

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015DS058
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Name of Service:	Precious Minds Crèche & Montessori School
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Address of Service:	1 Griffeen Glen Drive, Lucan, Co. Dublin
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Eircode:	K78 YV90
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Name of Registered Provider:	Erica Clancy , Joy Maguire
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Service type:	Full Day, Part Time, Sessional
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Date(s) of Inspection:	08/05/2023
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No of pre-school children:	AM	29	PM	20
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Address of the Early Years Inspectorate:	Floor 7, Brunel Building, Heuston South Quarter, Kilmainham, Dublin 8
Inspection undertaken by:	Fiona Carty and Sarah Quigley
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
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Description of service

Precious Minds is an early years service located in Lucan, Co Dublin offering full day, part time and sessional care. The service is provided from a purposely adapted domestic dwelling for the provision of a pre-school service. The service operates from 7.30am to 6.30pm, Monday to Friday. A sessional only service operates from 9.30am to 12.30pm daily for 38 weeks of the year.

The service consists of 4 care rooms, sanitary facilities, a kitchen and an office area. A secure outdoor play area to the rear of the building is available.

Staffing

There were 7 adults present on the day of the inspection including two students. All of the 7 adults present worked directly with the children throughout the inspection. The two registered providers arrived subsequent to the inspectors arrival and helped in the care rooms when needed. An additional staff member arrived to work with the children during the afternoon.

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, information and records and safety. The inspections may also focus on other areas as required.

The inspection focused on an examination of compliance under regulations 9, 11, 15, 16, 19, 23, 25 and 26. These findings are outlined within the relevant regulations within this report.

A sampling process was used to assess compliance under regulation 9(2)(3)(4). As a result, the scope of the inspection included a review of documentation for staff members who had been employed in the service following the last date of inspection on the 3rd February 2021. A sampling process was also used to assess compliance under regulation 15(1) and 16 (1).

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 providers, 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 of four staff members and two students who had commenced in the service since the last inspection dated 3rd February 2021.

(a) Five past employer references were available for three adults, of these three were adequately validated.

(b) Three references had been sourced from a person other than a past employer for two adults who had only one or no previous employers, of these one was adequately validated.

(c) Garda vetting disclosures were available for all adults.

(d) Not applicable as no adult had lived abroad for more than six consecutive months.

(4) Records were available to evidence that all adults employed to work directly with the children held at least a major award in Early childhood Care and Education at Level 6 on the National Qualifications Framework.

Non-Compliance Information

(2)(a)(b)

- Two validated references were unavailable for two adults.
- Five references had not been adequately validated prior to the adult starting in the service.

(3) A review of documentation evidenced that the procedures specified above under Regulation 9(2) had not been completed for three adults prior to them commencing employment in the service. Whilst it is acknowledged that two adults had a Garda vetting disclosure it had not been obtained by the service prior to both adults commencing in the service. Two adults had no references on file and one reference for one adult had not been validated until after they had commenced employment in the service.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(9)(2) References have been validated for two adults.

Files have been updated where possible. All references have been verified to correct the non-compliance and a note has been made on files that the non-compliance was found and rectified.

The service has purchased a new induction check list book from ECI to assist with new employees and must be fully completed before they have started.

Re-training given to all the pertinent staff on the protocols for completing forms in a timely manner and before the start date.

(9)(3)

The service acknowledge that they must Garda Vet all adults through the service and not accept student/college garda vetting alone.

No adult may start until garda vetting is completed with two written references confirmed.

Supporting documentation submitted

No supporting documentation submitted.

Summary Comment

The corrective and preventive actions submitted by the registered provider were reviewed by the inspector and are deemed to meet the requirements of Regulation 9.

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) The registered provider ensured that an adequate number of adults were working with the children at all times. 7 adults were allocated to work directly with 29 children. Both registered providers were available to assist as needed.

(2) At all times the minimum ratios of adults to children were maintained.

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.*

Compliance Information

(1) A sample of 10 records were reviewed by the inspectors.

The registered provider ensured that a record in writing was kept of the details relating to (a), (c), (d), (e), (f), (i) of the above Regulation for all of the records reviewed.

Non-Compliance Information

(1)(b)The registered provider did not ensure that a record in writing was available showing the date the child began attending the service in two records of the documentation inspected.

(g) There was no record of the telephone number of the child’s registered medical practitioner in one of the documents the inspectors viewed.

(h) There was no record of immunisations, if received by the children in five of the documents reviewed.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(b)The service shall ensure the information from the App shall also be put in writing in the folder.

Missing information has been transferred and will be held in a hard copy in the child’s file.

(g) this has also been transferred from the app.

(h) as we did get the opportunity to explain on the day of our inspection, we had been in the process of updating vaccination and doctor information. This is now complete.

Information will be held in a hard copy. Timely reminders to be sent to parents to update vaccinations after their child has started and as the children reach certain milestone vaccinations. Doctor’s details will be sought until finalised.

This has been a current issue, as parents find it hard to secure a GP in the Lucan area.

Supporting documentation submitted

No supporting documentation submitted.

Summary Comment

The corrective and preventive actions submitted by the registered provider were reviewed by the inspector and are deemed to meet the requirements of Regulation 15.

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) A written record was available in each of the care rooms detailing the attendance of each preschool child on the day of inspection.
 - (i) A staff roster was available and displayed in the service.
 - (j) Written records of the administration of medication were available. A sample reviewed on the day of inspection documented necessary details.
 - (k) Written records of accidents and incidents which occurred in the service were available on the day of inspection. A sample reviewed documented necessary details.

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

Compliance Information

The service promoted healthy eating as per their policy. Snacks and hot meals were provided by the service to the children, hot meals were prepared on site. Drinks were always available to children and located in a dedicated water station area within each care room. Young children were given the opportunity to feed themselves and assistance was offered when required.

Nappy changing was carried out regularly at set times throughout the day and when required. Warm interactions were observed during nappy changes.

The care rooms had defined areas of interest including a home corner. The service also had materials from the Montessori method of education available for use. Children's artwork was displayed on the walls together with family photos and educational posters.

A separate sleep room was provided for children to sleep when required.

Staff assisted children when required but also offered encouragement when children performed tasks independently. Staff demonstrated sensitivity and warmth in their interactions with children and soft tones and gentle language was observed to be used during all interactions with staff and children in all care rooms. Staff managed minor disagreements well and in a positive manner. Staff were heard encouraging children to be mindful of their friends' feelings. The play experiences in the service were observed to be child-led. Children were observed exploring their environment, engaged in activities and playing with each other and the staff. Staff made themselves available to the children to scaffold and extend learning as well as be available should a child require support. The children spent the morning engaging in activities together including building and imaginative play games.

The outdoor area was secure with equipment that helped develop gross motor skills which included a climbing frame and see-saw.

Non-Compliance Information

(1)(a) Appropriate rest facilities were not available for children attending the Montessori 1 and 2 rooms on a full day care basis and required a space to rest during the day.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The rest areas will be restored in both Montessori rooms.

Montessori 1 with a larger area as the children are full time.

Montessori 2 will be a rest area for sessional children.

We will be consulting with the team at the meeting as to why they keep moving the area.

We are also aware that potty training accidents have soiled the area on a few occasions.

A second set of cushions will be purchased so that cleaning does not interrupt the provision of the rest area.

Supporting documentation submitted

No supporting documentation was submitted.

Summary Comment

The corrective and preventive actions submitted by the registered provider were reviewed by the inspector and are deemed to meet the requirements of Regulation 19.

This non-compliance will be re-inspected on the 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

General Safety:

The entrance door into 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 were safe and in good working order.

Cleaning materials were stored out of reach of children. Heavy furniture was secured, and cables were out of reach of children.

Infection Control:

An infection control policy was in place to inform practice. The children were encouraged to wash their hands at regular intervals including after using the toilet and before meals. Schedules were in place and maintained to ensure the service, equipment and materials are regularly cleaned. Staff were observed to carry out consistent hand washing as appropriate. Staff stated appropriate exclusion periods for adults and children with infectious illnesses were implemented in the service as per the policy.

Administration of Medication:

There was written evidence of prior parental consent for the administration of both temperature reducing and prescribed medications, and there were procedures in place to safely administer and document such medication if required, including in the case of an emergency. Staff adequately detailed the procedures for administering medication when required during discussions with the inspectors.

Safe Sleep:

Staff were familiar with safe sleep guidance and adequately outlined safe sleep procedures in place in the service during discussions with the inspector. Sleep logs were maintained in all rooms where children slept, cots were provided for all children under the age of 2 years to sleep in and children who were aged 2 years were facilitated to sleep on low level beds.

Fire Safety:

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

Non-Compliance Information

Infection Control:

1. The bins in the Wobbler room and the sanitary accommodation on the ground floor were not pedal operated lidded bins. Staff were observed lifting the lids of the bins to dispose of waste which could cause cross contamination.

Administration of Medication:

2. A sample of medical administration forms were reviewed and there were no witness signature following the administration of medication to two children in the Wobbler room. Although staff were aware of the procedures to follow these had not been documented.

Action submitted by the Registered Provider

Corrective & Preventive Action

Infection Control:

The Wobbler pedal bin has been returned. It had been removed as the children were unable to use it and were lifting the lid anyway. Only pedal bins will be used in bathrooms. The team will continue to model how to correctly use the pedal bins.

Administration of Medication:

While the inspection did identify omissions, the service hope that the Inspectorate can see that these are anomalies and that on-the-whole the protocols of medication administration are diligently adhered to. We are disappointed that any forms were found incomplete. Checks will be made by management on a weekly basis.

Reiteration and Re-Training in Medical Form completion in June Team Meeting.

New books have been acquired. Checks will be made by management on a weekly basis.

Supporting documentation submitted

Infection Control:

No supporting documentation submitted.

Administration of Medication:

No supporting documentation was submitted.

Summary Comment

The corrective and preventive actions submitted by the registered provider were reviewed by the inspector and are deemed to meet the requirements of Regulation 23.

These non-compliances will be re-inspected on the next inspection.

Part VI - Safety

Regulation 25 - First aid

(1) A registered provider shall ensure that a person trained in first aid for children is, at all times, immediately available to the children attending the pre-school service.

(2) A registered provider shall ensure that a suitably equipped first aid box for children-

(a) is safely stored in an easily accessible and conspicuous position on the premises, and

(b) is available to the children attending the pre-school service at all times.

Compliance Information

(1) A person trained in first aid was immediately available to the children at all times on the day of inspection.

(2) The first aid box was stored in a conspicuous location within the service.

(a) A first aid box was always available to the adults and children in the service.

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 last drill had been recorded as undertaken on 26th April 2023.
- (b) Records were available detailing the firefighting equipment and fire detection system in the service. The last dates of maintenance recorded were 21st November 2022 and 12th January 2023.