

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2015DR008		
<b>Name of Service:</b>	Discoveries Creche & Montessori		
<b>Address of Service:</b>	Olcovar Shankill Dublin 18		
<b>Eircode:</b>	D18 W2X2		
<b>Name of Registered Provider:</b>	Liz Mahon and Lena O'Sullivan		
<b>Service type:</b>	Full Day, Part Time, Sessional		
<b>Date of Inspection:</b>	14/03/2024		
<b>No of pre-school children:</b>	AM	48	PM 47
<b>Address of the Early Years Inspectorate:</b>	Early Years Inspectorate, Tusla Child and Family Agency, Loughlinstown Health Centre, Loughlinstown, County Dublin.		
<b>Inspection undertaken by:</b>	Olivia Quill and Sarah Quigley		
<b>Title:</b>	Early Years Inspectors		

### 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>	Not applicable
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### Description of service

Discoveries Creche & Montessori is a private childcare facility and is one of three services owned and operated by the registered providers. The service is registered to provide full and part-time day care and education for pre-school children aged from 0-6 years. It operates Monday to Friday between the hours of 07:30 -18:30. There are three care rooms available for the pre-school children; Baby room (11 months - 17 months), Playgroup room (18 months – 2 years 8 months), and the Montessori room (2 years 8 months - 5 years). A separate sleep room is provided for the babies. The early years service is located at ground floor level and operates from a purpose-built premises within an apartment complex in an urban residential area in Shankill County Dublin. An outdoor play area is available for the children to the rear of the premises.

### Staffing

In total twenty-two adults are employed in the service including a cook and domestic worker. On the 14 March 2024 eleven adults were working directly with the children. The designated manager and deputy manager were available to provide assistance as required. One student was present on a work placement. The registered providers arrived during the inspection.

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 and safety. The inspection may also focus on other areas as required.

The inspection focused on an examination of compliance under regulations.

Regulation 9 (2) & (4) – Management and Recruitment

Regulation 11 (1) & (2) – Staffing Levels

Regulation 19 (1)(b) – Health Welfare and Development of Child

Regulation 23 – Safety

However, on inspection additional non-compliance was identified under Regulation 8 Notification of change in circumstance, Regulation 9 (3) Management and Recruitment and Regulation 29 (c) Premises. These findings are outlined within the relevant regulations within this report.

A sampling process was used to assess compliance under regulation 15(1)(i) and (3) (c) Record of a pre-school child.

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

### Immediate Action Notice

Regulation 9 (2)(c): An Immediate Action notice was issued on 14 March 2024 as a mandatory Garda vetting disclosure was not available for one staff member contrary to the National Vetting Bureau (Children and Vulnerable Persons) Act 2012. The registered provider submitted a response on 14 March 2024 which was deemed to satisfactory to address this non-compliance.

### Acknowledgments

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

## Part II - Registration and Register

### Regulation 8 - Notification of change in circumstances

*(1) A registered provider of a pre-school service other than a temporary pre-school service shall, subject to paragraph (3), notify the Agency in writing of any proposed change in the details in relation to the pre-school service contained in the register pursuant to section 58C (2) of the Act or Regulation 7(2) at least 60 days before it is proposed that the change would take effect.*

### Non-Compliance Information

(1) The service is registered to cater for forty-seven children and forty-eight children were present on inspection. The registered providers did not notify the Agency in writing of any proposed change in details in relation to the pre-school service.

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

#### Corrective and Preventive Action

(1) The registered providers have submitted a proposed Change in Circumstances (CIC). A review of our Tusla registration has been completed.

#### Supporting documentation submitted

Copy of CIC form submitted.

### Summary Comment

The corrective actions as stated by the registered providers has addressed the non-compliance. The Regulatory requirement has been met.

### Part III – Management and Staff

#### Regulation 9 – Management and recruitment

*(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.*

*(3) The procedures specified in paragraph (2) shall be carried out prior to any person being appointed, assigned or allowed access to or contact with a child attending the pre-school service.*

*(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

(2)

(a) & (b) Past employer references with a record of verification were available for nineteen adults.

(c) Garda vetting disclosures from the National Vetting Bureau of An Garda Síochána were available for twenty-one adults employed in the service. These were dated within the previous three years in adherence to the Early Years Inspectorate Regulatory Notice ‘EYI-RN12.3 Renewal of Garda Vetting’.

(d) International police vetting was available for nine staff members who had lived in another state as adults for more than six consecutive months.

(4) Seventeen adults held awards in Early Childhood Care and Education at a minimum Level 5 on the National Framework of Qualifications or a qualification deemed by the Minister to be equivalent.

### Non-Compliance Information

A number of issues were identified with how the service manages safer recruitment processes as detailed below:

(2)(a), (b) There were no validated references available for one adult. Two adults did not have a second validated reference available.

- (c)
- A Garda vetting disclosure was not available for one adult who had commenced working in the service on 1 March 2024 contrary to the National Vetting Bureau (Children and Vulnerable Persons) Act 2012. This regulation was non-compliant on a previous inspection dated 9 January 2023. The actions subsequently submitted by the registered providers had not been effective in preventing the recurrence. An Immediate Action notice was issued on 14 March 2024 due to the risk posed. The registered providers submitted a response on 14 March 2024 which was deemed satisfactory.
  - While it is acknowledged Garda vetting was available for two other adults employed in the service. The Garda vetting disclosure available for one of these adults had not been completed by the registered providers and the Garda vetting disclosure available for second adult was not dated within the previous three years in adherence to the Early Years Inspectorate Regulatory Notice 'EYI-RN12.3 Renewal of Garda Vetting'.

(d) Police vetting was not available for one adult who had lived outside the state for a period of longer than six consecutive months as an adult.

(3) The registered providers did not take appropriate measures to ensure that all adults were suitable to work in an early years service prior to their commencement as detailed under (2)(a), (b), (c) and (d).

(4) There was no evidence available to show two adults who had been employed since the last inspection to work directly with the children in the service held a relevant major award in Early Childhood Care and Education on the National Framework of Qualifications.

## Corrective & Preventive Action submitted by the Registered Provider

### Corrective and Preventive Action

(2)(a), (b) Management have ensured and can verify that there are now 2 validated references in place for each staff member. Our “Recruitment & Garda Vetting” policy has been updated.

(c) Immediate action was taken to rectify the issue that there was no Garda vetting available for a staff member. This person left the premises at 14:00 and did not return until Friday April 2<sup>nd</sup> when a copy of the completed Garda vetting was received. Our “Recruitment & Garda Vetting” policy has been updated. A list of staff and when renewed vetting is required has been compiled.

(d) The process for police vetting is underway. Our “Recruitment & Garda Vetting” policy has been updated –to ensure that there is a checklist (please see page 12) for all documents required, and to allow for ease of access. The registered providers have now employed an admin person to help manage some of the paperwork.

(3) Managers have reviewed policy and all other staff files have been checked for compliance.

(4) Only employees who have attained the necessary early years qualifications will work directly with children. The Managers acknowledge on the day of the inspection our staff files and office were in disarray, however we kindly confirm that the documentation was in the office, but not stored correctly in staff files. Qualifications for all staff working with children are now present and available in staff files.

### Supporting documentation submitted

Written evidence.

## Summary Comment

The corrective and preventive actions as stated by the registered provider have addressed the non-compliance. The regulatory requirement has been met.

## 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) An adequate number of adults were working directly with the children at all times during the inspection.

(2) The minimum ratio of adults to children for full day care services was adhered to at all times during the inspection. There were forty-eight children attending the service being supervised by eleven adults on the day of inspection.

(8)(a) There were two adults on the premises 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.

(3) A record in writing referred to in paragraph (1) or (2) shall be open to inspection on the premises by-

- (c) an authorised person.

#### Compliance Information

(1) A sample of ten records were reviewed for children who were attending the service. The records reviewed contained the following information:

- (a) The name and date of birth of each child.
- (c) There was an area on the registration form where the date when a child would cease to attend the service will be recorded.
- (d) The names, addresses and telephone number of parents were recorded and information where parents can be contacted during the hours of operation of the service were also available.
- (e) There was authorisation for the collection of the child.
- (f) The record available supported the recording of any illness, disability, allergy or special need of the child.

- (g) The name and telephone number of each child’s medical practitioner was recorded.
  - (i) There was written consent for appropriate medical treatment of a child in the event of an emergency.
- (3) (c) A record in writing referred to in paragraph (1) was open to inspection on the premises by the inspectors.

## Non-Compliance Information

- (1)
- (b) Three files reviewed did not include the date on which the child first attended the service.
- (h) Four files reviewed had no record of immunisations, if any, received.

## Corrective & Preventive Action submitted by the Registered Provider

### Corrective and Preventive Action

- (1)
- (b) The child’s start date was included on our Child paths app; however, the registered providers acknowledge that this was not on the hard copy of the registration form. All children’s registration forms are under review to ensure that all sections of the registration form are complete, including the start date. The Settling In Policy” has been updated to include a checklist of paperwork that must be present in all children’s files before the child begins their settling in.
- (h) Children’s files are under review to ensure that all copies of immunisation records are present. Parents are currently updating us by email.

### Supporting documentation submitted

Written evidence.

## Summary Comment

The corrective and preventive actions as stated by the registered provider have addressed the non-compliance. The regulatory requirement has been met.

### 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-*

*(b) appropriate and suitable care practices are in place in the pre-school service, having regard to the number of children attending the service and the nature of their needs.*

#### Compliance Information

(1)(b)

The service had a healthy eating policy in place and meals were provided at regular intervals. Staff reported that all snacks and a hot lunch are prepared daily in the service by the cook. Children were served lamb rogan josh rice and naan bread for lunch. Children were offered water to drink with their meal. Bibs were provided for younger children at dinnertime. In the Baby room children were supported to feed themselves and staff provided assistance as required. Suitable cutlery was provided. Staff were observed sitting and eating with children in the Montessori room during their main meal.

Children's care needs were met promptly. Staff in the Baby room and Playgroup room were observed supporting children to clean their faces after dinner. In the Montessori room children were encouraged and observed to use the toilet independently while being supervised by staff. Younger children's nappies were changed regularly or as needed. Staff interacted warmly with the children in their care throughout the inspection and were observed supporting children in their play. Children's choices were respected with children being given the opportunity to choose their own activities during free play.

Care rooms were arranged into defined areas of interest providing children with the freedom to play and explore. Designated areas of interest included musical instruments, small world toys, dress up areas, construction toys, art materials, chalkboards, rest areas with books and home corners. The care rooms facilitated a range of developmentally appropriate play experiences for the children and were adequately resourced with a variety of materials. The materials were observed to be accessible to the children on low level shelving provided.

The outdoor play area was directly accessible from each care room. Play equipment in these areas included ride on toys, push along toys, a climbing frame and slide. Children from Montessori room were observed accessing the outdoor play area on the day of inspection. The children were suitably dressed in waterproof overall clothing.

## 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 entrance to the service was safely secured to prevent unauthorised access and to prevent children leaving unsupervised.
- All toys and play equipment was safe for the age group using them and in good condition.
- The kitchen was not accessible and cleaning agents were stored safely out of reach of children.
- fire exits were unobstructed.

##### Infection Control:

- Liquid soap, warm water and paper towels were available to facilitate hand washing. Staff were observed to carry out hand washing as appropriate. Children were supported to wash their hands at regular intervals including following outdoor play after using the toilet and before meals.
- Bed linen was laundered weekly and stored appropriately.
- Children's soothers were labelled and stored in individual containers and sterilised as required.

##### Administration of Medication:

- A sample of records of previous medications given were reviewed. The records were completed correctly.
- A Care plan was in place for a child who had a specific allergy. The medication was stored safely and staff were familiar with the care plan.

##### Safe Sleep:

- Children were physically monitored while sleeping and sleep checks were documented every ten minutes. Discussion with staff demonstrated that staff were familiar with safe sleep guidelines.
- The temperature of the sleep room was maintained at the correct temperature for sleep.

## Non-Compliance Information

### Infection Control:

1. Some nappy changing practices observed on the day of inspection in the service were inadequate for infection control purposes. Staff were observed redressing the children while wearing the same soiled gloves used for nappy changing and children's hands were not washed after nappy changing. This regulation was non-compliant on the previous inspection dated 9 January 2023. The actions subsequently submitted by the registered providers had not been effective in preventing the recurrence.
2. In the Baby's sanitary area the bin provided to dispose of nappies was unsuitable, the inside lid of the bin had to be handled posing an infection control risk.
3. In the playgroup room the basket used for the soiled face cloths was on the floor accessible to the children.
4. In the Playgroup room the mat under the sink and the fabric on the adult chair were heavily stained and soiled and required a deep clean.

## Action submitted by the Registered Provider

### Corrective & Preventive Action

#### Infection Control:

1. Management have reviewed and updated our nappy changing policy to ensure clarity and updated our nappy changing display documents to ensure that all steps in the process and the order of the steps is clear. The updated policy has been shared with staff and has been reviewed at a next staff meeting (15/04/24). To support and encourage best practices in nappy changing the following steps will be taken. These are included in our updated Nappy Changing Policy: New employees will be taken through the process by their supervisor. Nappy changing policy and steps will be reviewed at staff meetings. Once every week all team members working in rooms that require nappy changing, including Supervisors and Managers, will be required to;
  - Accompany a team member during one nappy change once a week.
  - Talk the team member changing the nappy through the entire process. That is, the person changing the nappy will purely follow the instructions that the other staff member is narrating.
  - At the end of the nappy change both team members will discuss the process.
  - This will be logged to ensure that all team members partake on a weekly basis.
  - The Managers will be responsible for completing the log.

2. To try and reduce malodours during nappy changing we had sourced the bin in use at the time of the inspection as it was pedal operated, and we had noted that other services had been using them. Management acknowledge that having to handle the bin at all may pose as infection control risk. A new pedal operated bin is now in place.
3. A new quick drop opening, laundry basket has been purchased. The basket has a removable laundry bag. Dirty facecloths will be placed in the basket via the quick drop opening on the top, keeping used face cloths out of sight and out of reach of the children.
4. The sink area in the playgroup room is subject to a lot of traffic and use. The mat at the sink is changed daily. Management have ordered more mats so that it can be changed more than once a day and as needed. The fabric chair has been removed. Management will make sure an adequate number of mats available for changing.

### **Supporting documentation submitted**

Written and photographic evidence.

### **Summary Comment**

The corrective and preventive actions as stated by the registered provider have addressed the non-compliance. The regulatory requirement has been met.

### Part VII - Premises and Space Requirements

#### Regulation 29 - Premises

*A registered provider shall ensure that the premises of the service are-*  
*(c) kept adequately lit, heated and ventilated*

#### Non-Compliance Information

(c) There was a foul odour in the nappy changing area off the playgroup room, Baby room and in toilets used by children from the Montessori room. There was no evidence to demonstrate the ventilation was working. This regulation was non-compliant on the previous inspection dated 9 January 2023. The actions subsequently submitted by the registered providers had not been effective in preventing the recurrence.

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

##### Corrective Action:

(c) Management acknowledges that the malodour in the nappy changing area and the Montessori class toilets have not yet been sufficiently reduced regardless of various options tried.

Management have been discussing the issue with two main companies to see what more effective options are available. Having researched extensively our options have been whittled down. Management are awaiting a quote from the company. This option will require some building work and take longer to implement. This is an ongoing project. Management wants to be sure to install something that works well in removing the odours of these internal rooms.

#### Summary Comment

The corrective and preventive actions as stated by the registered provider once implemented will address the non-compliance. The regulatory requirement has been met. Practice will be reviewed on next inspection.