

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2015DR123			
<b>Name of Service:</b>	Koala Childcare Ltd			
<b>Address of Service:</b>	Granitefield Manor, Rochestown Avenue, Dun Laoghaire, Co. Dublin			
<b>Eircode:</b>	A96 X5C9			
<b>Name of Registered Provider:</b>	Caroline Lynch			
<b>Service type:</b>	Full Day, Part Time, Sessional			
<b>Date(s) of Inspection:</b>	08/02/2024			
<b>No of pre-school children:</b>	AM	37	PM	33
<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 Mona Condon			
<b>Title:</b>	Early Years Inspectors			
<b>Authority to Inspect</b>				
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			

### Description of service

Koala Childcare is registered to provide full day care to children aged between 0 to 6 years and is open Monday to Friday between 08:00 and 18:00. The early years service operates from a purposely adapted ground floor apartment complex and comprises of four care rooms. The service is privately operated and is located in an urban, residential area of Dun Laoghaire County Dublin. The children have access to an enclosed outdoor play area to the rear of the premises.

### Staffing

In total ten adults are employed in the service including the registered provider. On the day of inspection nine adults worked directly with the children including the designated person in charge. The registered provider arrived during the inspection and remained in the service for the duration of the 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

The 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;

9(2), and (4) –Management and Recruitment,

11 – Staffing levels,

16 (h), (i),(j) and (k)– Record in relation to pre-school service.

19(1)(a) and (b) Health welfare and development of child and 26–Fire Safety.

A sampling process was used to assess compliance under regulation 16 (j) and (k).

However, on inspection additional non-compliance which posed a risk was identified under Regulation 25 First aid. These findings are outlined within the relevant regulations within this report.

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 Issued 08 February 2024 Governance Regulation 9(2)(c)**

An Immediate Action Notice was issued on 8 February 2024 for non-compliance with regulation 9(2)(c). A mandatory Garda vetting disclosure was not available for one adult who was on the premises and working directly with the children contrary to the National Vetting Bureau (Children and Vulnerable Persons) Act 2012.

- The register provider submitted a response on 9 February 2024 providing evidence of Garda vetting for the adult. This was deemed to satisfactory to address the non-compliance.

### **Immediate Action Notice Issued 08 February 2024 Safety Regulation 23 and 25**

An Immediate Action Notice was issued on the 8 February 2024 for non-compliance with regulations 23 and regulation 25 as detailed below;

In the outdoor play area, the fire exit had a thumb turn lock which was positioned at a level which was accessible to the children posing a potential risk a child could leave the area unsupervised. This non-compliance was found on the last inspection on the 8 August 2022. The measures taken did not prevent the non-compliance from re-occurring.

following the last inspection did not address the non-compliance.

- The registered provider submitted a response on the 08 February 2024 which was deemed suitable to address the non-compliance.

The evidence available demonstrated that a staff member trained as a First Aid Responder (FAR) was not available at all times to the children as detailed under Regulation 25.

- The registered provider submitted a response on 08 February 2024 regarding First Aid Responder training which was deemed suitable to address this non-compliance while waiting for staff to complete FAR training.

### 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 inspection focused on the recruitment records for the ten staff employed in the service. Additionally, a file for a music instructor who was present during the inspection was reviewed.

(a), (b) Twenty-two validated written references were required. Eighteen validated, written references were available from a past employer or a source other than a past employer for those who did not have a previous employer.

(c) Garda vetting disclosures from the National Vetting Bureau of An Garda Síochána were available for ten adults.

(d) Police vetting was available for three adult who had lived outside the State for a period exceeding six months as an adult.

(4) A record was available evidencing that nine staff members who were employed to work directly with the children held the required qualification.

### Non-Compliance Information

(2) The registered provider did not take appropriate measures to ensure that all staff employed in the service were suitable and competent as outlined below:

(a), (b) Three staff did not have a second written validated reference on file. One adult had a second written reference, but it was not translated and therefore could not be interpreted.

(c) An immediate action notice was issued as there was no Garda vetting disclosure available for one adult.

(d) Police vetting was not available for one adult who lived outside the state for a period of longer than six months as an adult. Police vetting available for another adult was not translated and therefore it could not be interpreted.

(3) The registered provider did not ensure that a Garda vetting disclosure was obtained for one adult prior to them commencing work in the service. The staff member commenced working in the service on 18 December 2023 and Garda vetting was obtained on 29 January 2024.

(4) There was no evidence available to show that one adult who had been employed 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

(a), (b) All the references were verified and translated after the day of the inspection. A copy of the references for staff missing on the day of the inspection and their translations was submitted.

(c) Garda vetting for the staff member was submitted within 24 hours. Effective immediately, no staff member will be permitted to attend the centre without the required document in their file.

(d) The police vetting was submitted as required. No staff member will attend the centre without this document in their file. We have implemented a new checklist system. This system ensures thorough verification of all required documents prior to the start date of each staff member.

(3) No staff member will attend the centre without this document in their file. We have implemented a new checklist system. This system ensures thorough verification of all required documents prior to the start date of each staff member.

(4) The manager will ensure that all evidence of qualifications are filed correctly going forward and all the Department of Children Equality, Disability, Integration and Youth (DCEDIY) recognitions are in place. This will form part of our checklist process.

### **Supporting documentation submitted**

Written and photographic evidence submitted.

### **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

(2) The minimum ratio of adults to children was maintained in the Toddler and Montessori rooms on the day of inspection.

(8)(a) There were at least two adults on the premises at all times as per the staff roster.

#### Non-Compliance Information

(1) The registered provider did not ensure that at all times there were an adequate number of adults working directly with the children as outlined under regulation 11(2) below.

(2) The minimum ratio of adults to children was not maintained between 12:10 and 13:45 as detailed below:

1. In the Pre-Montessori room, there was one adult responsible for the care of eleven children aged 2-3years during the following times 12:10-12:40 and 13:00-13:30. The minimum ratio of adults to children for this age range is 1:6.
2. In room 3 Montessori, there was one adult responsible for nine children aged 3-4 years from 12:15- 13:45. The minimum ratio of adults to children for this age range is 1:8.

## Corrective & Preventive Action submitted by the Registered Provider

### Corrective and Preventive Action

11(1), (2)

Since the day of the inspection, we are using the help of an temporary staffing agency who have been able to assist in instances where we require additional staff from time to time. These usually support during break times and illness cover.

The registered provider is revising the recruitment and retention policies and are now adding more staff members to our team to ensure that the room ratios are always met.

### 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. Practice will be reviewed on next inspection.

## Part IV – Information and Records

### Regulation 16 – Record in relation to pre-school service

*(1) A registered provider shall ensure that a record in writing is kept of the following information in relation to the service:*

- (h) details of attendance by each pre-school child on a daily basis;*
- (i) details of staff rosters on a daily basis;*
- (j) details of any medication administered to a pre-school child attending the service with signed parental consent;*
- (k) details of any accident, injury or incident involving a pre-school child attending the service.*

### Compliance Information

- (1)
- (h) Details of attendance of each pre-school child was recorded on a daily basis including the time of arrival and departure.
- (i) The staff roster was available and included the names of the staff present on the day of inspection and their hours of work.
- (j) A sample of medication records were reviewed. Details of medication administered to pre-school children was recorded correctly by staff with signed parental consent.
- (k) A sample of accident and incident records were reviewed. The forms were completed correctly signed by parents and staff.

### 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*

*(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)(a), (b)

Healthy eating was promoted in the service. Food was provided for the children attending including snacks and a hot meal of lentil stew with potato croquettes was served at lunch time. An external catering company is used to supply pre-prepared meals which are heated on site by staff. Drinking water was available to children in their respective rooms. Young children had bibs put on before eating and had their hands and faces cleaned after eating. Children's nappies were changed regularly and staff were observed engaging warmly with children when providing this care.

The Toddler room was laid out with space for children to crawl and explore their environment; there were age-appropriate cause and effect toys and equipment. Other rooms in the service were laid out with child-sized tables and chairs. Developmentally appropriate equipment and materials were accessible to the children from open low-level shelving in these rooms.

A fully enclosed outdoor play area was available to the rear of the premises with a shock absorbing surface. The outdoor area was equipped with a variety of play equipment including a slide, playhouse, ride on bikes, push along toys, balls and scooters. All children had an opportunity for outdoor play.

## Non-Compliance Information

(1)(a), (b)

1. In room 3 Montessori the rest area was not suitable for the number of children present. A small double seater couch was available however, children were observed sitting on the floor.
2. In the Pre-Montessori room there was no adult chair provided for staff to sit and comfort a child.

## Corrective & Preventive Action submitted by the Registered Provider

### Corrective and Preventive Action

(1)(a), (b)

1. New 'Cosy Corner' was installed in this room the day after the inspection. We have implemented a monthly review system where the Manager will perform an audit of the room to ensure the Room Leader has the equipment and facilities required for the children.
2. A suitable adult chair was installed in this in this room the day after the inspection. A monthly review system has been implemented where the Manager will perform an audit of the room to ensure the Room Leader has the equipment and facilities required for the children.

### Supporting documentation submitted

1. Photographic evidence submitted.
2. Photographic evidence submitted.

## 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 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 secure to prevent unauthorised access.
- The kitchen and storage areas were inaccessible.
- Cleaning agents and medication was clearly labelled and safely stored.
- Toys and play equipment observed in use was in good condition and safe for the age group using them.

##### Infection Control:

- The children were supervised washing their hands at regular intervals including after using the toilet and prior to eating. Liquid soap, warm water and paper towels were available to facilitate hand washing.
- A system was in place to launder linen used for children's cots and sleep beds.

##### Administration of Medication:

- A sample of records of previous medications given were reviewed. The records were completed correctly and included the time and date it was given, the name of the staff who gave it and the signature of a second staff as a witness and the parents signature.

#### Non-Compliance Information

##### General Safety:

1. An Immediate Action Notice was issued on the 8 February 2024. In the outdoor play area, the fire exit had a thumb turn lock which was positioned at a level which was accessible to the children posing a potential risk a child could leave the area unsupervised.
2. In the Pre-Montessori room staff did not sit with the children at mealtimes. One child was observed to regurgitate food unnoticed by staff posing a potential safety risk.
3. Two children who were moved from room 3 Montessori for one hour between 12-1pm were not recorded on the register posing a potential safety risk in the event of a fire on the premises.
4. In the Toddler and Pre-Montessori rooms trailing flexes from electrical equipment positioned at a height posed potential injury risk to children.

### Infection Control:

5. Cleaning schedules were not maintained by staff in the Toddler, Pre-Montessori and room 4 Montessori. Staff informed the inspector they clean toys weekly. In the Toddler room mouthed toys were not removed and cleaned after use. This practice poses an infection control risk and is contrary to the service's cleaning policy.
6. Staff and children were observed to lift the lid of the bin rather than using the pedal operated function increasing the risk of infection.
7. In the sanitary area used by the Montessori room 3 and 4 a pedal operated bin was not provided.
8. In the outdoor area staff did not wash their hands after cleaning children's noses posing an infection control risk.
9. In room 3 Montessori the surface on the child size couch was torn and could not be effectively cleaned.

### Safe Sleep:

10. In the Toddler cot room, there were no sleep checks recorded for four children at intervals of 10 minutes contrary to the service's policy on safe sleep. The children were placed to sleep at 11:35 and sleep checks were recorded at intervals of 10 minutes retrospectively for these children at 12:20.

### Fire Safety:

11. In the Pre-Montessori room at sleep time a child's sleep bed obstructed the fire exit posing a potential safety risk in the event of a fire on the premises.

### Action submitted by the Registered Provider

#### Corrective & Preventive Action

#### General Safety:

1. This issued was resolved the day within 24 hours of the inspection and the pictures were provided at the time. A monthly review system has been implemented where the Manager will perform a risk audit of each space to ensure the facilities are safe and fit for purpose.
2. A member of staff was retrained on our Mealtimes Policy. The manager will review this practice quarterly to ensure that every staff member is following this correctly.
3. Children that are move between rooms are now formally marked in the registration book to ensure all are always accounted for. The Manger will review this practice quarterly to ensure that all the moves are clearly set out in our registration books.

- The trailing wires in question are now fastened to the wall out of children's reach. A daily review system has been implemented where the Manager will perform a risk audit of each space to ensure the facilities are safe and fit for purpose.

### **Infection Control:**

- New cleaning schedules were provided in the rooms and staff was trained again in our infections control policy. A daily review system has been implemented where the Manager will perform a review of each space to ensure the facilities are clean and fit for purpose.
- New bins were purchased for each room, all with a suitable pedal operated function. Staff or children do not need to lift the lids of the bins anymore. Each Room Leader will review the functioning of the pedal on the daily basis and notify the Manager in any instance of malfunction.
- New bins were provided in this area with a properly functioning pedal system. Staff members will be responsible for the review the bin pedal on the daily basis and will notify the Manager in any instance of malfunction.
- The manager retrained the staff member in question on our infection control policy. The Room Leaders will now perform a daily review of each room by reference to our infection control policy.
- The couch in question was removed from the room and the children were provided with a new 'Cosy Corner'. The pillows and blankets of this cosy corner are cleaned in our weekly clean schedule. Staff were retrained in our infection control policy. The Room Leaders will now perform a daily review of each room by reference to our infection control policy.

### **Safe Sleep:**

- Staff were retrained in our sleep policy and the review of the checks were monitored since the day of the inspection. The manager has reviewed the staff policy on this to ensure that all checks are done every 10 mins.

### **Fire Safety:**

- The beds in pre-Montessori room were immediately moved around, so no bed will obstruct the exit of the room. The manager will review on daily basis the location of the beds to ensure that the same issue will not occur again.

### **Supporting documentation submitted**

#### **General Safety:**

Written and photographic evidence submitted

### Infection Control:

Written and photographic evidence submitted

### Safe Sleep:

Written and photographic evidence submitted

### Fire Safety:

Written and photographic evidence submitted

### 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 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.*

### Non-Compliance Information

- (1) An Immediate Action Noticed was issued on the 8 February 2024. The evidence available demonstrated that a staff member trained as a First Aid Responder (FAR) was not available at all times to the children. One staff member had FAR training. From reviewing the staff roster for the week of 6-9 February 2024 there was no staff member trained in FAR available between 5-6pm daily.

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

#### Corrective and Preventive Action

- (1) The staff member with the first Aid responder qualification agreed to stay in the centre during the open times to ensure that the centre is always cover. A second staff member is now booked in the FAR course to be completed on 25 March 2024. The registered provider has booked several staff members to complete the FAR course to always ensure that the centre if fully covered.

#### Supporting documentation submitted

Email evidence to confirm staff booked on FAR training.

## 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 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.*

## 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 on the January 2024.
  - (b) There was a record to show that the firefighting equipment had been serviced on 27 July 2023 and that maintenance of the fire detection and alarm system had taken place on 1 February 2024.