

Service Provider General Information

Pre-Visit Information

Private Provider <input type="checkbox"/> Yes <input type="checkbox"/> No		Community Provider <input type="checkbox"/> Yes <input type="checkbox"/> No	
DCYA Ref:		Pobal App ID/ URN (If previously funded)	
Facility Name:		Date of Site Visit:	
Outcome of previous Compliance Visit ECCE: Date: [] Categorisation: [] CETS: Date: [] Categorisation: [] CCS: Date: [] Categorisation: []			
Is the service participating in: ECCE <input type="checkbox"/> Yes <input type="checkbox"/> No CETS <input type="checkbox"/> Yes <input type="checkbox"/> No CCS <input type="checkbox"/> Yes <input type="checkbox"/> No		Compliance Visit being undertaken on: ECCE <input type="checkbox"/> Yes <input type="checkbox"/> No CETS <input type="checkbox"/> Yes <input type="checkbox"/> No CCS <input type="checkbox"/> Yes <input type="checkbox"/> No	

Visit – General Information:

Is the service in existence and operating? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Present (From Pobal)	Name:	Present (From Service)	Name: Role:

Fee Payment Policy:

Is the CCC approved Fees Policy and Calendar displayed in a prominent position in the childcare service premises?	
Yes <input type="checkbox"/>	No <input type="checkbox"/>

Publicity Compliance:

Is the service compliant with publicity requirements under EOCP? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Compliant Previously <input type="checkbox"/>
If yes, list how compliance was demonstrated

Full Service Details:

Maximum number of childcare places available per day (i.e. the capacity the service can accommodate daily)	Sessional		Part-time		Full-time	
Number of places occupied per day on average						
Number of School Age Childcare Places available per day on average						
Operating hours	Sessional		Part-time		Full-time	
Operating weeks per year						
Age range						
Total number of paid Childcare staff	Full-time			Part-time		
Total number of auxiliary staff (non-childcare e.g. cleaning, catering)						
Total number of staff on Government Programmes			CSP		CSP	
			Jobs Initiative		CE	
			Jobs Bridge		Tús	
					RSS	
Tick all of the type(s) of services that will be provided per day	Full Day		Breakfast Club			
	Part-time (preschool)		School Aged (sessional/pt)			
	Sessional Service (am)		School Age full time outside of school term			
	Sessional Service (pm)		Drop – in			
	Childminding					

Community Childcare Subvention (CCS)

CCS Full Time Equivalent (FTE)

Sample Week Commencing:	/ /
-------------------------	-----

Approved DCYA CCS data				CCS data confirmed by Pobal on day of site visit							
CCS FTE approved:				*Enrolled CCS FTE during 'Sample Week'				In attendance CCS FTE during 'Sample Week'			
Weeks per-year	Full time	Part Time	Sessional	Weeks per-year	Full time	Part Time	Sessional	Weeks per-year	Full time	Part time	Sessional

** FTE calculated using tailored spreadsheet*

Note any discrepancies between DCYA approved places and data confirmed on day of visit:

Number of CCS children noted as absent for over 1 month:		
Name of Child	Date last attended	Replaced by other child eligible for subvention? Y/N
		Yes [] No []
		Yes [] No []
		Yes [] No []
		Yes [] No []
		Yes [] No []
		Yes [] No []

Subvention & Fee Payment Policy

Fees Records available on site to verify application of CCS?	Yes [] No []
Do fees records show that the appropriate CCS subvention is being applied?	Yes [] No []
Do the fees records show that the service fully implementing the approved CCS Fee	Yes [] No []

Payment Policy?	
Has the parent/guardian of each CCS child signed the CCC approved Fee Payment Letter ?	Yes [<input type="checkbox"/>] No [<input type="checkbox"/>]

Optional Extras

Optional Extras	Is the service providing optional extras?	Yes [<input type="checkbox"/>] No [<input type="checkbox"/>]
	If Yes above, is there evidence that parents are advised that this is optional?	Yes [<input type="checkbox"/>] No [<input type="checkbox"/>]
	Numbers taking up optional extras to-date?	[No.] out of [No.] approved
Voluntary Donation	Is the service soliciting a voluntary donation?	Yes [<input type="checkbox"/>] No [<input type="checkbox"/>]
	If Yes above, is there evidence that parents are advised that this is optional?	Yes [<input type="checkbox"/>] No [<input type="checkbox"/>]
	Numbers paying voluntary donation to-date?	[No.] out of [No.] approved

Compliant in relation to Fee Payment Policy/Optional Extras:	Yes [<input type="checkbox"/>] No [<input type="checkbox"/>]
---	--

If non-compliant in relation to Fee Payment Policy/Optional Extras, provide details:

Sign-Off**Declaration**

We agree the above data is an accurate record of the information obtained on during the site visit.

Date:	
Pobal Member:	
Service Member:	
Role:	

Signatures: _____
