

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015CC341
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Name of Service:	Réaltaí Cúram Leanaí Teoranta
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Address of Service:	Fernwood, Glyntown, Glanmire, Co. Cork
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Eircode:	T45 CK26
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Name of Registered Provider:	Glenn Muliett
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Service type:	Full Day
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Dates of Inspection:	01/05/2024
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Date 2 of Inspection:	02/05/2024
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No of pre-school children:	AM	73	PM	50
Day 2	AM	71	PM	N/A

Address of the Early Years Inspectorate:	Early Years Inspectorate Administration Building St Mary's Health Campus Gurrabraher Cork
Inspection undertaken by:	D Prendergast
Title:	Early Years Inspector

Authority to Inspect

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

Conditions if applicable

N/A

Description of service

Réaltaí Cúram Leanaí Teoranta is a privately owned, full day care service, that is registered to accommodate children aged 0 to 6 years. This includes children attending the Early Childhood Care and Education (ECCE) Scheme, which is facilitated over 38 weeks of the year. Three daily sessional services are provided; from 8.45am to 11.45am, from 9.00am to 12.00pm and from 9.15am to 12.15pm. The childcare facility is open between 7.30am and 6.00pm, each Monday to Friday, over 51 weeks of the year. A registered school age service is also available.

Located in a residential area of Glanmire in Co. Cork, the service operates from a single storey, detached building. There are four rooms in operation; Naíonra 1, Naíonra 2, Naíonra 3 and the Toddler room, each with adjoining children's sanitary facilities. A fifth registered care room remains in use as a meeting room. The premises also includes a designated sleep room, an office, a kitchen, a staff room, a laundry room and staff sanitary facilities. The children have the use of two outdoor play spaces, one of which has been partitioned for use by the various care rooms.

Staffing

There are 22 adults employed at the setting, including the registered provider, who does not work directly with the children. Eighteen of the staff members are involved in the direct care of the children, including two adults employed under the Access and Inclusion Model (AIM) support scheme. Two kitchen staff and a maintenance worker/driver do not work directly with the children who attend the service.

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.

Additional Information

During the onsite inspection on 2 May 2024, an Immediate Action Notice (IAN) was issued to the deputy manager, under regulation 23, in relation to the non-compliance identified under regulation 25. A response to the IAN was received on 3 May 2024 and deemed to mitigate the risk.

Acknowledgments

The inspector wishes to acknowledge the cooperation of the registered provider, manager, deputy manager, staff and children who were present over the two days 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
- (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) The registered provider was the named person in charge at the service. The manager, deputy manager and the room leaders had been appointed to deputise, as needed. This information was noted on the staff roster.
- (b) When the unannounced inspection commenced on 1 May 2024, the registered provider was working at the childcare facility. Thereafter, either the manager or deputy manager was available to facilitate the inspection.
- (2) Recruitment records in relation to the 22 adults who worked at the setting were the subject of the inspection.
- (a) Thirty-six of the 44 required written and validated references on file were from past employers.
- (b) A further eight of the required references had been provided by sources other than previous employers and had been appropriately validated.
- (c) Garda vetting disclosures were in place for all 22 staff members. However, the service did not adhere to the re-vetting timeframes 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 deemed to be required for 12 of the adults and copies of the relevant documents were maintained on file. Translations of the documents into English were also in place, where required.
- (4) Records demonstrated that 17 of the 18 adults, who worked directly with 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).

Non-Compliance Information

- (1)
- (b) The staff roster demonstrated that there were periods during the service's operational hours whereby neither the person in charge nor one of the deputies were present. For example, the roster for the current week evidenced three mornings where this was the case from 7.30am until 8.05am and the previous week's roster indicated two further periods in the mornings, during which neither the person in charge nor a deputy were on duty.
- (4) Evidence was unavailable to demonstrate that one of the adults who worked directly with children held a recognised award in Early Childhood Care and Education, as listed on the National Framework of Qualifications.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

- (1)
- (b) The response received stated that the staff roster has now been corrected and persons in charge are rostered to cover from 7:30 to 18:00. Going forward, persons in charge will be rostered correctly.
- (4) Within the national system of the country where said qualification was undertaken, a certificate is not granted until the following year after graduation. A receipt was issued and this is on file. Evidence of course completion is also on file. The award will be issued in June 2024.

Supporting documentation submitted

- (1)(b)
- A copy of the staff roster, demonstrating that either the person in charge or one of the deputies are rostered to work at the service throughout the hours of operation.
- (4)
- A copy of the document confirming the attainment of a recognised qualification, along with a translation into English.

Summary Comment

The response and evidence submitted were deemed to meet regulatory compliance with regulation 9.

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) It was observed that there was an adequate number of adults responsible for the direct care and supervision of the children in attendance.

(2) Correct adult to child ratios were observed in all care rooms on the first morning of inspection, as follows:

Room Name and Age Range of Children	Number of Children Present	Number of Adults Present
Naíonra 1 (2 – 3 ½ years)	19 (mixed ECCE and full day care)	3
Naíonra 2 (3 – 4 ½ years)	15 attending ECCE	2
Naíonra 3 (4 – 5 years)	20 attending ECCE	3
Toddler (1 – 2 ½ years)	18 attending part time or full day care	5

In the afternoon, the overall adult to child ratio met the requirements of the regulation, as follows:

Room Name and Age Range of Children	Number of Children Present	Number of Adults Present
Naíonra 1 (2 – 3 ½ years)	12 attending part time or full day care	2
Naíonra 3 (3 – 5 years)	19 attending part time or full day care	2
Toddler (1 – 2 ½ years)	19 attending part time or full day care	4

Naíonra 2 was used to accommodate school aged children in the afternoon.

Sufficient adult to child ratios were also ensured on the second morning of inspection, on 2 May 2024:

Room Name and Age Range of Children	Number of Children Present	Number of Adults Present
Naíonra 1 (2 – 3 ½ years)	15 (mixed ECCE and full day care)	2
Naíonra 2 (3 – 4 years)	20 attending ECCE	2
Naíonra 3 (4 – 5 years)	18 attending ECCE	3
Toddler (1 – 2 ½ years)	18 attending part time or full day care	4

(8)

(a) The service was operated with a minimum of two adults present at all times, as noted at the time of inspection and through review of the staff roster.

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:

- The inspector was advised that up to five daily meal breaks were facilitated at the early years service; breakfast, a mid-morning snack, a hot lunch meal, an afternoon snack and an evening snack. This ensured that there were no gaps longer than two hours in between the children's mealtimes.
- Appropriate assistance with feeding was provided for the younger children in the Toddler room, who were seated in high chairs and wore protective bibs.

- Drinking water was available to the children in their respective care rooms, both during and outside of mealtimes; in the older care rooms, the children's water bottles were stored on level-level shelves or on tables, within their reach and in the Toddler room, the children's water bottles were visible to them on the countertop.
- Staff members were noted to continue the established practice of carrying out nappy changing at regular intervals and as the need arose. The older children could easily access the sanitary facilities that adjoined their care rooms, as needed.
- During discussion, the inspector was informed that while most of the children who attended the Toddler room availed of an afternoon rest period, additional, needs led sleep was also accommodated.
- Rest areas within the care rooms allowed children to relax and opt out of scheduled activities, as necessary.
- Adult sized chairs were available in Naíonra 1 and the Toddler room, which supported staff to comfortably care for and soothe the younger children.
- The children were observed to have sufficient space within their indoor environments to move freely and engage in their chosen tasks. More active play and games took place outdoors. As one of the outdoor play spaces was partially sheltered, it allowed for outdoor play during wet weather conditions, as was observed on the second day of inspection.

Supporting relationships around children:

- The time designated for eating and drinking was observed to be a relaxed and social part of the daily routine; the children chatted freely with their peers and appeared to really enjoy their food.
- Parents and guardians were welcome to enter the premises and drop and collect children from the care rooms. It was noted that this opportunity was used for informal discussion between staff members and parents.
- Care room environments were observed to be active and engaging, as the children confidently followed routine activities, such as adult lead story time, singing and preparing to go outdoors.

Non-Compliance Information

Supporting relationships around children:

In the Toddler room sanitary facility, privacy for children was not consistently ensured during nappy changing procedures and toileting. It was noted that, on one occasion, three children and two staff members were in this sanitary facility at the same time, with no partitions in place to ensure the children's privacy.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The response outlined that one child will use the toilet at any given time and if children are being changed at the same time, a partition can be pulled into place for privacy, when the child is toileting. A second partition between the two changing stations will be erected for privacy while children are being changed.

Supporting documentation submitted

The response stated that the partitions will be in place within two weeks of 29 May 2024.

Summary Comment

The installation of the partitions is awaited and will be viewed at the next inspection.

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:

- Entry to the service was via an electronic keypad, located immediately alongside the main entrance door, with a doorbell in use for visitors. Exit through the same door was controlled by a door release button, which was located at adult height. These safety mechanisms ensured that the risk of unauthorised access and the risk of a child exiting the premises while unsupervised, were minimised.
- The outdoor play areas were secured by a combination of walls, fencing and secured gates.

- Visibility markings were provided on glass panel doors at child height, which reduced the risk of a child sustaining a collision injury.
- Safety clips were in place to anchor blind cords in the care rooms.
- High level wall hooks were used to store first aid boxes out of the children's reach.
- Low-level cupboards were fitted with restrictive opening devices, which reduced the likelihood of a child coming into contact with potentially harmful materials.
- Firefighting equipment was securely wall mounted.
- There were no cables or trailing flexes accessible to the younger children, in the Toddler room.

Infection Control:

- Suitable handwashing and drying facilities were available in the children's sanitary facilities, including warm running water, liquid soap, disposable paper towels and lidded, pedal-operated bins. The children were noted to wash their hands before the mid-morning snack and after using the sanitary facilities.
- Adults who carried out nappy changing were observed to wear single use aprons and gloves during nappy changing procedures, which were changed in between each use. Staff were also noted to wash their hands after changing nappies and sanitised the changing mat.
- The children's nappies, wipes and barrier creams were maintained in clearly labelled, individual containers, within the nappy changing areas.
- Pedal operated nappy disposal bins were in place.
- A combination of clothes hangers and wall hooks were used to store the children's coats, above floor level.
- Open windows across the care rooms ensured a supply of natural ventilation.

Administration of Medication:

- Medication was not observed to be administered to a child during the period of inspection.
- In all care rooms, prescribed medication was noted to be safely stored in areas that were inaccessible to children. All of said medication was labelled with the children's names and was in-date.

Safe Sleep:

- Staff members used a digital application to record the children's breathing, colour and position, while they slept. The inspector was advised that these checks were undertaken at 10-minute intervals and this was confirmed through review of recent sleep logs.
- The air temperatures in the Toddler sleep room and in the Toddler care room, which was used for sleep, both fell within the recommended range of 18°C to 22°C, for children aged over 12 months.

While occupied by sleeping children, the air temperature of the sleep room was recorded at 19.4°C, while the air temperature of the Toddler care room was recorded at 20.3°C.

Fire Safety:

- Fire exits were noted to be free from obstruction.

Outing:

- Not applicable, as an outing did not take place.

Non-Compliance Information

General Safety:

1. 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'.

Infection Control:

2. Following an observed nappy changing procedure, in the Toddler sanitary facility, it was noted that the child's hands were not washed, which posed a risk of cross infection. This was also found at the previous inspection on 3 July 2023. The CAPA response submitted at the time stated that staff members had been informed in relation to handwashing and that notices had been placed in the rooms. It was acknowledged that a new nappy changing infographic had been created and was displayed, however, the lack of handwashing by children remained an issue.

Action submitted by the Registered Provider

Corrective & Preventive Action

General safety:

1. The response stated that Garda vetting has been obtained for the staff member. As a preventive measure, management will pay attention to all Garda vetting dates and will renew within three years.

Infection control:

2. The written response outlined that staff have again been informed of the proper hand washing procedure after toileting and nappy changes and that all staff will be notified again at the next staff meeting.

Supporting documentation submitted

General safety:

A copy of the updated Garda vetting in respect of the staff member was forwarded.

Infection control:

The statement submitted is accepted as evidence.

Summary Comment

The corrective actions implemented have addressed the non-compliances 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.
- (2) A registered provider shall ensure that a suitably equipped first aid box for children-
- (a) is safely stored in an easily accessible and conspicuous position on the premises, and
 - (b) is available to the children attending the pre-school service at all times.

Compliance Information

- (2)
- (a) First aid boxes were accessible to the adults in each of the care rooms and in various other locations. Additional first aid supplies were stored in the office. Overall, adequate supplies were maintained.
 - (b) The first aid supplies were consistently available, should they be required for use.

Non-Compliance Information

- (1) While two of the staff members held current First Aid Response (FAR) certification, review of the service's staff roster and discussion with the service manager, demonstrated that an adult with FAR training was not available to the children at all times, as required. It was also established that there were periods of time during the hours of operation, when no staff member with first aid training was available. This posed a risk of safety to children, should first aid be required. On 2 May 2024, an Immediate Action Notice was issued to the deputy manager under regulation 23 – Safeguarding health, safety and welfare of child in relation to this non-compliance.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The response stated that FAR training has been arranged for eight staff members and will take place on the 8th, 9th and 16th of June. Going forward, all staff will be required to complete FAR/paediatric first aid, as needed.

Supporting documentation submitted

Email correspondence in relation to the booking of the FAR training course was forwarded.

Summary Comment

As the FAR training for additional staff members is yet to be completed, this remains outstanding. FAR certification will be reviewed at the next inspection.

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)
- (b) Lists of the number and type of firefighting equipment and smoke alarms available in the service were documented. The firefighting equipment had been serviced on 18 May 2023 and was also serviced on 1 May 2024, during the inspection. The most recent record of maintenance for the smoke alarm outlined that it was last tested on 28 March 2024.
- (4) The service's fire evacuation procedure, which contained details in relation to the steps to be followed in the event of a fire, was displayed in most of the care rooms and the fire evacuation plan was clearly visible at the entrance of the service.

Non-Compliance Information

- (1)
- (a) The last recorded fire drill was noted to have taken place on 31 January 2024. Fire drills should be conducted on a monthly basis, to ensure that children and staff members are familiar with safe fire evacuation procedures.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The written reply stated that a fire drill was carried out on 3 May 2024, to familiarise staff and children with the fire evacuation procedure. Going forward, fire drills will be completed on a monthly basis.

Supporting documentation submitted

The statement submitted is accepted as evidence.

Summary Comment

Based on the statement submitted, regulatory compliance is determined to have been met.

Part VI - Safety

Regulation 28 - Insurance

A registered provider shall ensure that the pre-school service is adequately insured.

Compliance Information

Adequate insurance was noted to be in place. The service was covered to provide full day care and the policy was valid until 27 March 2025.

Part VII - Premises and Space Requirements

Regulation 29 - Premises

A registered provider shall ensure that the premises of the service are-
(e) equipped with adequate and suitable sanitary facilities.

Compliance Information

(e) Seven toilets and 10 wash hand basins were available for the children's use, along with 3 nappy changing stations. An extra wash hand basin was also provided in the Toddler sanitary facility.

Non-Compliance Information

(e) The inspector was advised that one of the three staff toilets required repair, due to a leak and was unavailable for use. A sign to this effect was displayed on the door of the sanitary facility.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The written response advised that the leak has been repaired and that the toilet is in use again. Going forward, repairs will be ensured in a timely manner.

Supporting documentation submitted

A receipt for the part purchased to repair the toilet, was forwarded as evidence.

Summary Comment

The response submitted is accepted in meeting the regulatory requirements.