

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2015DR131		
<b>Name of Service:</b>	Magical Days		
<b>Address of Service:</b>	118 Upper Glenageary Road, Glenageary, Co. Dublin		
<b>Eircode:</b>	A96R205		
<b>Name of Registered Provider:</b>	Aoife Hale		
<b>Service type:</b>	Full Day, Part Time		
<b>Date(s) of Inspection:</b>	29/01/2024		
<b>No of pre-school children:</b>	AM	45	PM 45
<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 Emer Mulhern		
<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

Magical days is registered to provide a full day care service for pre-school children ranging in age from 0 - 6 years. The service operates Monday to Friday between the hours of 07:45 – 18:30 and is privately owned. The early years service is located in a purposely adapted semi-detached two storey premises and is based in an urban area in Glenageary, County Dublin.

Care of the children is facilitated across four care rooms. On the day of inspection, three care rooms were in operation named the Baby room (1-2 years), Toddler room (all over 2 years) and Montessori room (3 - 4 years). A separate sleep room was available on the first floor for younger children to sleep. An outdoor play area was available to the rear of the premises.

### Staffing

Thirteen staff are employed in the service including the registered provider. On the 29 January 2024 when the inspectors arrived nine staff were working directly with the children including the designated person in charge. The registered provider arrived after the inspection commenced, and phoned a staff member who was rostered on a day off to come in to work directly with the children to provide additional support.

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

This inspection also included a review of corrective and Preventive Actions submitted by the registered provider following the last inspection dated 24 July 2023.

The inspection focused on an examination of compliance under regulations 9 –Management and Recruitment, 11 – Staffing Levels, 15 – record of a pre-school child, 16 (h), (i) and (j) – Record in relation to Pre-school service, 19 (1)(b) Health, welfare and development of child and 23 – Safeguarding Health, Safety and Welfare.

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, staff and children who were present on the day of the inspection.

### Part III – Management and Staff

#### Regulation 9 – Management and recruitment

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

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

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

- (a) consideration of references from the person's past employers, if any, and in particular the most recent employer, if any,*
- (b) consideration of references from reputable sources in the case of a person who has no past employers,*
- (c) consideration of the vetting disclosure received from the National Vetting Bureau of the Garda Síochána in accordance with the Act of 2012 in respect of the person, and*
- (d) ensuring, insofar as is practicable, that where a person has lived in a state other than the State for a period of longer than 6 consecutive months, he or she provides police vetting from the police authorities in that state.*

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

*(7) A registered provider shall ensure that all employees, unpaid workers and contractors are appropriately supervised and provided with appropriate information, and where necessary training, including in relation to the following:*

- (c) these Regulations.*

### Compliance Information

- (1)
- (b) The designated person in charge was present at all times during the inspection.
- (2) The inspection focused on the recruitment records for thirteen adults employed in the service.
- (a) Of the twenty-six validated, written references that were required, twenty-one were available from a past employer.
- (b) A further four validated, written references were available from a source other than a past employer for staff who did not have any previous employers.
- (c) Garda vetting disclosures from the National Vetting Bureau of An Garda Síochána were available for all adults.
- (d) Police vetting was available for five adults who had lived outside the State for a period exceeding six months as an adult.
- (4) Documentary evidence was available to confirm that twelve staff had 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.

### Non-Compliance Information

(1)(c) There was no evidence of a clear management structure to identify the lines of authority and accountability in the service. This was evidenced by the following findings;

When the inspectors arrived, the manager stated the registered provider was the deputy person in charge. However, the registered provider told the inspectors another staff member who was present on inspection was the deputy person in charge. When the inspector spoke to this staff member, they confirmed at no point had they been the deputy person in charge of the service. This non-compliance was identified on the last inspection on the 24 July 2023. The corrective and preventative actions submitted following the last inspection stated “The person in charge are the manager, and in her absence a senior member of the staffing team. They are identifiable as such via the roster, and via the staff information chart that is on display in the hallway of the service.” The staff roster provided did not detail the name of the deputy person in charge and the information chart on the wall was not accurate.

(2)(a) A second written reference available for one adult was not validated.

(4) There was no evidence to demonstrate one adult who worked directly with the children on the day of inspection had the required qualification.

(7) (c) The inspectors were not assured that the registered provider and person in charge had sufficient understanding of the regulatory requirements under management and recruitment. On the last two inspections repeat non-compliance were identified under Regulation 9(1) (c) and 2(a). The corrective actions submitted previously have not been sufficient to achieved compliance.

## Corrective & Preventive Action submitted by the Registered Provider

### **Corrective and Preventive Action**

(1)(c) Clear outlines have been iterated to the person in charge (PIC) and designated person in charge (DPIC) who are those that are named on the Staff List and not necessarily those who will assist with an inspection. No staff member will be assigned a PIC or DPIC without written confirmation of the same being given and signed off by management and the noted staff member and then stored in their staff file. Staff Lists are displayed in the hallway and each care room outlining the PIC and DPIC. We currently have 3 DPICs, which are listed in order should 1 DPIC not be present in the building.

The PIC has been instructed that each morning they are to text the Magical Days WhatsApp in which all staff are present and inform all staff of the PIC and the 3 DPICs in charge on the day. Each staff member must send a thumbs up to signal-noting that they have read and understand the text. Photographic evidence of the same is provided. All information charts will be live and reflective of the roster of the PIC and the DPIC at any time. Please note Staff Lists are in place in the Hallway and each Care Room. This will be signed by all staff. Photographic evidence of the same is provided.

(2) (c) The 2<sup>nd</sup> reference for the named person was verified by management.

(4) The named person has been removed from the roster since the 30<sup>th</sup> of January until the qualification is available.

(7) (c) A paper system with all the nominated persons reading and signing the paperwork stating the titles and roles have been provided to the necessary persons and are on record in the individual's staff file. The registered provider and the person in charge have engaged in structured focused training with a specialist in Early Childhood Care and Education on the 20<sup>th</sup> of February 2024. This training focused on Regulation 9 management and recruitment policies and governance of recruitment and policies, identifying and record keeping of the management structure, and providing the documentation to all staff to read and sign. Photographic evidence of the Invoice for the training is noted.

The registered provided and the Person in charge (PIC) will continuously engage in formal training regularly. Both the registered provider and PIC are booked onto courses to strengthen their knowledge and keep regularly informed about the recruitment regulations.

The PIC is booked onto a leadership course. Photographic evidence of receipt of the course is attached.

Better Start: The registered provider has contacted the regional agent for Better Start and will engage with the program focusing on the regulation of management and recruitment. Also, focus on leadership and the QRF. Photographic evidence of the same is provided of the correspondence. We will record all training. The registered provider and the PIC will designate nominated hours per week, or the time required to read the QRF methodically and linearly and will ensure they are cognitively aware of all the documentation. They will train staff of the same. We will have a checklist displayed in the office documents of requirements as per regulation 9 of documents that must be in each staff file.

Quality Regulatory Framework (QRF) E-Learning: the registered provider has completed 4 of 6 QRF E-Learning modules and will complete the remaining 2 by the 22<sup>nd</sup> of March 2024. Photographic evidence of the same provided.

The PIC and DPIC will complete the QRF E-Learning by the 22<sup>nd</sup> of April 2024. Certificates of the completed courses will be kept on their staff file. The registered provider, the PIC and the DPIC will continually reference the QRF E-Learning.

### **Supporting documentation submitted**

Written and photographic evidence submitted.

## Summary Comment

The corrective and preventive actions as stated by the registered provider address the non-compliance. Practice will be reviewed on next inspection.

## Part III – Management and Staff

### Regulation 11 - Staffing levels

*(1) Subject to this Regulation, a registered provider shall ensure that there is at all times an adequate number of adults working directly with the children attending the pre-school service.*

*(2) Subject to paragraphs (4) and (5), a registered provider of a full day care service or a part-time day care service shall ensure that at all times the minimum ratio of adults to children specified in column (3) of Part 1 of Schedule 6 opposite a particular reference number specified in column (1) of that Part in respect of the age range of the children specified in column (2) thereof at that reference number is satisfied.*

## 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-five children attending the service being supervised by ten adults on the day of inspection.

## 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;*

*(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

The inspection focused on actions to address previous non-compliance in the Baby room.

(1)(a) and (3) (c)

The inspector reviewed twelve registration records for children attending the Baby room to verify the ages of the children. Paper records were provided and open to inspection for all children in attendance. The registration forms included the dates of birth of the children.

## 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:*

*(i) details of staff rosters on a daily basis;*

### Compliance Information

(1)(i) A staff roster was available.

## 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)

In the baby room at lunchtime children were placed in highchairs for their meal. Mealtime was relaxed, staff sat at children's level and engaged in conversation. Bibs were provided to the children to protect their clothes from becoming soiled or wet. Suitable cutlery was available, and children were encouraged to feed themselves. Additional servings were available and the inspector observed children who requested more dinner in the Montessori room receiving an additional serving. Drinking water was freely available in all rooms.

Children's nappies were changed regularly and staff were observed engaging warmly with children when providing this care. Children in the Montessori room were encouraged and supported to be independent, including using the toilet and cleaning up after their play. Children attending the Toddler room were provided with an opportunity to sleep in the afternoon. Suitable low-level beds were provided for children to sleep and staff remained in the room with the children at sleep time soothing them as required. A designated cot room was provided for children attending the Baby room.

## 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 inspection focused on actions to address previous non-compliance as detailed;

#### General Safety:

1. In the Baby sanitary cleaning products were safely out of reach of children.
2. There were no loose cables or trailing flexes observed on the day of inspection.

#### Infection Control:

3. In the Montessori sanitary area toilet paper and paper towel was suitably stored in wall mounted dispensers accessible to the children.