

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015DR155
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Name of Service:	Naíonra Dun Droma
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Address of Service:	BSJ St Johns GAA Club, Grange Road, Rathfarnham, Dublin 16, Co. Dublin
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Eircode:	D16 DK76
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Name of Registered Provider:	Carol Merriman, Jane Ní Chonchúir
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Service type:	Sessional
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Date of Inspection:	18/09/2024
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No of pre-school children:	AM	19	PM	n/a
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Address of the Early Years Inspectorate:	The Brunel Building, Heuston South Quarter, St. John's Road West, Dublin 8
Inspection undertaken by:	R. Brien
Title:	Early Years Inspector

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
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Description of service

Naíonra Dun Droma is a sessional service which provides care to children aged 2 to 6 years. The service is registered to operate from 09:00 to 12:30, Monday to Friday.

The service operates from a ground floor room within Ballinteer St. John's GAA club in an urban, residential area of Rathfarnham, south Dublin. The children have access to Marley park which is accessible directly from the GAA club for outdoor play.

Staffing

The service currently employs 4 staff and there were 5 adults working directly with the children on the day of inspection including the registered provider and an adult on work experience.

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

The inspection focused on an examination of compliance under the following regulations:

- 9 (1)(a)(b),(2),(3),(4)- Management and Recruitment,
11 (1),(3),(8)(c) – Staffing Levels,

16 (h),(k) – Record in Relation to Preschool Service,
19(1)(a)(b) – Health, Welfare and Development of Child,
23 Safeguarding, Health, Safety and Welfare of Child,
26(1)(a),(4) Fire Safety Measures.

These findings are outlined within the relevant regulations within this report.

A sampling process was used to assess compliance under regulation 16(k) Record in Relation to Preschool Service.

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

An Immediate Action Notice was issued on 18 September 2024 for non-compliance with regulation 9(2)(c). A mandatory Garda vetting disclosure was not available for one adult who had access to children contrary to the National Vetting Bureau (Children and Vulnerable Persons) Act 2012.

The registered provider submitted a response on 18 September 2024 outlining the actions being taken to address this non-compliance.

Acknowledgments

The inspector wishes 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

(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

- (1)
- (a)(b)
- The service had a designated person in charge and a named person to deputise as required who were both on the premises throughout the inspection.
- (2)

The files of five adults were reviewed as part of the inspection. This included one staff member who had commenced working in the service since the last inspection on 22 November 2021 and an adult who was present on work experience. Documentation was reviewed in respect of these adults and met regulatory requirements as follows:

(a)(b)

Of the ten validated, written references that were required, five were available from a past employer and one was available from a source other than a past employer.

(c)

Garda vetting disclosures had been obtained for four 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 for one adult. Please refer to the information outlined under regulation 23 of this report.

(d)

Police vetting was required for three adults and was available for two adults who had lived outside the State for a period exceeding six months as an adult.

(4)

Records were available evidencing that the four staff members who were employed to work directly with the children held the required qualification or equivalent.

Non-Compliance Information

(2)(a)(b)

There was no second reference available in respect of one adult.

(2)(c)

A mandatory Garda vetting disclosure was not available for one adult who was present in the service on the 18 September 2024 contrary to the National Vetting Bureau (Children and Vulnerable Persons) Act 2012. An Immediate Action Notice was issued on the day of the inspection. The registered providers submitted a response on the same day outlining the actions being taken to address this non-compliance.

(2)(d)

Police vetting was not available from one country in respect of one staff member who had lived outside the State for a period exceeding six months as an adult.

This non-compliance was present on the last inspection on 22 November 2021. The corrective and preventive actions as outlined by the registered providers did not prevent recurrence of this non-compliance.

(3)
The registered providers did not take appropriate measures to ensure that all employees were suitable to work in an early years service prior to their commencement.

It is acknowledged that two past employer references and a reference from a reputable source were available in respect of two adults, however, there was no evidence available to demonstrate that these references had been validated by the registered providers prior to commencing in the service.

This non-compliance was present on the last inspection on 22 November 2021. The corrective and preventive actions as outlined by the registered providers did not prevent recurrence of this non-compliance.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

2(a)(b)

The adult provided a second reference and verification requested and obtained by e-mail. A note is attached to all references stating date of verification. Our Recruitment Policy states that a record must be kept of the verification of all references.

2(c)

The adult without Garda vetting disclosure will not be working with us till the correct Garda vetting is in place. Garda Vetting has now been carried out and no criminal record has been disclosed. As per our Recruitment Policy, full Garda Vetting procedures will be carried out prior to any person being appointed to work with children in our setting

2(d)

A Police Report has been presented for the applicable staff member. International Police Report must be provided by candidate before commencement of employment

(3)

All References on file have been verified. As per our Recruitment Policy, all references will be verified before commencement of employment.

Supporting documentation submitted

Written evidence was presented to demonstrate the corrective and preventive actions submitted by the registered provider.

Summary Comment

The corrective and preventive actions as stated by the registered provider have been deemed to address these non-compliances.

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.

(3) Subject to paragraph (5), a registered provider of a sessional pre-school service shall ensure that at all times the minimum ratio of adults to children specified in column (3) of Part 2 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) therefore at that reference number is satisfied.

(8) Without prejudice to paragraphs (2) to (7)-

(c) a registered provider of a sessional pre-school service shall ensure that, where the person in charge operates the service single-handedly, a second person familiar with the operation of the service and in a position to provide assistance to the person in charge in operating the service is, at all times, within close distance of the service and available to attend the service to assist the person in charge in the event of an emergency.

Compliance Information

(1)

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

(3)

The minimum ratio of adults to children for sessional care services was adhered to at all times during the inspection. There were nineteen children being supervised by two adults on the day of inspection.

(8)(c)

Not applicable as the service is not operated single-handedly.

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;

(k) details of any accident, injury or incident involving a pre-school child attending the service.

Compliance Information

(h)

Details of the attendance of each child were recorded at the time of entering and leaving the service.

(k)

A sample of accident and incidents records were reviewed. These records were signed by staff and parents and were completed appropriately.

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)

The service has a healthy eating policy in place and the registered provider reported that children bring in their lunch from home and lunch took place at 11:05. Water was available and accessible throughout the inspection and all children were given a drink with their meal. Children were observed engaging in conversation with staff and their peers during their meal and staff supported children who needed assistance with their lunch.

Children were given responsibility appropriate to their age and were encouraged and supported to be independent. The inspector observed children using the toilet as they needed and cleaning up after their lunch

and play. Staff provided an appropriate level of supervision whilst supporting the children's independence during play and lunch time.

Staff demonstrated a good awareness of the needs of each child in their care and responded to children's cues promptly. Staff displayed warmth and sensitivity during all interactions with the children and were observed supporting children in their play. Staff were observed to use distraction, gentle tones and praise when promoting positive behaviour in line with the service's behaviour policy.

Transitions within the service were managed well and the atmosphere in the service appeared calm and relaxed. Children's choices were respected with children given the opportunity to choose their own play equipment and activities during free play. Children's language development was supported through one to one and group discussions and songs which were observed during the inspection.

Staff described how they communicate with parents daily about their child at arrival and collection times.

The care room was bright and was arranged into defined areas of interest providing children with the freedom to play and explore. Designated areas of interest included small world toys, construction toys, a home corner and imaginary play area with dress up play materials, sensory play and a rest area with books. The care room provided a range of developmentally appropriate play experiences for the children and was adequately resourced with a variety of materials.

The environment was laid out to support the children's independence. Low level hooks were provided for coats. Play materials were observed to be accessible to the children on low level shelving. Low level tables and chairs were available in the care room.

The service is located beside Marley Park which is directly accessible from the grounds of the GAA club. On the day of inspection the children were observed to go on an outing to the park.

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 staff and inspection of the premises that the registered providers had taken the following steps to safeguard children attending:

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 toys and play equipment observed in use by the children on the day of inspection appeared in good working order.
- Cleaning agents were stored safely out of reach of children.
- All storage facilities were inaccessible to children.

Infection Control:

- Liquid soap, warm water and paper towels were available to facilitate hand washing. Staff were observed to carry out hand washing as appropriate. The children were supported to wash their hands at regular intervals including after using the toilet.
- An infection control policy was in place to inform practice. The premises, equipment and materials appeared clean and maintained in good condition.
- Children's lunches were stored in the refrigerator.

Outing:

- The registered provider reported that the service undertakes regular outings to Marley park with the children. A detailed policy was in place to guide safe practice before and during outings. Staff demonstrated an awareness of measures to take to safeguard the children including carrying out a risk assessment, taking regular head counts and ensuring a first aid kit is always available. The outings policy was followed by staff as they brought the children to Marley Park on the day of inspection.

Non-Compliance Information

General Safety:

1. Garda vetting was available for one staff member. However, this vetting disclosure was not dated within the previous three years in adherence with the Early Years Inspectorate Regulatory Notice 'EYI-RN12.3 Renewal of Garda Vetting'.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1. We have applied for Garda Vetting renewal for staff member whose vetting had expired. Files will be checked annually to ensure Garda Vetting is kept up to date and staff will be prompted to follow through on the procedure.

Supporting documentation submitted

General Safety:

Written evidence was presented to demonstrate the corrective and preventive actions submitted by the registered provider.

Summary Comment

The corrective and preventive actions as stated by the registered provider have been deemed to address this non-compliance. These actions will be assessed on the next 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*
 - (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 monthly fire drills that had taken place in the service. The last fire drill had been recorded as undertaken on the 20 June 2024.
 - (4) The procedures to be followed during a fire drill and in the event of a fire were displayed in a conspicuous location within the service.