



**Compliance Guide  
for  
Approved  
Providers**

**Community  
Childcare  
Subvention Plus  
(CCSP)**

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An Roinn Leanaí, Comhionannais,  
Míchumais, Lánpháirtíochta agus Óige  
Department of Children, Equality,  
Disability, Integration and Youth



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**Acronyms used in this document:**

|               |   |
|---------------|---|
| <b>AIM</b>    | Access and Inclusion Model  |
| <b>CCC</b>    | City/County Childcare Committee                                     |
| <b>CCSP</b>   | Community Childcare Subvention Plus                                 |
| <b>DCEDIY</b> | Department of Children, Equality, Disability, Integration and Youth |
| <b>ECCE</b>   | Early Childhood Care and Education                                  |
| <b>ELC</b>    | Early Learning and Care   |
| <b>EYPC</b>   | Early Years Provider Centre   |
| <b>NCS</b>    | National Childcare Scheme   |
| <b>SAC</b>    | School Age Childcare  |
| <b>VO</b>     | 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 a CCSP Saver programme compliance inspection (there are separate Compliance Guides for providers for the ECCE and the NCS programmes). 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 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, 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 CCSP Saver 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

|   |   |
|---|---|
|    | 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. |
|  | You will see this icon throughout the document to indicate important or helpful information which you may need to consider further.   |

## 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 CCSP checklist is included in **Appendix 1** and is also accessible on the Hive – *CCSP Compliance Checklist for 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 who 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"> <li>• Become familiar with the programme information, including the Funding Agreements, DCEDIY Rules for Programmes, programme Guides and the Compliance Checklists for Approved Providers.</li> <li>• 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.</li> <li>• Set aside time regularly to review and amend the Hive registrations so that they are accurate and reflect the level of attendance.</li> </ul> |
|---|--|

### 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"> <li>• Please note all Pobal VOs are Garda vetted and hold official Pobal photographic ID</li> <li>• 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.</li> </ul> |
|---|---|

On arrival, after initial introductions and briefing the VO will ask to be shown the facility. The VO will also request access to attendance records and documentation detailed on the

Compliance Checklist for 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.

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 CCSP 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 CCSP 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 CCSP compliance categorisations is available in **Appendix 2, CCSP Post Inspection Rectification Actions 2023/2024**

**Table 1: Summary of Compliance Categorisations:**

| Outcome                | Reasons   |
|------------------------|---|
| Major non-compliant    | <ul style="list-style-type: none"> <li>• Failure to facilitate an inspection</li> <li>• Records not available for review</li> <li>• Incorrect Hive registrations*</li> <li>• Inadequate attendance records*</li> <li>• CCSP provision requirements not met*</li> </ul>                                      |
| Outcome                | Reasons   |
| Moderate non-compliant | <ul style="list-style-type: none"> <li>• Moderate instances of * above</li> <li>• Signed Applicant Declaration Form not on-site*</li> <li>• Signed Parent Statement not on-site *</li> <li>• Fee Table requirements not met</li> <li>• Inadequate Fee Records*</li> <li>• Fees/Subvention issues</li> </ul> |
| Outcome                | Reasons   |
| Minor non-compliant    | <ul style="list-style-type: none"> <li>• Minor instances of * above</li> <li>• Document display issues (Calendar and Fee Table)</li> </ul>  |
| Outcome                | Reasons   |
| Compliant              | <ul style="list-style-type: none"> <li>• No compliance issues identified (based on sample records checked)</li> </ul>   |

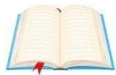


### 3.4 Compliance Outcomes – Request for review

|   |   |
|---|---|
|  | <ul style="list-style-type: none"><li>• The local City/County Childcare Committee (CCC) are available to provide on-going support with all DCEDIY Childcare Funding programmes.</li><li>• 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.</li><li>• 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)</li><li>• Providers can also contact the Early Years Provider Centre (EYPC) by phone 01 5117 222 or <a href="mailto:eypc@pobal.ie">eypc@pobal.ie</a></li></ul> |
|---|---|

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><b>CCSP Saver Programme Funding Agreement:</b><br/>Clause 9.3 (v): Term and Termination</p> |
|---|--|

Under the CCSP 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:

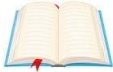
- On-site revisit where an inspection is not facilitated and/or where attendance records were not available at initial inspection.
- Desk-based follow-up for all other relevant non-compliance rectification actions that the provider is required to complete on the Hive.

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 the terms of this Agreement may result in the suspension of CCSP Saver Programme funding and/or a termination of this Funding Agreement. Core funding or part thereof may also be withdrawn from Partner Services under the conditions set out in Appendix 6 of the Core Funding Partner Service Funding Agreement.'*

|   |  |
|---|--|
|  | <p><b>CCSP Saver Programme Funding Agreement:</b><br/>Clause 3: Term and Conditions of the Funding<br/><b>DCEDIY Rules for CCSP Saver Programme:</b><br/>4.1, 10.3, 11.1, 14.1</p> |
|---|--|

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.'*



#### **CCSP Saver Programme Funding Agreement:**

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

#### **DCEDIY Rules for CCSP Saver Programme:**

11.3

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.

#### 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 inspection<sup>1</sup>. 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.

<sup>1</sup> 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<br>– 1 <sup>st</sup> occurrence | Major non-Compliant       | Inspection could not proceed as admittance to facility was not facilitated.                |
| Pre-requisites      | Approved Provider did not facilitate the inspection<br>– 2 <sup>nd</sup> 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.’*



**CCSP Saver Programme Funding Agreement:**  
 Clause 4.3 Undertakings and Warranties  
**DCEDIY Rules for CCSP Saver Programme:**  
 4.2, 4.3, 4.4

Each facility/location operated must obtain a separate Service Reference Number and be subject to the appropriate Tusla inspection and Change of Circumstance requirements.

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

## 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 provider's 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).'*

*'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 hours attendance'.**

*'Failure to maintain sufficient attendance records may result in an assumption of minimal hours 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><b>CCSP Saver Programme Funding Agreement:</b><br/>Clause 7: Access, Reporting Requirements and Retention of Records</p> <p><b>DCEDIY Rules for CCSP Saver Programme:</b><br/>10.1,10.2,10.3</p> <p><b>Good Practice Guide – Attendance Records</b> – included in Rules document and available on the Hive</p> |
|---|---|

### 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 CCSP sessions / rooms 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
- CCSP Provision (e.g., service opening times/days/weeks) are in line with the calendar submitted on the Hive.

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 **CCSP Rules documents and Good Practice Guide – Attendance Records**.



Where an Afterschool service, including a Breakfast Club, is operating a drop-off and/or pick-up service, a record of the time from when the child is in the care of the service must be kept i.e. a record of the time of travel to and from school to the facility while in the care of service staff. This record can be kept separate from the record of attendance in the facility.

### 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.<br>Examples: <ul style="list-style-type: none"> <li>Records do not allow the VO to accurately track attendance of all registered children</li> <li>Children's times of arrival and departure are not recorded or are not recorded by staff in real time i.e., as child arrives and departs.</li> <li>Records do not allow the VO to review registrations in a timely manner</li> </ul> |

|                    |   |                        |   |
|--------------------|---|------------------------|---|
|                    |   |                        | <ul style="list-style-type: none"> <li>Attendance is recorded in advance</li> </ul>   |
| Attendance Records | Attendance records have gaps/inadequacies | Moderate non-compliant | <p>Attendance records do not meet requirements as laid out by DCEDIY but do allow the VO to track attendance of all registered children.</p> <p>Examples:</p> <ul style="list-style-type: none"> <li>Number of gaps during the programme cycle of times in/out but pattern of attendance could be established</li> <li>Absences are not recorded</li> </ul> |

**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.

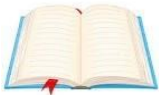
## 4.4 Registrations and Hive Updating Requirements

**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’.*

*‘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 CCSP Saver Programme Funding Agreement.’*

*‘Where a child has not attended the service for 4 consecutive weeks without a qualifying special circumstance as outlined in 9.3 below, the approved provider must enter the child as a “leaver” on the EY HIVE stating the date the child last attended the service which will result in the child losing their Saver Status’*

|   |   |
|---|---|
|  | <p><b>CCSP Saver Programme Funding Agreement:</b><br/>         Clause 7.2 Access, Reporting and Retention of Records<br/>         Appendix 1, General Terms &amp; Conditions, Point 18</p> <p><b>DCEDIY Rules for CCSP Saver Programme:</b><br/>         Chapter 9: 9.1; 9.2; 9.3; 9.4; 9.5</p> |
|---|---|

**ii. Compliance Check/s:**

The VO will review the attendance records to evidence and confirm that each CCSP registered child is included on the attendance record. The VO will then review the attendance patterns for a sample of CCSP 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 circumstance<sup>2</sup> 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:**

| <b>Inspection Category</b> | <b>Compliance outcome</b>  | <b>Compliance categorisation</b>   | <b>Reason for outcome</b>   |
|----------------------------|--|--|---|
| Overclaims                 | Hive was not reflective of all absenteeism                         | Major/Moderate/ Minor non-compliant determined by the percentage of incorrect registrations identified | 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   |
| 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 |

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<sup>2</sup> See CCSP Rules document 9.2 *Special Circumstances* for further details on criteria and how to apply.



|            |  |   |   |
|------------|--|---|---|
|            |  |   | <p>circumstance exemption has not been approved</p> <p>Examples:</p> <ul style="list-style-type: none"> <li>• Child registered for 5 days but only attending 3 days</li> <li>• Child registered for Full day but only attending for sessional hours.</li> </ul> |
| 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.

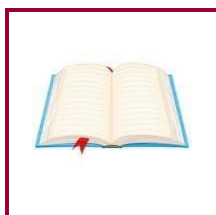
## 4.5 Documentation

### 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.’*



**CCSP Saver Programme Funding Agreement:**  
Appendix 1, *General Terms & Conditions*, Point 9,10  
**DCEDIY Rules for CCSP Saver Programme:**  
Chapter 5 and 6

#### ii. Compliance Check/s:

The VO will confirm if all the required documentation for the CCSP 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 <sup>3</sup> |
|---------------------|--------------------|---------------------------|---------------------------------|
|---------------------|--------------------|---------------------------|---------------------------------|

<sup>3</sup> The outcome reasons in this table are applicable when there are children currently registered on CCSP as at date of the compliance inspection.

|                  |   |                     |   |
|------------------|---|---------------------|---|
| 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"> <li>• Fee Table is not on display within the service in an area accessible to parents at date of inspection.</li> <li>• Fee Table has been updated on the Hive and documents on display are not the most up to date version.</li> </ul>                    |
| 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"> <li>• Fee Table is not published on all online platforms maintained for advertising purposes at date of inspection.</li> <li>• Fee Table has been updated on the Hive and documents published are not the most up to date version</li> </ul>               |
| 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"> <li>• Service Calendar is not on display within the service in an area accessible to parents at date of inspection</li> <li>• Service Calendar has been updated on the Hive and documents on display are not the most up to date version</li> </ul>        |
| 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"> <li>• Service Calendar is not published on all online platforms maintained for advertising purposes at date of inspection.</li> <li>• Service Calendar has been updated on the Hive and documents published are not the most up to date version</li> </ul> |

**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.

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


**4.5.1 Document Retention Requirement**

**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.'*

*‘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><b>CCSP Saver Programme Funding Agreement:</b><br/>Access, Reporting Requirements and Retention of Records Clause 7.7<br/>Appendix 1, <i>General Terms &amp; Conditions</i>, Point 17</p> <p><b>DCEDIY Rules for CCSP Programme:</b><br/>5.4, 5.7</p> |
|---|--|

Providers must have a signed and dated parent statement on file within the facility for each family with a child registered on the CCSP 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 CCSP, 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. | All 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 CCSP 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.


**4.5.2 Applicant Declaration Forms**

**i. Programme Rules, Terms & Conditions:**

*‘Approved providers must ensure that parents/guardians sign and date a CCSP Saver Programme Applicant Declaration Form to indicate that they understand the terms of the*

programme and that all 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><b>CCSP Saver Programme Funding Agreement:</b><br/>Access, Reporting Requirements and Retention of Records Clause 7.7<br/>Appendix 1, <i>General Terms &amp; Conditions</i>, Point 17</p> <p><b>DCEDIY Rules for CCSP Programme:</b><br/>5.4, 5.5, 5.7, 7.2</p> |
|---|--|

**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 CCSP. The VO will check that the Applicant Declaration is up-to-date to reflect the current registration level and correct CCSP fee for the child.

**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 CCSP programme reflect current registration level, current CCSP fee, 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, CCSP Saver Programme fees must be reflected on a weekly basis over the CCSP Saver Programme year, as well as details of any additional charges, discounts, voluntary donations etc. applied by the approved provider.’



**CCSP Saver Programme Funding Agreement:**  
 Clause 4.8: Undertakings and Warranties  
 Appendix 1, General Terms and Conditions Point 10  
**DCEDIY Rules for CCSP Saver Programme:**  
 Chapter 5



The accuracy of a services Fee Table may also be checked by CCCs and Early Years throughout the programme cycle

**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    | Fee Table does not comply with requirements laid out in rules or programme guides document and/or is incorrect or inaccurate.<br>Examples (not exhaustive): <ul style="list-style-type: none"> <li>• Fee Table not completed correctly as per Rules documents and Programme guides</li> <li>• Discounts not included</li> <li>• All session types offered not included</li> <li>• Fees incorrect (e.g., weekly rate incorrectly calculated / full subvention not applied / fees have increased but Fee Table not updated)</li> <li>• Non-pro rata rates not included</li> </ul> |

**iv. Rectification Action required:**

Providers must update the Hive Fee Table to resolve any issues identified during a compliance inspection and the revised Fee Table<sup>4</sup> 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 CCSP 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 DCEDIY/the Scheme Administrator/CCC.'*

*'The approved provider will distribute to parents/guardians a service calendar document indicating the days the service is due to be closed over the CCSP Saver Programme year 2023/2024.'*

|   |   |
|---|---|
|  | <p><b>CCSP Saver Programme Funding Agreement:</b><br/>Clause 4.8: Undertakings and Warranties<br/>Appendix 1, General Terms and Conditions Point 9</p> <p><b>DCEDIY Rules for CCSP Saver Programme:</b><br/>Chapter 6</p> |
|---|---|

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.

CCSP providers are contractually required to operate for a minimum of 37 weeks over the programme year. The funding approval amounts are calculated based on the calendars submitted.

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 CCC<sup>4</sup>.


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:**

---

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

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

|   |  |
|---|--|
|  | <ul style="list-style-type: none"> <li>• If force majeure has been approved (or applied for) the Visit Officer will review evidence of the approval and/or application on Hive.</li> <li>• Force majeure should be formally applied for no later than 5 days after the incident, even if the incident is ongoing.</li> </ul> |
|---|--|

|   |   |
|---|---|
|  | <p><b>CCSP Saver Programme Funding Agreement:</b><br/>Clause 11 – Force Majeure</p> <p><b>DCEDIY Rules for CCSP Saver Programme:</b><br/>Chapter 12</p> |
|---|---|

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 a 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       | CCSP provider not operating in line with Hive calendar for more than 1 day. Force majeure not approved/applied for. |
| Closures            | Calendar requirements have not been met: 1 day closure not reflected on calendar           | Moderate non-compliant    | CCSP provider not operating in line with Hive calendar for 1 day. 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 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:

*'The approved provider must ensure that all financial records relating to monies received in relation to the operation of the CCSP Saver Programme are available to the Scheme Administrator on request. All financial records, including attendance records etc., must be retained for a period of 6 years.'*

|   |  |
|---|--|
|  | <p><b>CCSP Saver Programme Funding Agreement:</b><br/>           Clause 7.4 Access, Reporting Requirements and Retention of Records<br/> <b>DCEDIY Rules for CCSP Saver Programme:</b><br/>           Chapter 13</p> |
|---|--|

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.

#### 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.

#### 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:

The provider is required to ensure all fees records for all current CCSP registered children are available for review on-site and that records are maintained in an

adequate format to allow compliance to be checked (allowing compliance to confirm any fees charged to parent/guardians and received).


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:

*‘An approved provider’s fees list must show details of all the fees charged to parents/guardians, CCSP Saver Programme fees must be reflected on a weekly basis over the CCSP Saver Programme year, as well as details of any additional charges, discounts, voluntary donations etc. applied by the approved provider.’*

*‘The approved provider agrees to use the funding provided under this programme, to reduce fees charged to qualifying parents/guardians for childcare services provided to eligible children.’*

|   |   |
|---|---|
|  | <p><b>CCSP Saver Programme Funding Agreement:</b><br/>           Clause 5 Operation of the CCSP Saver Programme</p> <p><b>DCEDIY Rules for CCSP Saver Programme:</b><br/>           Chapter 5</p> |
|---|---|

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.

##### ii. Compliance Check/s:

The VO will review the fee records to ensure that the correct awarded Band and appropriate fee subsidy is 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        | The fee charged to parents/ guardians is not reflective of the full subsidy received | Moderate non-compliant    | Examples: <ul style="list-style-type: none"> <li>• Fees charged in excess of listed fees</li> <li>• Fees charged at incorrect band</li> <li>• Nominal fee charge where subsidy covers cost of place</li> <li>• Fees increased by service, but Fee Table not updated</li> </ul> |

##### iv. Rectification Action required:

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

Providers must ensure that the appropriate fees are being charged in relation to the awarded band and session type.

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

## Appendix 1 - CCSP Compliance Checklist for Approved Providers

### Community Childcare Subvention Plus (CCSP) Saver Programme 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 available on the Hive and DCEDIY website. For further information please refer to the CCSP 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 and/or room?<br>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?<br>These are to be maintained by staff in each session and/or room, 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 and/or room to assist identifying the Hive updating requirements.<br><br>The same requirement applies <b>if</b> 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"/> |

|   |   |   |
|---|---|---|
|   | and/or room. Please see <i>Good Practice Guide – Attendance Records</i> in the programme rules documentation.   |   |
|   | Please ensure that where CCSP registered children avail of Breakfast Clubs and occasional camps (e.g. during Halloween, Easter, Summer holidays) that attendance records are maintained and available for review at compliance inspections. |   |
| <b>Hive Registrations</b>               |   |   |
| <b>5</b>                                | Are all CCSP registered children recorded in the attendance records?  | Yes <input type="checkbox"/>                              |
| <b>6</b>                                | Did all CCSP children registered on the Hive take up their place?   | Yes <input type="checkbox"/>                              |
| <b>7</b>                                | Are all CCSP Saver Registrations on the Hive accurate and reflective of actual levels of attendance as per the attendance records i.e. correct start/end dates, session type and/or number of days per week?                                | Yes <input type="checkbox"/>                              |
| <b>8</b>                                | Have CCSP Saver Registrations been updated on the Hive to reflect any changes since initial registration i.e. absences, leavers, session type and/or number of days per week?   | Yes <input type="checkbox"/>                              |
| <b>9</b>                                | If you are operating more than one facility, are all CCSP registered children attending the correct facility?   | Yes <input type="checkbox"/> N/A <input type="checkbox"/> |
| <b>10</b>                               | 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"/> |
| <b>Parent Statements</b>                |   |   |
| <b>11</b>                               | 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"/>                              |
| <b>Hive Applicant Declaration Forms</b> |   |   |
| <b>12</b>                               | 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"/>                              |
| <b>13</b>                               | In the interest of GDPR, has the provider disposed of, in an appropriate manner, all documentation that contains PPS Numbers?   | Yes <input type="checkbox"/>                              |

| <b>Hive Fee Table &amp; Service Calendar</b>       |   |   |
|--|---|---|
| <b>14</b>  | 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<br><input type="checkbox"/>                                 |
| <b>15</b>  | Is the most up to date Hive Fee Table, and Service Calendar displayed in the service in a location easily accessible to all parents <b>and</b> published on any online platform(s) maintained by the provider for the purpose of advertising its services?  | Yes<br><input type="checkbox"/>                                 |
| <b>16</b>  | Does the Service Calendar on the Hive reflect all closure days including unplanned closure days, where force majeure is not approved?<br><br><b>Note:</b> 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. | Yes<br><input type="checkbox"/>                                 |
| <b>Hive Fee Table &amp; Service Calendar cont.</b> |   |   |
| <b>17</b>  | <b>Tusla/HSE directed closures:</b> If applicable, is evidence on-site of any Tusla/HSE directions to close as a result of a public health concern?   | Yes<br><input type="checkbox"/>                                 |
| <b>Fee Records</b>                                 |   |   |
| <b>18</b>  | Are adequate fee records accessible for each child for the period under review, which will enable confirmation of the fees 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).  | Yes    N/A<br><input type="checkbox"/> <input type="checkbox"/> |

## Appendix 2 - CCSP Post Inspection Rectification Actions 2023/2024

Following a CCSP 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 CCSP 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   |
|-------------------------------|---|------------------------------|---|
| <b>PRE-REQUISITES</b>         |   |                              |   |
| <b>1.</b>                     | Approved Provider did not facilitate the inspection – 1 <sup>st</sup> occurrence. | Major non-compliant          | <ul style="list-style-type: none"> <li>• Facilitate future compliance inspections.</li> </ul>   |
| <b>2.</b>                     | Approved Provider did not facilitate the inspection – 2 <sup>nd</sup> occurrence. | Major non-compliant          | <ul style="list-style-type: none"> <li>• No further Approved Provider action is possible as this constitutes a serious Compliance issue. A sanction may be applied.</li> <li>• Facilitate any future compliance inspections.</li> </ul> |
| <b>SERVICE CALENDAR</b>       |   |                              |   |

|                           |  |   |  |
|---------------------------|--|---|--|
| 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"> <li>• The Approved Provider shall display their up-to-date calendar, as per the Hive, in an area(s) accessible to parents.</li> <li>• The Approved Provider shall upload photographic evidence of the up-to-date calendar on display within the service, using the upload/create button.</li> <li>• In addition, the Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box.</li> <li>• 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.</li> </ul>  |
| 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"> <li>• 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.</li> <li>• 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.</li> <li>• In addition, the Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box.</li> <li>• 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.</li> </ul> |
| <b>PARENTAL DOCUMENTS</b> |  |   |  |
| 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.<br>Minor non-compliant $\geq 70\%$ - $\leq 89\%$ ,<br>Moderate non-compliant $< 70\%$ | <ul style="list-style-type: none"> <li>• The Approved Provider shall ensure Applicant Declarations for all currently registered children are up-to-date, signed by both parties, dated and on file.</li> <li>• The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box.</li> <li>• 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.</li> </ul>   |



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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<br>Minor non-compliant <95% - ≥90%,<br>Moderate non-compliant <90% | <ul style="list-style-type: none"> <li>• The Approved Provider shall ensure that Parent Statements for all currently registered children are signed by both parties, dated and on file.</li> <li>• The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box.</li> <li>• 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.</li> </ul> |
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**FEE TABLE**

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| 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"> <li>• The Approved Provider shall display their up-to-date Fee Table, as per the Hive, in an area(s) accessible to parents.</li> <li>• The Approved Provider shall upload photographic evidence of the up-to-date Fee Table on display within the service, using the upload/create button.</li> <li>• In addition, the Approved Provider shall complete a self-declaration by the Rectification Due Date, by selecting the tick box.</li> <li>• 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.</li> </ul>  |
| 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"> <li>• 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.</li> <li>• 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.</li> <li>• In addition, the Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box.</li> <li>• 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.</li> </ul> |

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| 9.                 | The Fee Table on the Hive does not comply with programme requirements. | Moderate non-compliant | <ul style="list-style-type: none"> <li>• 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).</li> <li>• 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).</li> <li>• In addition, the Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box.</li> <li>• 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.</li> </ul> |
| <b>FEE RECORDS</b> |  |                        |   |
| 10.                | Fee records are not available for inspection on-site.                  | Moderate non-compliant | <ul style="list-style-type: none"> <li>• The Approved Provider shall ensure that fee records for all registered children are available for review on-site.</li> <li>• The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box.</li> <li>• 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.</li> </ul>   |
| 11.                | Fee records are not adequate to allow compliance to be checked.        | Moderate non-compliant | <ul style="list-style-type: none"> <li>• The Approved Provider shall ensure that fee records for all registered children are maintained in an adequate format to allow compliance to be checked.</li> <li>• The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box.</li> <li>• 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.</li> </ul>   |
| 12.                | Fee records have gaps/inadequacies.                                    | Minor non-compliant    | <ul style="list-style-type: none"> <li>• The Approved Provider shall ensure that fee records for all registered children are maintained in an adequate format to allow compliance to be checked.</li> <li>• The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box.</li> <li>• Failure to complete this rectification action i.e., to complete the self-declaration by the Rectification</li> </ul>  |

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|                           |  |                        | Due Date, may result in the application of a sanction.  |
| <b>FEES CHARGED</b>       |  |                        |   |
| <b>13.</b>                | The fee charged to parents/guardians is not reflective of the full subsidy received. | Moderate non-compliant | <ul style="list-style-type: none"> <li>The Approved Provider shall review all fees charged to parents/ guardians of CCSP registered children to ensure they are reflective of the full subsidy received and to reimburse any parents/guardians that have been overcharged.</li> <li>The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box.</li> <li>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.</li> </ul>   |
| <b>ATTENDANCE RECORDS</b> |  |                        |   |
| <b>14.</b>                | Attendance records for the period under review do not exist – submit evidence        | Major non-compliant    | <ul style="list-style-type: none"> <li>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.</li> <li>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).</li> <li>In addition, the Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box.</li> <li>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.</li> </ul> |
| <b>15.</b>                | Attendance records for the period under review do not exist – historical issue       | Major non-compliant    | <ul style="list-style-type: none"> <li>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.</li> <li>The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box.</li> <li>Failure to complete this rectification action i.e., to complete the self-declaration by the Rectification</li> </ul>  |

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|            |   |                     | Due Date, may result in the application of a sanction.  |
| <b>16.</b> | 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"> <li>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.</li> </ul>   |
| <b>17.</b> | 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"> <li>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.</li> <li>The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box.</li> <li>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.</li> </ul>   |
| <b>18.</b> | 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"> <li>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.</li> <li>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).</li> <li>In addition, the Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box.</li> <li>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.</li> </ul> |
| <b>19.</b> | 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"> <li>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.</li> <li>The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box.</li> <li>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.</li> </ul>   |

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| 20. | Attendance records have gaps/inadequacies | Moderate non-compliant | <ul style="list-style-type: none"> <li>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.</li> <li>The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box.</li> <li>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</li> </ul> |
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**OVERCLAIMS**

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| 21. | Hive was not reflective of all absenteeism. | Determined by the % of incorrect registrations identified in the sample checked<br><b>Major</b> – greater than or equal to 20% not updated<br><b>Moderate</b> – greater than or equal to 5% but less than 20% not updated<br><b>Minor</b> – less than 5% not updated | <ul style="list-style-type: none"> <li>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.</li> <li>The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box.</li> <li>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.</li> </ul> <p><b>Note:</b> 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> |
| 22. | Hive was not reflective of all leavers.     | See above  | <ul style="list-style-type: none"> <li>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.</li> <li>The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box.</li> <li>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.</li> </ul> <p><b>Note:</b> 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>     |

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| 23. | Hive was not reflective of all under-attendance of 4 weeks or more.        | See above | <ul style="list-style-type: none"> <li>• 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.</li> <li>• The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box.</li> <li>• 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.</li> </ul> <p><b>Note:</b> 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>                       |
| 24. | Hive was not reflective with regards to actual start dates of child/ren.   | See above | <ul style="list-style-type: none"> <li>• 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.</li> <li>• The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box.</li> <li>• 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.</li> </ul> <p><b>Note:</b> 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. | Not all registered Hive children have taken up their place in the service. | See above | <ul style="list-style-type: none"> <li>• 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.</li> <li>• The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box.</li> <li>• 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.</li> </ul> <p><b>Note:</b> 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> |

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| 26. | Not all registered Hive children have been evidenced in the attendance records.   | See above | <ul style="list-style-type: none"> <li>• 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.</li> <li>• The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box.</li> <li>• 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.</li> </ul> <p><b>Note:</b> 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. | Hive Registrations were incorrect with regard to facility the child is attending. | See above | <ul style="list-style-type: none"> <li>• 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.</li> <li>• The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box.</li> <li>• 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.</li> </ul> <p><b>Note:</b> 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

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| 28. | Calendar requirements have not been met: more than 1 day closure not reflected on calendar | Major non-compliant | <ul style="list-style-type: none"> <li>• 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.</li> <li>• This may result in a reduction of funding relevant to the closed day(s).</li> <li>• The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box.</li> <li>• Failure to complete this rectification action i.e., to complete the self-declaration by the Rectification</li> </ul> |
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|            |   |                        | Due Date, may result in the application of a sanction.   |
| <b>29.</b> | Calendar requirements have not been met:<br>1 day closure not reflected on calendar | Moderate non-compliant | <ul style="list-style-type: none"> <li>• 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.</li> <li>• This may result in a reduction of funding relevant to the closed day.</li> <li>• The Approved Provider shall complete a self-declaration, by the Rectification Due Date, by selecting the tick box.</li> <li>• 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.</li> </ul> |