

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2015CC138
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<b>Name of Service:</b>	Early Years Educational Centre
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<b>Address of Service:</b>	Ballywilliam, Cobh, Co Cork
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<b>Eircode:</b>	P24 YR44
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<b>Name of Registered Provider:</b>	Jennifer Hannigan & Marie Travers
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<b>Service type:</b>	Full Day, Part Time, Sessional
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<b>Date of Inspection:</b>	18/02/2025
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<b>No of pre-school children:</b>	AM	21	PM	10
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<b>Address of the Early Years Inspectorate:</b>	Early Years Inspectorate Administration Building St Mary's Health Campus Gurrabraher Cork, T23 X440
<b>Inspection undertaken by:</b>	D Prendergast & J Dennehy
<b>Title:</b>	Early Years Inspector & Inspection and Registration Manger

### Authority to Inspect

The Tusla Early Years Inspectorate carries out inspections of Early Years Services under Section 58(J) of the Child Care Act 1991 (as inserted by Section 92 of the Child and Family Agency Act 2013).

<b>Conditions if applicable</b>	N/A
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### Description of service

Early Years Educational Centre is registered to provide full day, part time and sessional care and education to children aged 2 to 6 years, as well as school age care. The service is open from 7.30am to 5.30pm daily and this includes the facilitation of four sessional services, for children attending the Early Childhood Care and Education (ECCE) Scheme.

Located in an urban area of Cobh, in Co Cork, the premises consists of a single storey, detached building, with five operational care rooms. Children's sanitary facilities are available either adjoining or adjacent to the care rooms and the service also includes staff sanitary facilities, an office and a separate staff cabin. Outdoor play space for the children is provided at the side and rear of the premises.

### Staffing

There are 17 adults employed at the childcare facility, all of whom work directly with the early years children. This includes the two registered providers, who can cover in the care rooms, as required and four adults employed under the Access and Inclusion Model (AIM) support scheme. A student was also undertaking a work placement.

### Methodology

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

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

The findings on inspection are based on:

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

This inspection was unannounced and focused on the area of governance/ health, welfare and development of child/ safety/ premises and facilities. The inspection may also focus on other areas as required.

Inspection findings are documented in the inspection report which is first issued in draft format to the service with an opportunity to respond to any findings. Where statutory requirements are identified as not being met, the registered provider must demonstrate how they have rectified the non-compliance and will prevent any non-compliance from re occurring. The Corrective Action and Preventive Action plan (CAPA) will be used to inform decisions about compliance with regulatory requirements. Where the registered provider fails to meet the statutory requirements an escalation process may be commenced.

The inspectorate reserves the right to edit responses received for reasons including clarity, completeness and compliance with administrative and legal processes.

The contents of the report are compiled by the inspectorate body.

### Acknowledgments

The inspectors wish to acknowledge the cooperation of the registered providers, deputies, staff and children who were present on the day of the inspection.

## Part III – Management and Staff

### Regulation 9 – Management and recruitment

*(1) A registered provider shall ensure that-*

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

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

- (a) consideration of references from the person's past employers, if any, and in particular the most recent employer, if any,*
- (b) consideration of references from reputable sources in the case of a person who has no past employers,*

*(c) consideration of the vetting disclosure received from the National Vetting Bureau of the Garda Síochána in accordance with the Act of 2012 in respect of the person, and*

*(d) ensuring, insofar as is practicable, that where a person has lived in a state other than the State for a period of longer than 6 consecutive months, he or she provides police vetting from the police authorities in that state.*

*(4) A registered provider shall ensure that, without prejudice to the generality of paragraph (2) and subject to paragraphs (5) and (6), each employee working directly with children attending the service holds at least a major award in Early childhood Care and Education at Level 5 on the National Qualifications Framework or a qualification deemed by the Minister to be equivalent.*

### Compliance Information

- (1)
- (a) There was a designated person in charge assigned to the service and three named deputies had been identified, to deputise as required.
- (b) One of the registered providers was on the premises when the inspection commenced. The second registered provider arrived within half an hour and remained for the duration of the inspection. Examination of the staff roster indicated that either a registered provider or one of the deputies, were on duty during the hours of operation.
- (c) There was a clear management structure in the service and they had identified the specific roles and responsibilities of each employee.
- (2) Recruitment records in relation to the 17 adults employed at the setting were reviewed, along with those of the student. The following was noted:
- (a) Of the 36 required written references, 27 had been obtained from past employers and 24 of these references had been validated.
- (b) A further four references on file were from sources other than past employers and had records of validation.
- (c) Garda vetting disclosures had been obtained for all 18 adults. However, the service did not adhere to the re vetting timeframes for one staff member as outlined in the Early Years Inspectorate Regulatory Notice, requiring services to renew Garda vetting every three years. Please refer to the information outlined under Regulation 23 of this report.
- (d) Police vetting was held for 5 of the adults, who had resided in other jurisdictions for periods of 6 consecutive months or longer, while over the age of 18.
- (4) Documentation on file confirmed that 17 of the adults, who were involved in the direct care and education of the children, held a major award in Early Childhood Care and Education, as listed on the National Framework

of Qualifications, or as recognised by the Department of Children, Equality, Disability, Integration and Youth (DCEDIY). Two additional adults were in possession of a Letter of Eligibility to Practice.

### Non-Compliance Information

(2)(a)(b)

Five written and validated references were unavailable for three adults.

Three records of validation were unavailable for a further three references, in respect of three adults.

(d)

The required police vetting was unavailable for one staff member, who had lived outside the State for a period that exceeded six consecutive months, as an adult.

### Corrective & Preventive Action submitted by the Registered Provider

#### **Corrective and Preventive Action**

(2)(a)(b)

The written response stated that the references are now in place for these staff and that validations have been completed for the three adults. When new staff members begin at the service, it will be ensured that all references are checked. Management will take responsibility for this.

(d)

The registered providers stated that a response via email is awaited regarding the police vetting.

#### **Supporting documentation submitted**

(2)(a)(b)

Five written and validated references in respect of the three adults and a further three records of validation.

(d)

Screen shots of the emails sent by the adult to various organisations, in relation to obtaining the police vetting.

### Summary Comment

Based on the statements and evidence submitted by the registered providers, part (2)(a)(b) has been addressed. Part (2)(d) remains outstanding and will be assessed at the next inspection.

### Part III – Management and Staff

#### Regulation 11 - Staffing levels

- (1) Subject to this Regulation, a registered provider shall ensure that there is at all times an adequate number of adults working directly with the children attending the pre-school service.
- (2) Subject to paragraphs (4) and (5), a registered provider of a full day care service or a part-time day care service shall ensure that at all times the minimum ratio of adults to children specified in column (3) of Part 1 of Schedule 6 opposite a particular reference number specified in column (1) of that Part in respect of the age range of the children specified in column (2) thereof at that reference number is satisfied.
- (8) Without prejudice to paragraphs (2) to (7)-
- (a) a registered provider of a pre-school service other than a child-minding service or a sessional pre-school service shall ensure that there are at least 2 adults on the premises at all times,

#### Compliance Information

(1) A sufficient number of adults were observed to be available to the children throughout the period of inspection.

(2) The requirements of the regulation were adhered to. The rooms were in operation as follows:

Morning:

Room Name and Age Range of Children	Number of Children Present	Number of Adults Present
Room 3 (3 - 5 years)	3	2
Room 4 (3 - 5 years)	7	2
Room 5 (2 - 3 years)	11	2

Room 1 and Room 2 were not in operation on the morning of the inspection.

Afternoon:

Room Name and Age Range of Children	Number of Children Present	Number of Adults Present
Room 1 (2 - 3 years)	1	1

Room 4 (2 - 5 years)	9 (including children from Room 3 and Room 5)	3
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Five school age children were also in attendance in Room 4 during the afternoon.

- (8)
- (a) It was observed in practice and demonstrated through review of the staff roster that the service was operated with at least two adults present at all times.

### Part IV – Information and Records

#### Regulation 15 – Record of pre-school child

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

- (a) the name and date of birth of the child;*
- (b) the date on which the child first attended the service;*
- (c) the date on which the child ceased to attend the service;*
- (d) the name and address of a parent or guardian of the child and a telephone number where that parent or guardian or a relative or friend of the child can be contacted during the hours of operation of the service;*
- (e) authorisation for the collection of the child;*
- (f) details of any illness, disability, allergy or special need of the child, together with all the information relevant to the provision of special care or attention;*
- (g) the name and telephone number of the child's registered medical practitioner;*
- (h) record of immunisations, if any, received by the child;*
- (i) written parental consent for appropriate medical treatment of the child in the event of an emergency.*

#### Compliance Information

A sample of 10 registration forms of children enrolled at the service were reviewed, as part of the inspection process:

- (1) The required information, as detailed under parts (a) (c) (d) (e) (f) (g) and (i) of this regulation, were maintained in writing in respect of each child attending the service.

## Non-Compliance Information

(1)(b)

The information regarding when a child first attended the service was not available on the 10 forms reviewed.

(h)

Information regarding the child's immunisation status was unavailable on two of the records sampled.

## Corrective & Preventive Action submitted by the Registered Provider

### Corrective and Preventive Action

(1)

(b) The written reply stated that start dates have been added to the service's application forms. This new application form will eliminate the problem and prevent reoccurrence.

(h) An email request has been sent to the child's parents in relation to the immunisation records. It will be ensured that all records are received before children commence attending.

### Supporting documentation submitted

(1)

(b) A copy of the registration form, which now includes provision to record the children's start dates.

(h) A copy of the email sent to parents.

## Summary Comment

The response from the registered providers is accepted in meeting the requirements of the regulation.

### Part V – Care of Child in Pre-school Service

#### Regulation 19 – Health, welfare and development of child

(1) A registered provider shall, in providing a pre-school service, ensure that-

(a) each child's learning, development and well-being is facilitated within the daily life of the pre-school service through the provision of the appropriate activities, interaction, materials and equipment, having regard to the age and stage of development of the child, and

#### Compliance Information

(1)(a)

##### Basic needs:

- Snack time was facilitated at 11.40am in Room 3 and at 11.55am in Room 5. This was followed by lunch at 2.15pm, as observed in Room 4. These mealtimes were noted to take place in relaxed, slow paced environments, with an emphasis on social interaction.
- Children were encouraged to try to open food packaging and containers by themselves, where appropriate and the adults were also available to assist, as required.
- The children's water bottles were stored in low-level fridges, in Rooms 4 and 5. In Room 3, the children's drinks were visible at their eye level.
- Nappy changing was observed to occur regularly in the younger care room. This care routine was managed in a sensitive manner, as the adult chatted warmly to the children. Where sanitary facilities were located adjoining the care rooms, children could freely access and use these areas as needed.
- A comfortable rest area was readily accessible in Room 3, for any child who may wish to avail of a quiet space to relax.
- The layout of the care rooms supported the children's need for mobility during play and exploration. Time in the outdoor area was also facilitated, which allowed for participation in more active pursuits.

#### Non-Compliance Information

The rest areas in Rooms 4 and 5 were under furnished and required further development in order to adequately meet the children's need for rest and relaxation:

- In Room 4, a staff member advised that the large floor mat in the centre of the room was available if a child needed to rest. However, this was insufficient and while a supply of round vinyl cushions was also available, these cushions were stored on a high-level shelf and were inaccessible to the children.
- Four cushions were provided on the floor of Room 5. However, no additional furnishings or books were available to create an inviting rest area for the children.

### Corrective & Preventive Action submitted by the Registered Provider

#### Corrective and Preventive Action

In their written response, the registered providers stated that new soft furnishings have been purchased to create a space for rest. A library has been created in Room 5. When preparing preschool classrooms for the new school year, staff will ensure that each classroom has an appropriate rest area.

#### Supporting documentation submitted

Photographic evidence.

#### Summary Comment

The corrective action implemented by the registered providers has addressed the non-compliance identified under Regulation 19.

### Part V - Care of Child in Pre-school Service

#### Regulation 22 – Food and drink

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

#### Compliance Information

- The children's parents and caregivers supplied the food for their meals breaks.
- Examples of the snacks provided included sandwiches, crackers, rice cakes, yogurt, cheese and a variety of fruit. Hot lunch meals included pizza and pasta with pesto and cheese. Water was available as a drink.
- During conversation with a staff member, the inspector was informed that if a child expressed that they were hungry outside of the routine mealtimes, they could choose something to eat from their lunch box.

#### Non-Compliance Information

It was noted that one of the children who attended the service for longer than five hours, was not provided with a hot meal, as required. At lunch time, the child's snack consisted of rice cakes, with yogurt and fruit.

### Corrective & Preventive Action submitted by the Registered Provider

#### Corrective and Preventive Action

An email was sent to the parent of the child, explaining the requirement for a hot meal. Going forward, the service will inform parents that if their child stays longer than five hours, a hot meal will need to be provided and if not, an email will be sent.

## Supporting documentation submitted

A copy of the email correspondence to and from the child's parent.

## Summary Comment

Following the corrective action implemented by the registered providers, regulatory compliance is determined to have been met.

## Part VI - Safety

### Regulation 23 - Safeguarding health, safety and welfare of child

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

## Compliance Information

### General safety:

- The door that provided access the service remained secure when not in use, including when the inspectors arrived to undertake the unannounced inspection. This safety measure reduced the risk of unauthorised access and the risk of a child exiting the service unsupervised.
- A safe enclosure was created around the perimeter of the outdoor play environment, through a combination of fencing and secured gates.
- Cleaning agents were stored at a height that was inaccessible to children.
- Cables and flexes from electric equipment were maintained out of the children's reach.
- First aid cabinets were wall mounted, above child level.
- Firefighting equipment was secured.

### Infection control:

- Suitable handwashing and drying facilities were available in the children's and adults' sanitary facilities, including warm running water, liquid soap and disposable paper towels. Foot pedal operated bins were also in use. The children were noted to wash their hands before the mid-morning snack.
- During an observed nappy changing procedure, the following practices reduced the risk of cross infection:
  - Disposable gloves and a single use apron were worn by the adult
  - The nappy changing mat was sanitised after use

- The adult washed their hands after removing the apron and gloves
- The child was supported to wash their hands, after having their nappy changed.
- The children’s perishables foods were stored in refrigerators, which minimised the risk of food spoilage.
- There was appropriate storage for the children’s bags, coats and personal belongings. Individual wall hooks were provided.
- Cleaning records were displayed in the care rooms and sanitary areas and were completed to date.
- Individually labelled storage boxes were used to store the children’s nappies, wipes and barrier creams.

**Administration of medication:**

- The administration of medication to a child was not observed during the inspection.
- Medication that may be required by children during their attendance was found to be stored at a high-level, or in the main office. The medication was also in-date.

**Safe sleep:**

- One of the children was observed to sleep during the inspection.
- A stackable bed and linen were provided for the child, who was aged over two years.
- An adult was noted to remain in the care room, to supervise the child as they slept.

**Fire safety:**

- Fire exits were found to be unobstructed.

**Outing:**

- The inspectors were informed that outings from the service were not conducted.

**Non-Compliance Information**

**General safety:**

The Garda vetting disclosure available for one of the adults was not dated within the previous three years, in adherence to the Early Years Inspectorate Regulatory Notice, ‘EYI-RN12.3 Renewal of Garda Vetting’.

**Action submitted by the Registered Provider**

**Corrective & Preventive Action**

The Garda vetting has been obtained. As a preventive measure, management will carry out yearly checks on Garda vetting.

**Supporting documentation submitted**

A copy of the updated Garda vetting.

### Summary Comment

The corrective action implemented by the registered providers has addressed the non-compliance identified under Regulation 23.

### Part VI - Safety

#### Regulation 25 - First aid

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

#### Compliance Information

(1) Three staff members who worked at the service held current First Aid Responder (FAR) certification.

#### Non-Compliance Information

(1) Review of the staff roster demonstrated that there were periods during the hours of operation when a FAR qualified adult was unavailable at the setting. For example, in the afternoons from 4.00pm to 5.30pm, on the week beginning 10 February 2025.

It was acknowledged that two of the adults who worked with the early years children held up to date paediatric first aid training. However, an adult with current FAR certification is required to be available to the children at all times.

#### Corrective & Preventive Action submitted by the Registered Provider

##### Corrective and Preventive Action

The written response stated that the staff roster has been adjusted to ensure that FAR certified staff are available, during opening hours. When creating the weekly roster, management will ensure that there is a FAR certified staff member in the building at all times.

##### Supporting documentation submitted

A copy of the staff roster.

### Summary Comment

Following the corrective action implemented by the registered providers, regulatory compliance is determined to have been met.

### Part VI - Safety

#### Regulation 26 - Fire safety measures

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

#### Compliance Information

- (1)
- (a) The fire drills which had been previously undertaken at the service were recorded and maintained on file, with the most recent fire drill dated 27 January 2025.
  - (b) The number and type of the available firefighting equipment were listed. According to the maintenance records, the firefighting equipment was last checked on 2 July 2024.
  - (4) Fire evacuation notices were clearly visible in each of the care rooms.

#### Non-Compliance Information

- (1)
- (b) A record of servicing, dated within the previous 12 months, was unavailable for the smoke alarm. This is required to ensure efficient functioning. The most recent maintenance record for the smoke alarm was dated 4 May 2023.

#### Corrective & Preventive Action submitted by the Registered Provider

##### Corrective and Preventive Action

The smoke alarms have been checked and serviced. The relevant company that carries out the testing has scheduled the service in for yearly/monthly checks going forward.

##### Supporting documentation submitted

A copy of the certificate of servicing for the smoke alarm system.

#### Summary Comment

The response and evidence submitted by the registered providers are accepted in meeting the regulatory requirements.