

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015DR131
--------------------------	-------------

Name of Service:	Magical Days
-------------------------	--------------

Address of Service:	118 Upper Glenageary Road, Glenageary, Co. Dublin
----------------------------	---

Eircode:	A96R205
-----------------	---------

Name of Registered Provider:	Aoife Hale
-------------------------------------	------------

Service type:	Full Day, Part Time
----------------------	---------------------

Dates of Inspection:	30/05/2023
	24/07/2023

No of pre-school children:	30/05/2023	AM	45	PM	43
	24/07/2023		35		35

Address of the Early Years Inspectorate:	Early Years Inspectorate, Tusla Child and Family Agency. Loughlinstown Health Centre, Loughlinstown Drive, Loughlinstown, County Dublin.
Inspection undertaken by:	Olivia Quill and Emer Mulhern
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

Magical days is registered to provide full day care, part time and a sessional service for pre-school children ranging in age from 0 - 6 years. The service operates Monday to Friday between the hours of 07.45am and 6.30pm and is privately owned. The early years service is located in a purposely adapted semi-detached two storey premises and is based 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 (2.5 years-4 years). The Pre-Montessori room was closed and three children who normally attend the Pre-Montessori room were cared for in the Montessori room. 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

Eleven staff are employed in the service including the registered provider.

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, records, safety.

The inspection focused on an examination of compliance under Regulations;

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

11 – Staffing Levels

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

23 –Safeguarding Health, Safety and Welfare

However, on inspection additional non-compliance was identified under Regulations;

9 (7)(c) – Management and Recruitment

19 (1)(b) – Health, welfare and development of child and

27– Supervision

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

The inspection on 30 May 2023 was triggered due to concerns received by the inspectorate in relation to staffing levels. Inspectors identified non-compliance with Regulatory requirements. The registered provider submitted corrective and preventive actions (CAPA) to address the non-compliances identified.

A follow up inspection was carried out on 24 July 2023 to assess the actions as stated by the registered provider in response to non-compliances identified in Regulations 11 and 23 as detailed in the body of the report.

A regulatory compliance meeting was held on 28 September 2023 with the registered provider who was accompanied by a specialist from an external private support agency to discuss unresolved and repeat non-compliance which posed a risk to children.

Acknowledgments

The inspectors wish to acknowledge the cooperation of the registered provider, staff and children who were present on the days of the inspection.

Part III – Management and Staff

Regulation 9 – Management and recruitment

(1) A registered provider shall ensure that-

- (a) the service has a designated person in charge and a named person who is able to deputise as required,*
- (b) at all times during the period when the pre-school service is being carried on, the designated person in charge or the named person referred to in subparagraph (a) is on the premises.*
- (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:

(a) the policies, procedures and statements of the service specified in Schedule 5;

(b) Part VIIA (inserted by section 92 of the Child and Family Agency Act 2013 (No. 40 of 2013)) of the Act, and

(c) These Regulations.

Compliance Information

Inspection 30 May 2023

(1)

(a) The service had a named person in charge and a person who could deputise in their absence.

(b) The person in charge was present when the inspectors arrived and remained on the premises throughout the inspection.

(2) The inspection focused on all staff employed by the registered provider for regulations 9(2)(c) and (4). The inspection focused on 9(2) (a),(b) and (d) the recruitment records for staff employed in the service since the last inspection dated 7 February 2023. From reviewing the records and speaking to the registered provider and staff it was confirmed one new staff member had commenced working in the service since then and the details are as follows;

(a),(b) Two written validated past employer references were available on file.

(c) Garda vetting disclosures were available for all staff employed in the service.

(d) International police vetting was available for this staff member who had lived in another state for more than six consecutive months as an adult.

(4) A record was available evidencing that all staff members who were employed to work directly with the children held the required qualification or a qualification deemed to be equivalent.

Non-Compliance Information

Inspection 30 May 2023

(7) (c) The inspectors were not assured that the person in charge (registered provider) had sufficient understanding of the regulatory requirements under regulation 11. Inspectors observed significant non-compliance with staffing levels on this inspection and on the previous inspection dated the 7 February 2023. The registered provider told inspectors at the feedback meeting following this inspection that the minimum ratio of adults to children was maintained in all rooms at all times throughout the inspection. This was at variance with the findings which are outlined under regulation 11.

Inspection 24 July 2023

(1) (b) It was evident that the person in charge or a named person to deputise was not always present in the service.

The person in charge was not present when the inspectors arrived at the service at 11:55 despite being rostered to commence at 8 am. The person in charge's name was not recorded on the staff sign in/out records for the previous week despite being rostered to work. The person who stated they were the deputy person in charge on the morning of the inspection was not always rostered to be present. There was no record outlining any other persons to deputise in their absence.

(1) (c) The management structure on the day of inspection 24 July 2023 was not clear.

When the inspectors arrived at the service one of the staff members identified herself as the deputy person in charge. When the named person in charge arrived, she stated a different staff member was the deputy. There was no record available outlining the management structure within the service. Clear lines of authority are necessary to ensure the quality and safety of care provided to the children attending the service.

(2) (a), (b), (c) & (d) There were no records available to demonstrate that the registered provider had considered the suitability of an adult who the person in charge reported had worked in the service from 17 to the 21 July 2023. The registered provider stated that the adult had worked in the service while children were present. The registered provider stated that she had not sought any records for the adult. Failure to adequately vet staff poses a risk of an unsuitable adult having access to the children.

(7) (c) The inspectors were not assured that the person in charge or the person who stated they were deputising had sufficient understanding of the regulatory requirements in relation to staffing levels. Both persons told the inspectors that the service met the minimum ratio requirements despite the non-compliance findings documented under regulation 11 below.

Inspectors also observed that the person in charge did not have sufficient understanding of the regulatory requirements under management and recruitment. The person in charge told the inspectors that the records required under regulation 9(2) had not been sought for one adult as she was not aware that this was a requirement.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action submitted on 28 June 2023 for Inspection dated 30 May 2023

7(a) Management has a full understanding of the regulations and will regularly re read the QRF to ensure they are kept up to date. The service will undertake training on Preparing for Tusla inspection. A copy of the QRF is available in the office.

Corrective and Preventive Action submitted on 05 October 2023 post Regulatory compliance meeting.

1(b) Going forward the registered provider is no longer the person in charge. The person in charge is the service manager. The Deputy Person in charge is a member of staff that has been with the service for approximately 8 years. The Roster also now clearly outlines the person in charge daily.

1 (c) The person(s) 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. Going forward the registered provider cannot commit to being onsite 50 hours per week, despite her daily presence – the service manager and a senior member of the staffing team have been assigned to these roles respectively and are of display of the Live Working Roster.

(2) (a), (b), (c) and (d) An external support agency have been hired as a consultant to ensure complete compliance with staff files ahead of staff members beginning with the service. Staff files have been sought for 4 adults hired directly by the service and any adult hired as relief by an agency ahead of their commencement. Staff references from previous employers have been sought and validations have taken place. If a references from a previous employer cannot be obtained a reference from a reputable source will be sought and validated. Garda vetting will be sought ahead of commencement of all staff and external agency will be tasked to ensure compliance with staff files including the Garda vetting and international police vetting disclosures. Going forward all staff files will be sent to the external agency we have hired to ensure complete compliance ahead of commencement of a staff member. Two written references will be sought, and validations will be put in writing.

7(c) The registered provider has completed the Preparing for Tulsa Inspections course with an external support agency as was previously submitted. This agency have been offering ongoing mentorship with the registered Provider. The first and second of these consultations took place on Monday the 2 of October and on Thursday the 5 of October 2023. The external support agency will complete interim audits of the service and make any recommendations necessary to ensure sustainable compliance, the first of these will take place mid-November as per email in evidence.

Supporting documentation submitted

Written records. Including files for new staff employed.

Summary Comment

The corrective actions as stated by the registered provider have been deemed to address the non-compliance. These actions will be assessed 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.

Non-Compliance Information

Inspection 30 May 2023

(1) An adequate number of staff were not available at all times to work directly with the children as outlined under regulation 11(2) below. Inadequate staffing levels could impact on the wellbeing and safety of the children. The inspectors observed that the service was significantly understaffed for the number of children in attendance. This was also observed on the previous inspection dated 7 February 2023.

The registered provider had submitted actions following that inspection on the 7 February 2023 stating a member of staff would cover breaks and that rosters would be overseen by management to ensure ratio requirements would be met. The registered provider confirmed since the last inspection on the 7 of February 2023 one staff member ceased employment in the service and only one new member of staff was employed.

The registered provider was allocated to the Toddler room on the day of inspection. At approximately 11 am the registered provider phoned a member of staff who was off and asked her to come in to relieve her from the Toddler room. The registered provider was responsible for making the main meal and therefore the number of adults available to the children would have been further reduced had the extra adult not arrived.

(2)

The inspectors assessed the adult to child ratios for the day of the inspection and the week prior. This was done through observation, discussion with staff, review of the staff roster, sign-in/out records and children's attendance records. It was evident that the ratio of adults to children was significantly below the minimum requirement within the service on all seven days.

The ratios were impacted further as inspectors observed staff leaving the rooms regularly to undertake tasks including managing bins, answering the door, and cooking/preparing the children's main meal. The findings in relation to each room and a breakdown of the overall child to adult ratio on the day of inspection is outlined below.

Non-Compliant Adult to Child ratio on day of inspection 30 May 2023

Room Name	Number of children	Age of children	Number of adults available	Minimum adult to child ratio requirement
Baby (During staff breaks)	8	7 aged 1-2 years 1 aged 2-3 years	1	1:5 (1-2 years) 1:6 (2-3 years)
Toddler (During staff breaks)	16	15 aged 2-3 years 1 aged 1-2 years	2	1:5 (1-2 years) 1:6 (2-3 years)
Montessori (From 12pm)	19	17 aged 3-5 years 2 aged 2-3 years	2	1:8 (3-5 years) 1:6 (2-3 years)

Baby Room: Two staff were allocated to between 8 and 10 children in the Baby room on all 7 days reviewed. Seven children were aged 1-2 years and one child was aged 2-3 years. All children were attending on a full-day-care basis. There was no person available to provide relief cover when staff took their breaks. This left one adult with the children for between 60 and 90 minutes daily.

Toddler Room: Three staff were allocated to the Toddler room on four of the seven days reviewed. Two staff were allocated on three days. There were between 15 and 17 children attending on days when only two staff were present. Two children were aged 1-2 years and the remaining children were aged 2-3 years.

Cover was not provided for staff breaks on any of the days. One staff member told the inspector that they had their breaks in the Toddler room on three days. A second adult told the inspector that there is often one adult alone with the children when staff take their breaks. One of the adults allocated to this room was also responsible for making a hot meal for all the children in the service.

Montessori Room: Nineteen children were availing of full day care from 12pm. Of these, seventeen were aged 3-5 years and two were aged 2-3 years. Two staff were allocated to this room which did not meet the minimum requirement. There was no staff rostered or available to provide relief for staff to take their lunch break. It is acknowledged the registered provider came to relieve the staff for lunch on the day of inspection. However, this was only made possible as an additional adult who was not rostered to work arrived to work in the Toddler room when contacted by the registered provider during the inspection.

Two adults were allocated to the Montessori room for six of the seven days reviewed. On one of the days – 26th May staff confirmed one staff member was out sick. As a result, one adult was allocated to seventeen children from 9am to 12 pm and fifteen children from 12 pm. On the other days there were between eighteen and twenty-one children aged 2-3 and 3-5 years present for full-day care after 12pm with two staff.

Inspection 24 July 2023

(1) The inspectors were not satisfied that an adequate number of staff were always available to work directly with the children as outlined.

- The inspectors arrived unannounced at the service at 11:55. The person in charge (registered provider) was not present despite being recorded on the roster as working from 8am to 2pm. The deputy person in charge told the inspectors that the person in charge had not been present in the service that day and they did not know if she would arrive. The person in charge arrived at the service at 12:15 and provided cover for staff lunch breaks in the Baby room. Staff sign in records were reviewed for the week previous. There was no record of the person in charge's attendance despite being rostered to work.

- The deputy person in charge was allocated to work directly with the children in the Baby room on the day of inspection. She reported that she was also responsible for cooking the main meal for all children in the service. She reported that no relief cover was provided during this time. This left the children in the Baby room without the minimum required number of adults as outlined below.

Through discussion with staff and review of children’s attendance records it was evident that the minimum ratio of adults to children was not always maintained on the previous working day 21 July 2023. This is outlined in the chart below.

(2)

Date/Time	Room Name	Number of children	Age of children (years)	Minimum adult to child ratio requirement	Number of adults available
21/7/23 10:30 One adult left to cook service’s main meal.	Baby	13	1 aged 0-1 12 aged 1-2	1:3 (0-1 years) 1:5 (1-2 years)	2
21/7/2023 12:30 -14:30	Toddler	16	14 aged 2-3 years 2 aged 3-5 years	1:6 (2-3 years) 1:8 (3-5 years)	2
21/7/2023 09:00 – 12:30	Pre-Montessori & Montessori rooms joined with 4 children from Toddler room	17	3 aged 2-3 years 14 aged 3-5 years	1:6 (2-3 years) 1:8 (3-5 years)	2

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action submitted on 28 June 2023 for Inspection dated 30 May 2023

The provider has issued letter of Friday closures for the month of June and notified ECCE parents and parents on Maternity Leave to take their children out of creche at notified dates to ensure they were within ratio. The service will do ratio numbers the week and day prior to rosters and notify parents via phone immediately if we cannot facilitate registered children.

Corrective and Preventive Action submitted on 05 October 2023 post Regulatory compliance meeting.

A private agency have been hired to ensure that relief staff is available at all times in the service to ensure compliance with the ratios. Four additional staff members have been hired and have commenced in the service. Rosters to be sent to external support agency to ensure compliance. Rosters to be completed the week in advance. Rosters are now a live representation of staffing levels. Rooms will be closed if and when staff phone in sick and have been closed on separate dates in both August and September to maintain ratios as per WhatsApp messages in the evidence booklet and as shown to the inspectorate during the meeting. Cover staff have been deployed to the service from a private agency to provide cover for staff members to leave the room and prepare lunch. A staff member is now rostered as out of ratio cover staff to cover for toileting, lunch and any ad hoc relief duties – this person will also provide cover to prepare the hot meal.

Supporting documentation submitted

Written evidence submitted.

Summary Comment

The corrective actions as stated by the registered provider have been deemed to address the non-compliance. These actions will be assessed on next 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;*
- (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-

- (b) an employee who is authorised in that behalf by the registered provider, and*
- (c) an authorised person.*

Non-Compliance Information

Inspection 24 July 2023

(1) & (3) The inspectors requested the registration records for children attending the Baby room to verify the ages of the children. Paper records were provided, however there were no records available with the information required under regulation (1)(a) – (i) for 3 of the 13 children who were in attendance. The person in charge stated that this information is held electronically. However, the person in charge stated that she was unable to access the information on inspection. This posed a potential risk to the health and safety of the children.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action submitted on 05 October 2023 post Regulatory compliance meeting.

(1) &(3) All records for all children are now available in paper format. Going forward all children's records will be sought firstly of paper format and secondly on the app to ensure that there will always be a record for each child in the service.

Supporting documentation submitted

Written evidence.

Summary Comment

The corrective actions as stated by the registered provider have been deemed to address the non-compliance. These actions will be assessed 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;

Compliance Information

Inspection 30 May 2023

- (1)
- (h) Details of the attendance of each child in the service were recorded at the time of entering and leaving the service.
- (j) A sample of medication consent forms were reviewed. A record was available detailing medication administered with signed parental consent.

Non-Compliance Information

Inspection 30 May 2023

(i) The staff roster was inadequate as it failed to demonstrate appropriate planning by management to ensure the correct adult: child ratios would be maintained. There was no provision made for staff break cover on the roster despite the registered provider submitting this as an action that would be taken to address non-compliance following the previous inspection dated 7 February 2023.

Inspection 24 July 2023

(i) The staff roster did not demonstrate adequate planning for staffing within the service. The roster did not accurately reflect the staffing for the day of inspection. The person in charge was rostered to work 8am to 2pm however did not arrive until 12:15. Staff break times were not documented.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action submitted on 28 June 2023 for Inspection dated 30 May 2023

(i)
Breaks are recorded daily, including cover assigned to each break. Cover and breaks will be assigned, written and recorded as per the staff roster on the day.

This document will be attached to each weekly staff roster for record keeping purposes and in the interest of clarity going forward.

If breaks cannot adequately be covered, the service will have to make the decision to close rooms to ensure a floating staff member is available to ensure ratios can be met at all times including lunch cover, meal preparation, toilet trips or any other ad hoc duties.

Corrective and Preventive Action submitted on 05 October 2023 post Regulatory compliance meeting.

(i) A new staff roster format has been developed as is evidenced. Staff breaks, and roles are clearly evidence. Members of management have been informed and retrained of the importance of ensuring that the roster is a live representation of the current staffing levels, breaks are included daily and the cover for same is included. The new roster is the only format of roster to be used going forward. The roster will be sent to the external support agency to ensure that it is sufficient during the period of mentorship. The registered Provider has been given training on the implementation of this roster and its importance to be used in a live format. The registered provider will not be rostered unless her presence is secured well in advance as part of the future planning completed by the service manager.

Supporting documentation submitted

Copy of staff roster submitted.

Summary Comment

The corrective actions as stated by the registered provider have been deemed to address the non-compliance. These actions will be assessed on next inspection.

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.

Non-Compliance Information

Inspection 30 May 2023

It was not evident that all staff in the Toddler room could identify and respond appropriately to children's care needs.

At 11:58 the inspector observed a child with what appeared to be faecal staining on their shorts and a protruding nappy which needed to be changed. The child was lying on the sofa showing signs of tiredness including rubbing their eyes and yawning. The inspector observed a staff member pick the child up and make comments about the child being tired as they had been awake since 5am. The adult then placed the child back on the sofa and left the room.

It is acknowledged that the child's nappy and clothing were subsequently changed by another adult who was changing all the children's nappies in turn. The child was not provided with an opportunity to sleep until the scheduled sleep time with the other children after dinner at 12:45pm.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action submitted on 28 June 2023 for Inspection dated 30 May 2023

Staff were retrained on observations of children's form throughout the day. If a child is noticeably tired, they will be offered a nap immediately. Staff will regularly observe and will check children's nappy on a scheduled basis throughout the day. Staff will be trained of the importance of attending to children's needs and management will re-train of the importance of a Child-Led programme in all aspects of their care. Staff will undertake training on Safe Sleep practices.

Supporting documentation submitted

Written evidence.

Summary Comment

The corrective actions as stated by the registered provider have been deemed to address the non-compliance. Practice will be reviewed on next inspection.

Part VI - Safety

Regulation 23 - Safeguarding health, safety and welfare of child

A registered provider shall ensure that all reasonable measures are taken to safeguard the health, safety and welfare of a pre-school child attending the service and that the environment of the service is safe.

Compliance Information

Inspection 30 May 2023

General Safety:

- The entrance door to the service was adequately secured to ensure the safety of the children within and to avoid unauthorised persons accessing the service or children exiting unsupervised. The outdoor area was secured by a coded gate.
- The toys and play equipment observed in use by the children on the day of inspection were safe and in good working order.

Infection Control:

- Individual bed linen was provided for the children in the Baby and Toddler rooms. Staff stated that bed linen was laundered weekly.
- Children's soothers were suitably stored in individual labelled containers.
- Staff followed the nappy changing policy.

Administration of Medication:

- Medications were stored safely out of reach of children in their original containers.
- Staff demonstrated an understanding of the procedure to follow in the event that a child may require medicine. Records were available of previous medications given. The forms were completed correctly including the time and date medication was given, the name of the staff who gave it and the signature of a second staff as a witness.

Safe Sleep:

- Children aged under two years were provided with standard cots to sleep and children aged over two years were provided with low level beds to sleep.
- Staff were familiar with safe sleep guidelines when questioned and children's sleep checks were recorded every ten minutes.

Fire Safety:

- Emergency exits were kept clear.

Inspection 24 July 2023

This follow-up inspection focused on the actions taken to address the non-compliance findings numbered 1 – 10. Inspectors observed that appropriate actions had been taken to address the non-compliances numbered 2, 3, 4, 6, 7, 9 & 10 as outlined.

General Safety:

2. Tall cabinets in the hallway were secured to prevent tipping and injury to a child.
3. The sanitary area used by the Pre - Montessori children was free from objects that could pose obstruction or a hazard to the children.
4. The inspectors observed that all cooking equipment that could pose a risk of burning was placed securely out of reach of children.
6. The Montessori room was recorded at a comfortable temperature of 21°C.

Infection Control:

7. Dispensers were equipped with paper towels throughout the inspection to support handwashing.
9. The inspectors did not observe children accessing the nappy changing facilities outside of when they were having their nappy changed, to prevent the spread of infection.
10. The inspectors observed that bins containing used nappies were changed in a timely manner and no malodours were present.

Non-Compliance Information

Inspection 30 May 2023

General Safety:

1. In the baby nappy changing area cleaning solution was stored beside the mat posing a potential safety risk. This non-compliance was found on the previous inspection dated 7 February 2023. The corrective and preventive actions submitted by the registered provider following that inspection had not been carried out.
2. In the main hallway tall cabinets were not safely secured and posed a potential injury risk if they were to fall on a child. This non-compliance was found on the previous inspection dated 7 February 2023 and in response the registered provider stated it was secured. The corrective and preventive actions submitted by the registered provider following that inspection had not been carried out.
3. In the sanitary area used by the PreMontessori children, a heavy tall package containing toy equipment was stored in an upright position in front of the changing mat. This package partially obstructed the area and posed a potential injury risk.
4. In the Montessori room at lunchtime staff brought in a large pot of rice. The hot pot of rice was positioned on an unstable shelving unit and was accessible to the child posing a potential scalding risk.
5. In the Toddler room a trailing cable from a fan and a looped cord from a bag were within reach of the children posing a risk of strangulation if accessed.
6. The temperature recorded in the Montessori room at 11:35am was 25. 2°C. This temperature may provide an uncomfortable environment for the children and it was above the recommended temperature of 18 °C -22°C for a care room. While it's acknowledged two windows were open in the room and two fans were in operation at the time none of these measures were effective in reducing the temperature

Infection Control:

7. The wall mounted paper dispensers were empty in the following areas: the kitchenette in the Toddler room where staff prepared food; the Baby, PreMontessori and Montessori sanitary areas and the Montessori care room. This impacted effective hand hygiene. Children in the Montessori room were observed drying their hands on their clothing. This non-compliance was found on the previous inspection dated 7 February 2023. The corrective and preventive actions submitted by the registered provider following that inspection had not been carried out.
8. In the Montessori sanitary area toilet roll was not wall mounted and instead was stored on the floor posing an infection control risk.
9. In the Toddler sanitary area children were observed to wander in and out when staff were changing nappies and handle the bin and floor posing a potential infection control risk.
10. The nappy changing bins were not changed in a timely manner. A foul odour was present in the Baby and Toddler sanitary areas.

Inspection 24 July 2023

This follow-up inspection focused on the actions taken to address the non-compliance findings numbered 1 – 10. Inspectors observed that appropriate actions had not been taken to address the non-compliances numbered 1, 5 and 8 as outlined.

1. Cleaning products which could pose a risk of injury if accessed by a child were not stored out of reach of children. The inspectors observed cleaning products on a low shelf in the sanitary area used by the Baby room.
5. Trailing cables were not secured out of reach of children. The inspectors observed loose cables from a fan and a charger on the floor of the Toddler room posing a risk of strangulation if accessed by a child.
8. Inspectors observed toilet roll stored on the cistern of the toilets in the sanitary facilities adjacent to the Montessori room. This posed risk of overhandling of the toilet roll causing cross infection. It is acknowledged that the staff member stated toilet roll holders had been installed but had broken the day prior to the inspection.

Action submitted by the Registered Provider

Corrective and Preventive Action submitted on 28 June 2023 for Inspection dated 30 May 2023

General Safety:

1. Staff were retrained on safe nappy changing policy and this is to include the safe storage of cleaning solutions. The cleaning solution will be stored in the shelving above the nappy changing unit. The importance of the storage of such solutions was relayed to staff in a formal training.
2. The hall cabinet is secured to the wall. Photographic evidence provided.
3. Staff have been trained and notified that all deliveries must be stored immediately in the office and not in the classrooms or hallways.
4. The shelving unit in the Montessori has been removed.
5. The trailing cable has been fixed with trunking. Photographic evidence of the same.
6. Blackout blinds have been purchased and installed to be used to block out some of the sunlight at designated times in the day. The service will rent AIR con units going forward should we fail to maintain adequate temperatures.

Infection Control:

7. The manager of duty has been instructed to ensure there is paper towels in the dispensers as part of the risk assessment checks at the designated times.
8. Toilet roll holders have been installed.
9. Nappy changing Policy was reviewed and it was noted children must not stay in the changing area after their nappy has been changed. They must leave the area after directly after.
10. Bins will be changed regularly and as needed.

Infection Control Policy to be reviewed and re-distributed to staff and will be part of the Induction Training for new staff. Risk Assessments and Health and Safety and the storage of cleaning solutions will be noted at the regular staff training meetings.

Corrective and Preventive Action submitted on 05 October 2023 post Regulatory compliance meeting.

The non-compliances numbered 1, 5 and 8 have been addressed. Photographic evidence was given to the inspectors at the Regulatory compliance meeting on the 29 September 2023. Staff have all completed a conducting risk assessment course to ensure that they are trained in and fully aware of the importance of completing a throughout risk assessment to ensure the safety and wellbeing of all service users. Managers risk assessments and daily risk assessments are carried out in all areas of the service. The external support agency will conduct interim audits to ensure that the service is free of any hazards. The first of which will occur on the 15 of November 2023.

Supporting documentation submitted

General Safety:

Written and photographic evidence.

Infection Control:

Written and photographic evidence.

Summary Comment

The corrective actions as stated by the registered provider have been deemed to address the non-compliance. These actions will be assessed on next inspection.

Part VI - Safety

Regulation 27 – Supervision

A registered provider shall ensure that pre-school children attending the service are supervised at all times.

Non-Compliance Information

The inspectors observed that a child attending the service was not adequately supervised at all times on the day of inspection. In the Montessori room at approximately 11:45 a child was standing alone at the door of the sanitary area with her dress half on. A maintenance man came into the room to check the fire alarm. There were no staff present in the room as they were both in the outdoor area at the time. This posed a risk of unauthorised access to the child. The child only came to the attention of staff as another child in the outdoor area wanted to use the toilet and couldn't open the door to get into the room.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action submitted on 28 June 2023 for Inspection dated 30 May 2023

Children will be supervised using the bathroom at all times and this has been communicated to staff via a memo. Staff will be supervised by management and will be instructed to supervise children at all times. Staff will be trained on the importance of children's supervision at the regular staff meetings and when required. New staff receive training during their induction in relation to child supervision. All current staff have received in house refresher training in relation to same. The service are in discussions with support agency to provide full in-house refresher staff induction training for all staff to ensure that they are all aware of the roles and responsibilities when it comes to child safety and awareness of the regulations, and their responsibility to ensure also ensure compliance is met and sustained. Children are to be supervised at all times as per memo sent to all staff referenced in the previous CAPA report.

Supporting documentation submitted

Written record.

Summary Comment

The corrective actions as stated by the registered provider have been deemed to address the non-compliance. These actions will be assessed on next inspection.

Early Years Inspectorate Regulatory Report Pre School