliant	Fees records are not kept on-site or are not accessible on-site during the inspection.
Fees Records	Fee records are not adequate to allow compliance to be checked	Moderate non-compliant	Fees records are on-site but are not adequate to allow VO to confirm that correct subsidy is being applied in full.
Fees Records	Fee records have gaps/inadequacies	Minor non-compliant	Some fees records are on-site but not for some period of the cycle and /or not for all children and/or other gaps.

iv. Rectifications Action required:

Providers must ensure that adequate fee records for all registered children are kept on-site and made available for review in the event of a compliance inspection.

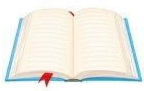
The provider is required to complete a self-declaration to this effect by the Rectification Due date.

4.7.2 Fees Charged

i. Programme Rules, Terms & Conditions:

'Where a child is attending a part-time or full-time service the approved provider must reduce the fees paid by the parent/guardian by a minimum of €64.50.'

'ECCE must be available free of charge to parents/guardians for 3 hours a day, 5 days per week for 182 days in return for the capitation, approved providers receive from the DCEDIY.'

	<p>ECCE Funding Agreement: Appendix 1.10</p> <p>DCEDIY Rules for ECCE Programme: 1.11, 3.2</p>
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As per the Fee Table submitted on the Hive, the fee charged to parent/guardians must include the appropriate reductions in childcare fees for qualifying parent/guardians. It is imperative that fees are not charged for the standard ECCE 3 hour period of service.

ii. Compliance Check/s:

The VO will review the fee records to ensure that the correct fee deductions are being applied to all registered children.

Where the fees charged to parent/guardians are not in line with the Fee Table, this may result in a non-compliant outcome.

iii. Possible non-compliant outcomes

Inspection Category	Compliance outcome	Compliance categorisation	Reason for outcome
Fees Charged	Parent is being charged for ECCE core hours	Major non-compliant	Examples: <ul style="list-style-type: none"> Parent is being charged for the ECCE core hours covered by the ECCE subsidy
Fees Charged	The Approved Provider is charging for inappropriate optional extras	Moderate non-compliant	Examples: <ul style="list-style-type: none"> Fees are charged for extras not included in the DCEDIY ECCE Optional Extras Approved List Fees charged for extras listed as optional but all parents requested to pay regardless of uptake
Fees Charged	The fee charged to parents/ guardians is not reflective of the full subsidy received	Moderate non-compliant	Examples: <ul style="list-style-type: none"> Fees charged in excess of listed fees Nominal fee charge where subsidy covers cost of place Fees increased by service, but Fee Table not updated

iv. Rectification Action required:

Providers must review fee records of all ECCE registered children and reimburse the parents/guardians of any ECCE registered children who were overcharged.

The provider is required to complete a self-declaration to this effect by the Rectification Due date.


5. Additional ECCE Rules

5.1 Qualifications

i. Programme Rules, Terms & Conditions:

'An approved provider must ensure all staff working with children hold, at a minimum, a Level 5 qualification that meets the requirements of the Child Care Act 1991 (Early Years Services) Regulations 2016.'

'Each ECCE room/session must have a Lead Educator during the entire session, holding a minimum of a Level 6 qualification which meets the ECCE Funding Agreement requirements for ECCE Lead Educator as set out on the published list of DCEDIY 'Early Years Recognised Qualifications' or, holds a Letter of Eligibility to Practice at this level issued by the DCEDIY'.

	<p>ECCE Funding Agreement: Undertakings and Warranties, 4.4 Appendix 1, <i>General Terms & Conditions</i>, Point 30</p> <p>DCEDIY Rules for ECCE Programme: 2.7; Chapter 5</p> <p>Child Care Act 1991 (Early Years Services) Regulations 2016</p>
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ii. Compliance Check/s:

The VO will check that all relevant staff qualifications are on-site and that all staff in the ECCE rooms/sessions hold an award included on the list of DCEDIY Early Years Recognised Qualifications, or a Letter of Eligibility to practice at the appropriate level issued to the staff member by the DCEDIY.

If the Lead Educator in an ECCE session does not hold Major Award L6 or the Educator does not hold a Major Award L5 or the qualifications have not been deemed eligible by DCEDIY, this may result in a moderate non-compliant outcome.

Pobal will notify Tusla where it cannot be determined if a staff member in an ECCE session meets the minimum Level 5 qualification requirements.

iii. Possible non-compliant outcomes:

Inspection Category	Compliance outcome	Compliance categorisation	Reason for outcome
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Qualifications	The Approved Provider is not meeting the staff qualification requirements for room Lead Educator/s, at inspection date	Moderate non-compliant	Examples: <ul style="list-style-type: none"> Lead Educator’s qualification is not on-site at time of inspection and not submitted to Pobal post inspection within the required timeframe⁶ Lead Educator does not hold an award L6. Lead Educator’s qualification is not included on DCEDIY Early Year’s Recognised Qualification list, and a Letter of Eligibility has not been evidenced.
Qualifications	The Approved Provider is not meeting the staff qualification requirements for room Educator/s, at inspection date	Moderate non-compliant	Examples: <ul style="list-style-type: none"> Educator’s qualification is not on-site at time of inspection and not submitted to Pobal post inspection within the required timeframe⁶ Educator does not hold an award L5 Educator’s qualification is not included on DCEDIY Early Years’ Recognised Qualification list, and a Letter of Eligibility has not been evidenced.
Qualifications	The relevant staff qualifications are not evidenced on-site and were not provided within required timelines	Minor non-compliant	Copies of qualification certificates and/or Letters of Eligibility to Practice of the ECCE staff members are not on-site and not submitted to Pobal post visit.

iv. Rectification Action required:

The provider must ensure that all ECCE staff hold appropriate qualifications or a Letter of Eligibility to Practice and that evidence is maintained on-site to allow compliance to be checked. Any qualifications not included in the DCEDIY Early Years Recognised Qualifications listing can be submitted to the DCEDIY for assessment.

The provider is required to complete a self-declaration to this effect by the Rectification Due date.

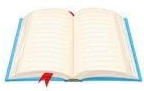
5.2 Minimum Enrolment

i. Programme Rules, Terms & Conditions:

‘1. An approved provider must have a minimum enrolment number of 8 ECCE eligible children per session.

⁶ If a qualification is not on-site at time of inspection it can be submitted to the Hive within 5 working days. If the qualification is not submitted it will be deemed that qualification requirements are not being met.

II. Exceptions to the minimum enrolment number may be granted in some circumstances. Applications must be submitted to the CCC for review and approval.'

	<p>ECCE Funding Agreement: Appendix 1 – General Terms and Conditions, Clause 28</p> <p>DCEDIY Rules for ECCE Programme: 1.6, 12.9</p>
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ii. Compliance Check/s:

The VO will ascertain from the number of ECCE registrations and the attendance records whether the required minimum of 8 ECCE-eligible children are enrolled each day per week in each ECCE session.

If the VO finds that there are fewer than 8 ECCE-eligible children enrolled per session/per day and no CCC exemption has been granted this may result in a minor non-compliant outcome.

iii. Possible non-compliant outcomes:

Inspection Category	Compliance outcome	Compliance categorisation	Reason for outcome
Minimum Enrolment	The Approved Provider is not meeting the minimum enrolment number of eight ECCE-eligible children per session	Minor non-compliant	Minimum enrolment requirement not met in each session operating on one or more days and provider has not applied for/obtained an exemption to requirement.

iv. Rectification Action required:


Where an exemption has not been applied for, the provider must do so by contacting their local City/County Childcare Committee. Where an exemption has been denied the provider should liaise with their local City/County Childcare Committee to ensure action is undertaken to meet minimum enrolment requirement. Please note application form for Minimum Enrolment is located on the Hive.

The provider is required to complete a self-declaration to this effect by the Rectification Due date.

5.3 Staff to Child Ratios

i. Programme Rules, Terms & Conditions:


'The staff-to-child ratio for an ECCE session is 1:11 (all children in the room must be aged between 2 years 6 months and 6 years old).'

	<p>DCEDIY Rules for ECCE Programme:</p> <p>1.5</p>
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ii. Compliance Check/s:

The VO will ascertain from the number of ECCE registrations, the attendance records and other information provided whether the staff to child ratio is met. The number of children in each session is established from the number enrolled and expected to attend each day and not the actual attendance per day.

Pobal will notify Tusla where it has been determined that the staff to child ratio requirement is not being met in any of the ECCE session(s).

	<p>Where a staff member is supported through AIM funding, they should not be included for the purpose of meeting staff: child ratios. See AIM funding rules.</p>
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iii. Possible non-compliant outcomes:

Inspection Category	Compliance outcome	Compliance categorisation	Reason for outcome
Adult to Child Ratio Requirements	There is not a sufficient number of staff in the ECCE session with the number of children enrolled to attend	Moderate non-compliant	Where the number of children enrolled is in excess of the staff: child ratio on any or all days.

iv. Rectification Action required:

The provider must ensure that there are sufficient number of staff in each ECCE session/room with the number of children enrolled to attend at all times.

The provider is required to complete a self-declaration to this effect by the Rectification Due date.


5.4 AIM Level 1 Inclusion Coordinator

i. Programme Rules, Terms & Conditions:

‘A pre-school service employing a LINC graduate can apply for additional capitation on the completion of a signed agreement by the LINC graduate that they will take on the role and responsibilities associated with the post of Inclusion Coordinator and submission of same by the preschool provider.’

‘A requirement of funding is that changes in the employment of the Inclusion Coordinator must be notified immediately to the Pobal AIM Team. The types of changes that require notification are:

- *Inclusion Coordinator ceases employment in the service*
- *Inclusion Coordinator changes their employment conditions, e.g. extended absence from work’*

	<p>Access and Inclusion Model (AIM) Rules 2022-2023: Chapter 4 ECCE Funding Agreement: Appendix 1, General Terms & Conditions Point 8, 22; Appendix 2</p>
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ii. Compliance Check/s:

The VO will check that:

- The approved Inclusion Coordinator is still employed with the facility.
- Changes of circumstances or extended absences have been notified to the AIM team on the Hive.
- Replacement Inclusion Coordinator has been updated on the AIM Level 1 application (if applicable).

iii. Possible non-compliant outcomes:

Inspection Category	Compliance outcome	Compliance categorisation	Reason for outcome
AIM Level 1	There is no qualified Inclusion Coordinator engaged at the service	Major non-compliant	Current Inclusion Coordinator approved on the Hive has ceased employment with the service or has been absent for more than four consecutive preschool weeks and Pobal AIM team has not been notified.
AIM Level 1	A replacement Inclusion Coordinator has been engaged but has not been added to the AIM Level 1 application	Major non-compliant	A replacement Inclusion Coordinator is working in the service; however, the AIM Level 1 Application has not been updated on the Hive.

iv. Rectification Action required:

Pobal will implement a correction to the AIM Level 1 application which may have a financial implication. Going forward, the provider is required to ensure that their AIM

Level 1 Application is up to date on the Hive to reflect Notifications of Change or Extended Absences.

The provider is required to complete a self-declaration to this effect by the Rectification Due date.

Appendix 1 - ECCE Compliance Checklist for ELC Approved Providers 2023 - 2024

Early Childhood Care and Education (ECCE) Compliance Inspections 2023/2024

*** NOTE TO PROVIDERS:** It is the responsibility of the approved provider to ensure compliance with their contractual requirements. This checklist is intended for information purposes only and is not exhaustive. It is essential that approved providers are familiar with the programme information including the Funding Agreements, Programme Guides and DCEDIY Rules documentation including AIM Rules available on the Hive and DCEDIY website. For further information please refer to the ECCE Compliance Guide for approved providers available on the Hive.

Please tick

The following points are a guide as to the types of information that Visit Officers seek to review during a Compliance Inspection.

Compliance File		
1	To minimise disruption to service operation, Pobal recommend that providers collate information for review on these inspections in a <u>Compliance Folder/File which is readily available and on-site at all times.</u> This Folder/File should not contain any information which is not relevant to the Compliance checks as outlined below. Attendance Records and Fee Records should also be easily accessible.	Yes <input type="checkbox"/>
Tusla Registration		
2	Is the most up to date Tusla Registration Certificate available for review?	Yes <input type="checkbox"/>
Attendance Records		
3	Are there attendance records on-site for each session? Attendance records must be maintained and readily accessible from the start of the programme year.	Yes <input type="checkbox"/>
4	Are the attendance records maintained and structured adequately? These are to be maintained by staff in each session, recording the children's times in and out as they arrive and depart as well as any non-attendance (e.g. absences). This will allow for easy and efficient monitoring of child attendance patterns in each session to assist identifying the Hive updating requirements. The same requirement applies if attendance records are maintained in electronic format/software package. The package should have the functionality to generate attendance reports by child and for each session.	Yes <input type="checkbox"/>

	Please see <i>Good Practice Guide – Attendance Records</i> in the programme rules documentation.	
Hive Registrations		
5	Are all ECCE registered children recorded in the attendance records?	Yes <input type="checkbox"/>
6	Did all ECCE children registered on the Hive take up their place?	Yes <input type="checkbox"/>
7	Are all ECCE Registrations on the Hive accurate and reflective of actual levels of attendance as per the attendance records i.e. correct start/end dates, correct number of days per week?	Yes <input type="checkbox"/>
8	Have ECCE Registrations been updated on the Hive to reflect any changes since initial registration i.e. absences, leavers, number of days per week?	Yes <input type="checkbox"/>
9	If you are operating more than one facility, are all ECCE registered children attending the correct facility?	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
10	Has approval for special circumstances been sought in relation to extended absences and/or under-attendances, in line with the Programme rules, where relevant?	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Parent Statements		
11	Is there a signed Parent Statement on file for the families of all registered children? Note: Parent Statements should be signed by both the approved provider and the parent/guardian.	Yes <input type="checkbox"/>
Hive Applicant Declaration Forms		
12	Are Applicant Declaration forms for all registrations (including amendments during the year) printed, completed and signed by both the approved provider and the parent/guardian and on file?	Yes <input type="checkbox"/>
13	In the interest of GDPR, has the provider disposed of, in an appropriate manner, all documentation that contains PPS Numbers?	Yes <input type="checkbox"/>
Hive Fee Table & Service Calendar		
14	Does the Hive Fee Table comply with programme requirements and accurately reflect actual fees charged for the types of provision that the service operates?	Yes <input type="checkbox"/>
15	Is the most up to date Hive Fee Table, and Service Calendar displayed in the service in a location easily accessible to all parents and published on any online platform(s) maintained by the provider for the purpose of advertising its services?	Yes <input type="checkbox"/>

16	<p>Does the Service Calendar on the Hive reflect all closure days including unplanned closure days, where force majeure is not approved?</p> <p>Note: Please ensure your Hive generated Service Calendar is in line with any future closure dates that occur throughout the year. In the event of closures for force majeure, please ensure completed force majeure applications are submitted on the Hive within 5 days.</p>	Yes <input type="checkbox"/>
Hive Fee Table & Service Calendar cont.		
17	<p>Tusla/HSE directed closures: If applicable, is evidence on-site of any Tusla/HSE directions to close as a result of a public health concern?</p>	Yes <input type="checkbox"/>
Fee Records		
18	<p>Are adequate fee records accessible for each child for the period under review, which will enable confirmation of the fees, including any optional extras, charged to parents/guardians? Fee Records maintained should clearly demonstrate the fees received from parents/guardians each week/month. If direct debit is applicable, access to records must be available on-site (this can be online access).</p>	Yes N/A <input type="checkbox"/> <input type="checkbox"/>
Staff Qualifications		
19	<p>Are the relevant staff qualifications* / DCEDIY Letters of Eligibility to Practice on file for all staff working in each ECCE session and/or room with ECCE children enrolled? Having these documents, which meet the relevant qualification requirements, available on-site will ensure a reduced level of non-compliance in relation to staff qualifications.</p> <p>Note: Qualifications are checked against the DCEDIY Early Years Recognised Qualifications list available on the DCEDIY website. Qualifications must be in English or Irish, any documents not originally in English or Irish must be accompanied with a translation to English or Irish. Certified translations only can be accepted.</p> <p>*Where a Qualification is not on the DCEDIY Early Years Recognised Qualifications list, the individual must apply to the DCEDIY for assessment. See https://www.gov.ie/en/service/000073 for more information.</p>	Yes <input type="checkbox"/>
20	<p>Do all ECCE Room Lead Educators hold at least a minimum QQI level 6 qualification?</p>	Yes <input type="checkbox"/>
21	<p>Do all ECCE Room Educators hold a minimum QQI level 5 qualification?</p>	Yes N/A <input type="checkbox"/> <input type="checkbox"/>
22	<p>Is there sufficient number of staff, excluding AIM staff, in the ECCE session with the number of children enrolled to attend?</p>	Yes <input type="checkbox"/>

Minimum Enrolment		
23	Has a Minimum Enrolment Exemption been applied for, through the relevant CCC, for each ECCE session and/or room which does not meet the requirement of 8 ECCE-eligible children enrolled on a daily basis? A copy of the approved exemption notification must be available for review during a compliance inspection (electronically or paper based).	Yes N/A <input type="checkbox"/> <input type="checkbox"/>
AIM Level 1 Inclusion Coordinator		
24	Have any changes of circumstances in the employment of the approved Inclusion Coordinator or extended absence of four or more consecutive preschool weeks been notified to the Pobal AIM team via the Hive?	Yes N/A <input type="checkbox"/> <input type="checkbox"/>
25	Where a replacement Inclusion Coordinator is engaged with the service, has the AIM Level 1 Application on the Hive been amended?	Yes N/A <input type="checkbox"/> <input type="checkbox"/>

Appendix 2 - ECCE Post Inspection Rectification Actions 2023 - 2024

Following an ECCE Compliance Inspection, approved providers will receive a notification, via the Hive, alerting them to the availability of the Compliance Report and outcomes. For each check conducted the Compliance report will outline the:

- Final compliance outcome (Compliant or Minor Non-Compliant/Moderate Non-Compliant/Major Non-Compliant)
- Reason for non-compliance outcome
- Required rectification action (if applicable); and
- Details of any comments and compliance corrections

For non-compliant outcomes, the provider will be required to take rectification action on the issue identified and make a commitment to comply with the ECCE requirements going forward. All rectification actions must be taken and reported on through the Hive within the required timeframe. This timeline will be outlined within the Compliance Report under the title 'Rectification Due' date. All rectification actions will then be verified by the Compliance team and each non-compliant outcome will be determined as 'Rectified' or 'Not Rectified'.

Where a provider fails to rectify a non-compliance outcome within the required timeframe, then a sanction may be imposed.

The table below outlines all possible non-compliant outcome reasons and the relevant rectification action which will be required of the provider to ensure no sanctions are imposed.

Non-Compliant Outcome Reasons	Non-compliant categorisation	Rectification Action for Provider
PRE-REQUISITES		
1.	Approved Provider did not facilitate the inspection – 1 st occurrence.	Major non-compliant <ul style="list-style-type: none"> • Facilitate future compliance inspections.
2.	Approved Provider did not facilitate the inspection – 2 nd occurrence.	Major non-compliant <ul style="list-style-type: none"> • No further Approved Provider action is possible as this constitutes a serious Compliance issue. A sanction may be applied. • Facilitate any future compliance inspections.

SERVICE CALENDAR

3.	Approved Provider is not displaying the most up-to-date Calendar, as per the Hive, within the service in an area accessible to parents	Minor non-compliant	<ul style="list-style-type: none"> • The Approved Provider shall display their up-to-date calendar, as per the Hive, in an area(s) accessible to parents. • The Approved Provider shall upload photographic evidence of the up-to-date calendar on display within the service, using the upload/create button. • In addition, the Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box. • Failure to complete this rectification action i.e., to upload the relevant evidence and to complete the self-declaration by the Rectification Due Date, may result in the application of a sanction.
4.	Approved Provider has not published its most up-to-date Calendar, as per the Hive, on its online platforms.	Minor non-compliant	<ul style="list-style-type: none"> • The Approved Provider shall publish their up-to-date calendar, as per the Hive, on all online platforms maintained by the provider for the purpose of advertising its services. • The Approved Provider shall upload photographic evidence (or screenshots) of the up-to-date calendar published on all relevant online platforms, using the upload/create button. • In addition, the Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box. • Failure to complete this rectification action i.e., to upload the relevant evidence and to complete the self-declaration by the Rectification Due Date, may result in the application of a sanction.

PARENTAL DOCUMENTS

5.	An up-to-date, signed Applicant Declaration Form not on file for all currently registered children selected for inspection.	Determined by the % of incorrect Applicant Declarations identified in the sample checked. Minor non-compliant ≥ 70% - ≤ 89%, Moderate non-compliant <70%	<ul style="list-style-type: none"> • The Approved Provider shall ensure Applicant Declarations for all currently registered children are up-to-date, signed by both parties and on file. • The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box. • Failure to complete this rectification action i.e., to complete the self-declaration by the Rectification Due Date, may result in the application of a sanction.
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6.	Signed Parent Statement not on file for all currently registered children selected for inspection.	Determined by the % of incorrect Parent Statements identified in the sample checked Minor non-compliant <95% - ≥90%, Moderate non-compliant <90%	<ul style="list-style-type: none"> • The Approved Provider shall ensure that Parent Statements for all currently registered children are signed by both parties, dated and on file. • The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box. • Failure to complete this rectification action i.e., to complete the self-declaration by the Rectification Due Date, may result in the application of a sanction.
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FEE TABLE

7.	The Approved Provider is not displaying the most up-to-date Fee Table, as per the Hive, within the service in an area accessible to parents.	Minor non-compliant	<ul style="list-style-type: none"> • The Approved Provider shall display their up-to-date Fee Table, as per the Hive, in an area(s) accessible to parents. • The Approved Provider shall upload photographic evidence of the up-to-date Fee Table on display within the service, using the upload/create button. • In addition, the Approved Provider shall complete a self-declaration by the Rectification Due Date, by selecting the tick box. • Failure to complete this rectification action i.e., to upload the relevant evidence and to complete the self-declaration by the Rectification Due Date, may result in the application of a sanction.
8.	The Approved Provider has not published its most up-to-date Fee Table, as per the Hive, on all its online platforms.	Minor non-compliant	<ul style="list-style-type: none"> • The Approved Provider shall publish their up-to-date Fee Table, as per the Hive, on all online platforms maintained by the provider for the purpose of advertising its services. • The Approved Provider shall upload photographic evidence (or screenshots) of the up-to-date Fee Table published on all relevant platforms, using the upload/create button. • In addition, the Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box. • Failure to complete this rectification action i.e., to upload the relevant evidence and to complete the self-declaration by the Rectification Due Date, may result in the application of a sanction.

9.	The Fee Table on the Hive does not comply with programme requirements.	Moderate non-compliant	<ul style="list-style-type: none"> • The Approved Provider shall ensure that their Fee Table on the Hive is up-to-date, complies with programme requirements and is displayed within the service and published online (if applicable). • The Approved Provider shall upload evidence using the upload/create button, of the up-to-date Fee Table on display within the service and online (if applicable). • In addition, the Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box. • Failure to complete this rectification action i.e., to upload the relevant evidence and to complete the self-declaration by the Rectification Due Date, may result in the application of a sanction. •
FEE RECORDS			
10.	Fee records are not available for inspection on site.	Moderate non-compliant	<ul style="list-style-type: none"> • The Approved Provider shall ensure that fee records for all registered children are available for review on-site. • The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box. • Failure to complete this rectification action i.e., to complete the self-declaration by the Rectification Due Date, may result in the application of a sanction.
11.	Fee records are not adequate to allow compliance to be checked.	Moderate non-compliant	<ul style="list-style-type: none"> • The Approved Provider shall ensure that fee records for all registered children are maintained in an adequate format to allow compliance to be checked. • The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box. • Failure to complete this rectification action i.e., to complete the self-declaration by the Rectification Due Date, may result in the application of a sanction.
12.	Fee records have gaps/inadequacies.	Minor non-compliant	<ul style="list-style-type: none"> • The Approved Provider shall ensure that fee records for all registered children are maintained in an adequate format to allow compliance to be checked. • The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box. • Failure to complete this rectification action i.e., to complete the self-declaration by the Rectification

			Due Date, may result in the application of a sanction.
FEES CHARGED			
13.	Parent is being charged for ECCE core hours.	Major non-compliant	<ul style="list-style-type: none"> The Approved Provider shall review fee records of all ECCE registered children and shall reimburse the parents/guardians of any ECCE registered children who were charged fees for ECCE core hours. The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box. Failure to complete this rectification action i.e., to complete the self-declaration by the Rectification Due Date, may result in the application of a sanction.
14.	The Approved Provider is charging for inappropriate optional extras.	Moderate non-compliant	<ul style="list-style-type: none"> The Approved Provider shall review fee records of all ECCE registered children and shall reimburse the parents/guardians of any ECCE registered children who were charged fees for inappropriate optional extras. The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box. Failure to complete this rectification action i.e., to complete the self-declaration by the Rectification Due Date, may result in the application of a sanction.
15.	The fee charged to parents/guardians is not reflective of the full subsidy received.	Moderate non-compliant	<ul style="list-style-type: none"> The Approved Provider shall review all fees charged to parents/ guardians of ECCE registered children to ensure they are reflective of the full subsidy received and to reimburse any parents/guardians that have been overcharged. The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box. Failure to complete this rectification action i.e., to complete the self-declaration by the Rectification Due Date, may result in the application of a sanction.
ATTENDANCE RECORDS			
16.	Attendance records for the period under review	Major non-compliant	<ul style="list-style-type: none"> The Approved Provider shall ensure that all attendance records for all session(s)/room(s) are

	do not exist – submit evidence		<p>maintained on-site, in the required format and be made available for inspection at all times.</p> <ul style="list-style-type: none"> • The Approved Provider shall upload evidence using the upload button, of attendance records of DCEDIY funded children currently being maintained (see Inspection Comments section for details of records to be submitted). • In addition, the Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box. • Failure to complete this rectification action i.e., to upload the relevant evidence and to complete the self-declaration by the Rectification Due Date, may result in the application of a sanction.
17.	Attendance records for the period under review do not exist – historical issue	Major non-compliant	<ul style="list-style-type: none"> • The Approved Provider shall ensure that all attendance records for all session(s)/room(s) are maintained on-site, in the required format and be made available for inspection at all times. • The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box. • Failure to complete this rectification action i.e., to complete the self-declaration by the Rectification Due Date, may result in the application of a sanction.
18.	Attendance records for all rooms are not available on-site for inspection on day of initial inspection.	Major non-compliant	<ul style="list-style-type: none"> • The Approved Provider shall ensure that all attendance records since the start of the Programme year, for all session(s)/room(s) are available on-site for inspection at all times.
19.	Attendance records for all rooms are not available on-site for inspection on day of revisit	Major non-compliant	<ul style="list-style-type: none"> • The Approved Provider shall ensure that all attendance records for all session(s)/room(s) are maintained on-site, in the required format and be made available for inspection at all times. • The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box. • Failure to complete this rectification action i.e., to complete the self-declaration by the Rectification Due Date, may result in the application of a sanction.
20.	Attendance records are not in an adequate format to allow compliance to be checked – submit evidence	Major non-compliant	<ul style="list-style-type: none"> • The Approved Provider shall ensure that all attendance records for all session(s)/room(s) are maintained on-site, in the required format and be made available for inspection at all times. • The Approved Provider shall upload evidence using the upload button, of attendance records of

			<p>DCEDIY funded children currently being maintained (see Inspection Comments section for details of records to be submitted).</p> <ul style="list-style-type: none"> • In addition, the Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box. • Failure to complete this rectification action i.e., to upload the relevant evidence and to complete the self-declaration by the Rectification Due Date, may result in the application of a sanction.
21.	Attendance records are not in an adequate format to allow compliance to be checked – historical issue	Major non-compliant	<ul style="list-style-type: none"> • The Approved Provider shall ensure that all attendance records for all session(s)/room(s) are maintained on-site, in the required format and be made available for inspection at all times. • The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box. • Failure to complete this rectification action i.e., to complete the self-declaration by the Rectification Due Date, may result in the application of a sanction.
22.	Attendance records have gaps/inadequacies	Moderate non-compliant	<ul style="list-style-type: none"> • The Approved Provider shall ensure that all attendance records for all session(s)/room(s) are maintained on-site, in the required format and free of any gaps and/or inadequacies and be made available for inspection at all times. • The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box. • Failure to complete this rectification action i.e., to complete the self-declaration by the Rectification Due Date, may result in the application of a sanction
OVERCLAIMS			
23.	Hive was not reflective of all absenteeism.	Determined by the % of incorrect registrations identified in the sample checked Major – greater than or equal to 20% not updated Moderate – greater than or equal to 5% but less than 20% not updated	<ul style="list-style-type: none"> • The Approved Provider shall ensure that all registrations on the Hive are kept up-to-date in line with the rules of the programme and are reflective of any absenteeism. • The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box. • Failure to complete this rectification action i.e., to complete the self-declaration by the Rectification Due Date, may result in the application of a sanction.

		Minor – less than 5% not updated.	Note: Pobal will action a compliance correction in relation to all identified overclaims. The corrections will come into effect on the date of the Compliance notification.
24.	Hive was not reflective of all leavers.	See above	<ul style="list-style-type: none"> • The Approved Provider shall ensure that all registrations on the Hive are kept up-to-date in line with the rules of the programme and are reflective of any leavers. • The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box. • Failure to complete this rectification action i.e., to complete the self-declaration by the Rectification Due Date, may result in the application of a sanction. <p>Note: Pobal will action a compliance correction in relation to all identified overclaims. The corrections will come into effect on the date of the Compliance notification.</p>
25.	Hive was not reflective of all under-attendance of 4 weeks or more.	See above	<ul style="list-style-type: none"> • The Approved Provider shall ensure that all registrations on the Hive are kept up-to-date in line with the rules of the programme and are reflective of any under-attendance. • The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box. • Failure to complete this rectification action i.e., to complete the self-declaration by the Rectification Due Date, may result in the application of a sanction. <p>Note: Pobal will action a compliance correction in relation to all identified overclaims. The corrections will come into effect on the date of the Compliance notification.</p>
26.	Hive was not reflective with regards to actual start dates of child/ren.	See above	<ul style="list-style-type: none"> • The Approved Provider shall ensure that all registrations on the Hive are kept up-to-date in line with the rules of the programme and are reflective of correct start dates. • The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box. • Failure to complete this rectification action i.e., to complete the self-declaration by the Rectification Due Date, may result in the application of a sanction.

			<p>Note: Pobal will action a compliance correction in relation to all identified overclaims. The corrections will come into effect on the date of the Compliance notification.</p>
27.	Not all registered Hive children have taken up their place in the service.	See above	<ul style="list-style-type: none"> • The Approved Provider shall ensure that all registrations on the Hive are kept up-to-date in line with the rules of the programme and are based on children who have actually taken up their place. • The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box. • Failure to complete this rectification action i.e., to complete the self-declaration by the Rectification Due Date, may result in the application of a sanction. <p>Note: Pobal will action a compliance correction in relation to all identified overclaims. The corrections will come into effect on the date of the Compliance notification.</p>
28.	Not all registered Hive children have been evidenced in the attendance records.	See above	<ul style="list-style-type: none"> • The Approved Provider shall ensure that all registrations on the Hive are kept up-to-date in line with the rules of the programme and all registered children are recorded in attendance records. • The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box. • Failure to complete this rectification action i.e., to complete the self-declaration by the Rectification Due Date, may result in the application of a sanction. <p>Note: Pobal will action a compliance correction in relation to all identified overclaims. The corrections will come into effect on the date of the Compliance notification.</p>
29.	Hive Registrations were incorrect with regard to facility the child is attending.	See above	<ul style="list-style-type: none"> • The Approved Provider shall ensure that all registrations on the Hive are kept up-to-date in line with the rules of the programme and are based on children who have actually taken up their place within the correct childcare facility. • The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box. • Failure to complete this rectification action i.e., to complete the self-declaration by the Rectification

			<p>Due Date, may result in the application of a sanction.</p> <p>Note: Pobal will action a compliance correction in relation to all identified overclaims. The corrections will come into effect on the date of the Compliance notification.</p>
CLOSURES			
30.	Calendar requirements have not been met: more than 1 day closure not reflected on calendar	Major non-compliant	<ul style="list-style-type: none"> • Approved Provider must action a calendar update in relation to the identified unreported closure days. This is to be completed within 30 calendar days of the compliance notification and a self-declaration completed and submitted through the Hive. • In order to update the calendar for a Closure, additional day(s) of service must be added to replace the unreported Closure(s), so that the full complement of 182 days is provided. If Approved Provider is unable to add extra day(s), then they must raise a Hive request and Pobal will facilitate a financial adjustment to reflect the relevant closure(s). Going forward, the Approved Provider shall ensure that the calendar on the Hive is up-to-date and reflects all closure days. • The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box. • Failure to complete this rectification action i.e., to complete the self-declaration by the Rectification Due Date, may result in the application of a sanction.
31.	Calendar requirements have not been met: 1 day closure not reflected on calendar	Moderate non-compliant	<ul style="list-style-type: none"> • Approved Provider must action a calendar update in relation to the identified unreported closure day. This is to be completed within 30 calendar days of the Compliance notification and a self-declaration completed and submitted through the Hive. • In order to update the calendar for a Closure, an additional day of service must be added to replace the unreported Closure, so that the full complement of 182 days is provided. If Approved Provider is unable to add extra day, then they must raise a Hive request and Pobal will facilitate a financial adjustment to reflect the relevant closure. Going forward, the Approved Provider shall ensure that the calendar on the Hive is up-to-date and reflects all closure days

			<ul style="list-style-type: none"> • The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box. • Failure to complete this rectification action i.e., to complete the self-declaration by the Rectification Due Date, may result in the application of a sanction.
QUALIFICATIONS			
32.	The relevant staff qualifications are not evidenced on-site and were not provided within required timelines.	Minor non-compliant	<ul style="list-style-type: none"> • The Approved Provider shall ensure that all relevant staff qualifications for staff working in the ECCE session(s)/room(s) are maintained on-site at all times, to allow checks to be conducted. • The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box. • Failure to complete this rectification action i.e., to complete the self-declaration by the Rectification Due Date, may result in the application of a sanction.
33.	The Approved Provider is not meeting the staff qualification requirements for room Lead Educator/s, at visit date.	Moderate non-compliant	<ul style="list-style-type: none"> • The Approved Provider shall ensure that all ECCE session(s)/room(s) operating have a room Lead Educator/s who meets the minimum requirement for staff qualifications in line with the ECCE programme rules. • The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box. • Failure to complete this rectification action i.e., to complete the self-declaration by the Rectification Due Date, may result in the application of a sanction.
34.	The Approved Provider is not meeting the staff qualification requirements for room Educator/s, at visit date.	Moderate non-compliant	<ul style="list-style-type: none"> • The Approved Provider shall ensure that all ECCE session(s)/room(s) operating have a room Educator/s who meet the minimum requirement for staff qualifications in line with the ECCE programme rules. • The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box below. • Failure to complete this rectification action i.e., to complete the self-declaration by the Rectification Due Date, may result in the application of a sanction.

MINIMUM ENROLMENT

35.	The Approved Provider is not meeting the minimum enrolment number of eight ECCE-eligible children per session.	Minor non-compliant	<ul style="list-style-type: none"> • The Approved Provider shall ensure that they are meeting the minimum enrolment number of eight ECCE-eligible children per session/per day or apply for a minimum enrolment exemption to the local CCC, in line with the ECCE programme rules. • The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box. • Failure to complete this rectification action i.e., to complete the self-declaration by the Rectification Due Date, may result in the application of a sanction.
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STAFF TO CHILD RATIO REQUIREMENTS

36.	There is not a sufficient number of staff in the ECCE session with the number of children enrolled to attend.	Moderate non-compliant	<ul style="list-style-type: none"> • The Approved Provider shall ensure that there are sufficient number of staff in the ECCE session(s)/rooms(s) with the number of children enrolled to attend. • The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box. • Failure to complete this rectification action i.e., to complete the self-declaration by the Rectification Due Date, may result in the application of a sanction.
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AIM LEVEL 1

37.	There is no qualified Inclusion Coordinator engaged at the service.	Major non-compliant	<ul style="list-style-type: none"> • Pobal will implement a correction to the AIM Level 1 application which may have a financial implication. The Approved Provider shall ensure that their AIM Level 1 Application is up-to-date on the Hive to reflect Notifications of Change or Extended Absences. • The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box. • Failure to complete this rectification action i.e., to complete the self-declaration by the Rectification Due Date, may result in the application of a sanction.
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<p>38.</p>	<p>A replacement Inclusion Coordinator has been engaged but has not been added to the AIM Level 1 application.</p>	<p>Major non-compliant</p>	<ul style="list-style-type: none"> • Pobal will implement a correction to the AIM Level 1 application which may have a financial implication. The Approved Provider shall ensure that their AIM Level 1 Application is up-to-date on the Hive to reflect Notifications of Change or Extended Absences and ensure that the replacement Inclusion Coordinator is updated as per the AIM agreement. • The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box. • Failure to complete this rectification action i.e., to complete the self-declaration by the Rectification Due Date, may result in the application of a sanction.
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