

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015DR097
--------------------------	-------------

Name of Service:	Bright Beginnings Nursery and Creche
-------------------------	--------------------------------------

Address of Service:	Upper Churchtown Road, Churchtown, Dublin 14, Co. Dublin
----------------------------	--

Eircode:	D14 R2E2
-----------------	----------

Name of Registered Provider:	Deirdre Conroy
-------------------------------------	----------------

Service type:	Full Day
----------------------	----------

Date 1 of Inspection:	18/11/2024
------------------------------	------------

Date 2 of Inspection:	19/11/2024
------------------------------	------------

No of pre-school children:	AM	78	PM	79
Day 2	AM	81	PM	81

Address of the Early Years Inspectorate:	1st floor Trinity Building, IDA Business Park, Southern Cross Road, Bray, Co. Wicklow.
---	--

Inspection undertaken by:	Sarah Quigley, Fiona Carty & Jackie Maycock
----------------------------------	---

Title:	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).

Conditions if applicable	Not applicable
---------------------------------	----------------

Description of service

Bright Beginnings Nursery & Creche is a large full day care service located in a residential area of Churchtown, South County Dublin. Care and education are provided to children aged between one and six years on a full day care basis. Bright Beginnings operates from within a secondary school building, part of which has been purposely adapted to accommodate the early years service. Seven care rooms and three dedicated sleep rooms are available. Three outdoor play areas are located to the front of the premises and available to the children for play. On the day of inspection, all seven care rooms were in operation. The service is currently registered to operate from Monday to Friday between 08:30 and 17:30 hours.

Staffing

The service currently employs twenty-two adults, including the registered provider and a cook. On the first day of inspection twenty-one adults were present. On the second day of inspection twenty-two adults were present. The registered provider was present on both days of inspection.

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 provider, person in charge, staff and children who were present on the day of the inspection.

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) The assessment of documentation under Regulation 9(2)(3)(4) was limited to fourteen staff members who had commenced employment since Regulation 9 was last inspected on the 9th January 2024. Regulation 9(2)(c) was assessed for each of the twenty-two adults working in the service. The following records were available:

(a) (b)

A minimum of two references had been sourced from past employers and from another source where adults had only one or no previous employers. The references had a record of verification checks carried out.

(c) Garda Vetting disclosures were available for each of the twenty-two adults. However, the service did not adhere to the re-vetting timeframes as outlined in the Early Years Inspectorate Regulatory Notice, requiring services to renew Garda vetting every three years in relation to two staff members. Please refer to the information outlined under Regulation 23 of this report.

(d) International police vetting was available for thirteen of the adults who had lived outside the state for a period exceeding six months as an adult.

- (3) Documentation reviewed evidenced that the procedures specified under 9(2) had been carried out prior to the fourteen adults commencing employment in the service.
- (4) There was evidence that thirteen of the staff members had attained at least a major award in Early Childhood Care and Education at Level 5 on the National Framework for Qualifications, or a qualification deemed to be equivalent. One adult who did not hold the required qualification was in possession of a letter of eligibility to practice from the Minister.

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.*

Compliance Information

- (1) An adequate number of adults were working directly with the children throughout the inspection. There were sixteen staff members allocated to work directly with seventy-nine children on the first day of inspection, and seventeen adults working with eighty-one children on the second day. Two centre managers and two floating staff member were available to assist in the care rooms where required on both days of inspection.
- (2) The minimum adult to child ratio requirement was maintained in accordance with the ages and type of service delivered.

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)

Appropriate and suitable care practices were observed to be in place. Meals and snacks were offered to the children regularly throughout the day. Drinks of water were available within the rooms and were offered regularly, including when children were eating. Self-feeding was promoted in younger care rooms and staff assisted children where required. The staff supported the children in managing their personal care. They provided younger children with bibs to protect their clothes from becoming soiled or wet when eating. Children's nappies were changed routinely and as needed, with staff using these opportunities for warm one-to-one interactions. Older children were supported to use the toilet independently. Staff assisted the children with handwashing before meals and helped them clean their faces after eating. Staff addressed children by name and spoke to them in gentle positive tones. Children were comforted promptly if they became upset.

An area with matting and cushions was provided within the rooms where the children could rest or take a break from activities. Younger babies were placed to sleep in accordance with their individual routines and older children were given the opportunity to sleep after lunch. The children were made comfortable for sleep, with staff removing their shoes and outer clothing and providing soothers to those who used them. The environments were calm and conducive to sleep, with staff sitting with the children and soothing them as needed. A record was kept for staff to communicate with parents/guardians regarding individual children's care, including information about diet, sleep, and nappy changes.

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

The inspector found by observation of practice, review of documentation, discussion with the registered provider, and inspection of the premises that the following steps to safeguard children attending:

General Safety:

Some steps were implemented to ensure the safety of the children. The entry and exit points were secured to prevent children from leaving the service unattended or unauthorised individuals from gaining access. The toys and play equipment observed in use by the children on the day of inspection were safe and in good working order. Potentially hazardous materials such as cleaning products and medicines were safely stored out of children's reach.

Infection Control:

Measures were taken to minimise the risk of infection spreading. Soothers were kept in individual containers to avoid cross-contamination. Appropriate infection control measures were taken during nappy changing including the use of gloves, aprons, and thorough handwashing after changes. Waste was managed appropriately using pedal-operated bins. Each child was provided with their own bed linen, which were laundered according to a comprehensive cleaning schedule and stored individually between uses. Staff were aware of guidelines on exclusion periods for adults and children with infectious illnesses.

Administration of Medication:

Medications were stored in their original packaging out of reach of children. Staff demonstrated a clear understanding of procedures to safeguard children when administering medicine. This included getting written consent from parents or guardians, having a second staff member present as a witness during administration, and maintaining detailed records shared with parents or guardians upon collection. Care plans were available for children who required emergency medication.

Safe Sleep:

Staff were familiar with safe sleep guidance and placed babies on their backs to sleep. Sleep logs were maintained in the dedicated sleep rooms and the younger care rooms, and individual children's observations recorded room temperature, breathing, colour, and position every ten minutes. Standard cots and low-level beds were available for sleep and were used in accordance with children's ages and developmental needs. The temperature of the rooms where children slept were maintained at the required temperature ranges.

Fire Safety:

The designated fire escape routes were clearly indicated and free from obstruction on the day of inspection. Staff members adequately outlined the evacuation procedures in place in the event of a fire and stated that fire drills are practiced regularly on a monthly basis.

Non-Compliance Information

General Safety:

1. In the Montessori 3 room, a magnetic lock on a door which led into an unused room was broken meaning a child could access the room unsupervised. This room contained a number of hazards which posed a potential risk of harm to a child including a fire hose and electrical wires.
2. The service did not adhere to the re-vetting timeframes as outlined in the Early Years Inspectorate Regulatory Notice, requiring services to renew Garda vetting every three years. Two staff members working in the service did not have a Garda Vetting disclosure which was dated within the last 3 years.
3. In the Toddler 2 room, two wooden posts which staff stated held a sensory board were attached to the wall and had sharp splintered edges which posed a risk of injury to a child. It is acknowledged the service provided evidence these posts had been removed following the inspection.

Infection Control:

4. Children's hands were not consistently washed after toileting in the Montessori 3 room. A number of children were observed using the toilet throughout the inspection and did not handwash afterwards posing a risk of cross contamination.

Fire Safety:

5. Two children in attendance who arrived in the service at 8:35am were not signed into the attendance register until 10:20am when prompted by the inspector. Staff reported the attendance register is utilised

to check the children in attendance following an evacuation in line with the service's procedure. This may hinder the safe evacuation of children in the event of a fire.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1. An electrician visited the premises on 21/11/24 to address the issue. Upon inspection, it was determined that the magnetic lock was functional but improperly installed, with screws tightened too firmly on the door frame. The electrician adjusted the screws, ensuring the magnet now properly engages when the door closes, thereby resolving the issue. Additionally, the unused room was cleared of hazards, including securing the fire hose and concealing or removing the electrical wires, to eliminate any immediate risk while addressing the lock. The managers have incorporated a specific check of all magnetic locks into the managers morning check list. Although mag lock checks are already on the list, managers will only confirm that each lock is functioning properly after the magnets are also inspected therefore securing the respective doors.
2. Upon reviewing staff files and identifying that the Garda vetting disclosures for the two adults had lapsed, immediate action was taken to address the oversight. Garda vetting for both adults was renewed promptly on the 18th November 2024. Updated Garda vetting disclosures for these individuals have been obtained and are now on file. As part of this corrective process, the conducted a full audit of all staff files to ensure that no other vetting or certification renewal requirements were overlooked. To prevent a recurrence of this issue, the service have implemented the following measures:
 Compliance Tracking Checklist: comprehensive compliance tracking checklist has been developed and implemented. This checklist clearly outlines renewal dates for all the relevant staff for Garda vetting, First Aid Response (FAR) certification, and Children First training. Is visibly displayed in the office to serve as a clear reminder for management. Is monitored weekly by the designated compliance officers to ensure upcoming deadlines are proactively managed and to ensure all new staff are updated onto the compliance checklist. Staff Induction and Record Management: The compliance tracking system will be updated to include new future hires from their date of joining with all the relevant renewal dates.
 Management Accountability: Designated compliance officers have been assigned to oversee and verify that all vetting and certification requirements are up to date.
3. The sensory board had been removed the weekend before the inspection to prepare for scheduled works to dismantle part of the unused fun factory in the Toddler 2 room. However, the wooden posts were not

addressed at that time. When the issue was highlighted during the inspection, the hazard was reported to maintenance immediately and the wooden posts were removed. Evidence of the removal was provided to the inspector following the inspection. After commencement of any maintenance or renovation work, a detailed safety audit will be conducted by management to identify and address any potential hazards. This includes removing or mitigating risks associated with partially completed projects or dismantled structures. A meeting held on the 20th of November addressed the daily care room safety/ risk assessment checklist that is completed by staff in each room at the start of every day. The managers will conduct thorough safety checks of all rooms undergoing any works to ensure ongoing compliance with health and safety standards and to verify that any works or changes have been completed safely.

Infection Control:

- Although independence is strongly encouraged in the Montessori 3 classroom, we acknowledge that handwashing is to be observed and monitored more closely for infection control purposes and the risk of cross contamination that it poses. Following the staff meeting on the 20th of November, we collaboratively explored strategies to address the issue, focusing on solutions that balance safeguarding the children's hygiene with fostering their independence and respecting their privacy. The collaborative corrective action is as follows: We discussed that the Monti 3 educators were to discreetly observe toileting routines to ensure that children washed their hands immediately after using the toilet. New child-friendly visual aids, including illustrated step-by-step handwashing guides were placed near sinks to remind children of proper handwashing techniques- please find photos attached. Hands-on demonstrations are conducted from time to time, where staff models. Proper handwashing techniques and explained their importance in preventing illness. Handwashing is reinforced during key moments throughout the day, such as after outdoor play, before meals, and after messy activities, to build consistency and habits among children. A staff meeting was held to discuss the importance of infection control and the need for active monitoring during toileting while still encouraging the children's independence. Ideas to tackle this issue was brainstormed to come up with the best ideas to promote good hand washing practices.

Fire Safety:

- During the staff meeting on the 20th of November, the service addressed the issue with all team members. The critical importance of the orange attendance book during fire evacuations was emphasised along with its use for the general safety of all children whilst in attendance, focusing on its role in accounting for all children thereby ensuring their safety. The attendance book was explicitly incorporated

into the fire safety instruction and training monthly meeting which took place on the 25th of November and 17th December. To ensure consistent usage, management initiated daily morning spot checks completed the books and are aware of their importance during emergencies.

Supporting documentation submitted

Supporting documentation was submitted and reviewed by the early years inspector.

Summary Comment

The regulatory requirement has been met.

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

- (1)
An adult trained in First Aid Responder (FAR) training was available to the children during the inspection.
- (2)
(a)(b)
Suitably equipped first aid boxes were observed to be immediately accessible to the children within the service and were stored in a conspicuous location on the day of 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 fire fighting 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) A written record was available detailing fire drills that had taken place in the service. The record showed that the last fire drill had taken place in October 2024.
 - (b) There was a record to show that the firefighting equipment and the smoke alarm system had been serviced within the required timeframe.
- (4) The procedures to be followed during a fire drill and in the event of a fire were displayed in conspicuous locations within the service.

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
 - (d) cleaned, maintained and repaired, as required, and

Non-Compliance Information

- (c)
1. The registered provider did not ensure that parts of the premises were adequately heated on the 1st day of inspection. Some of the care rooms were not maintained at the required temperature range of 18 - 24°Celsius throughout the inspection as follows:
 - The Toddler 2 room was recorded to be 16.4°Celsius at 14:42pm.
 - The Montessori 3 room was 14.4°Celsius at 10:09am.
 - The Montessori 2 room was 17.4°Celsius at 11:22am.

The corrective and preventive actions submitted by the provider following the last inspection of the service on the 8th and 9th January 2024 did not prevent the re-occurrence of the non-compliance.

- (d)
2. Although cleaning schedules were documented as being completed in the service, some areas of the care rooms required a deep clean as follows:
 - A shelving unit in the Montessori 2 room was constructed with porous wood which had not been painted or lacquered and could not be effectively cleaned.
 - The paint on a second shelving unit in the Montessori 2 room was heavily chipped and could not be effectively cleaned.
 - Areas of the flooring and skirtings throughout the service had a build up of dirt, dust, and debris on the morning of inspection and required a deep clean.

The corrective and preventive actions submitted by the provider following the last inspection of the service on the 8th and 9th January 2024 did not prevent the re-occurrence of the non-compliance.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

1. The heating timer has been readjusted from 7:30 am to 6:00 am to ensure that the premises are adequately heated before the start of operations. A care room temperature checklist has been introduced. The issue of heating was addressed at the staff meeting on the 20th of November. During this meeting. Staff were shown how to use the heating system, including the operation of thermostats and the location of boilers
2. Painting of the porous wooden shelving unit began on 17th December 2024 and is scheduled for completion by 20th December 2024. A durable lacquer-based paint is being applied to ensure the surface is sealed and easy to clean. Flooring and skirtings will be thoroughly mopped multiple times per week to ensure there is no accumulation of dirt, particularly in corners and hard-to-reach areas. By the end of January 2025, all skirtings in the care rooms will be painted with gloss paint as opposed to water based paint that was previously used which were making them much harder to clean. By the end of January 2025, all skirtings in the care rooms will be painted with gloss paint as opposed to water based paint that was previously used which were making them much harder to clean. All porous or chipped surfaces have been identified and are being treated with durable, easy-to-clean materials such as lacquer or gloss paint. Future purchases of shelving, furniture, or other fixtures will prioritise non-porous timber and all timber will be sealed prior to use. Mopping of floorings multiple times per week, with thorough care in corners.

All staff have been retrained on hygiene and cleaning standards, focusing on the identification of areas requiring special attention. Training was completed on 20th November, with attendance records attached.

Supporting documentation submitted

Supporting documentation was submitted and reviewed by the early years inspector.

Summary Comment

The regulatory requirement has been met.