

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015DS099
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Name of Service:	Ashling Nursery and Montessori
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Address of Service:	4 Main Road, Tallaght, Dublin 24, Co. Dublin
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Name of Registered Provider:	Vincent Traynor
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Service type:	Full Day
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Date of Inspection:	10/05/2023
Date of Regulatory Compliance Meeting:	05/07/2023

No of pre-school children:	AM	43	PM	28
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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 & O. Quill
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

Ashling Nursery and Montessori is registered to provide full time care for children from 0 to 6 years of age. The service operates from 07:00 to 18:30, Monday to Friday.

The service is located in a purposely adapted, two storey residential property in Tallaght, south Dublin. There are three preschool rooms in the service. The Toddler room caters for children from 11 months to 3 years of age. The Honeybees Early Childhood Care and Education (ECCE) room caters for children from 3 to 5 years of age. These rooms are located on the ground floor and children attend on a full time basis. The Ladybirds ECCE room is located on the first floor and operates on a sessional basis and caters for children from 3 to 5 years of age. There is also a dedicated sleep room. The children have access to a large, fully enclosed outdoor play area to the rear of the premises.

On the morning of inspection, the Honeybees and Ladybirds ECCE groups were both present in the first floor Ladybirds ECCE care room.

Staffing

The service currently employs 7 staff including a manager. There were 7 staff working directly with the children on the day of inspection including a student. The registered provider does not work directly with the children and was present on the day of inspection.

Methodology

Tusla's Early Years Inspectorate is the independent statutory regulator of early years services in Ireland. The Child Care Act 1991 (Early Years Services) Regulations 2016 define the duty of a registered provider to ensure the safety and well-being of children and to comply with these regulations. This Act also gives Tusla the authority to assess compliance with the regulations. The purpose of regulation in relation to early years services is to ensure that the care, safety, and well-being of children attending such services is upheld. Inspections of early years services are planned based on the following:

- Previous inspection history
- Any information received in relation to the service

The findings on inspection are based on:

- Information obtained through examination of documentation
- Direct observation
- Discussion with relevant staff

This inspection was unannounced and focused on the area of governance/ health, welfare and development of child/ safety/ premises and facilities. The inspections may also focus on other areas as required.

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

- 9 - Management and Recruitment,
- 11 – Staffing Levels,
- 16 - Record in relation to pre-school service,
- 19 – Health, welfare and development of child,
- 20 – Facilities for rest and play,
- 23 – Safeguarding, health, safety and welfare of child,
- 25 – First Aid,
- 29 – Premises.

However, on inspection additional non-compliance which posed significant risk was identified under regulations

- 8 – Notification of change in circumstances,
- 10 – Policies procedures etc. of a pre school service,
- 30 – Minimum space requirements.

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) – Management and recruitment, regulation 16 (j)(k) – Record in relation to pre-school service and regulation 30 – Minimum space requirements.

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

- Three immediate action notices were issued to the registered provider arising from findings on inspection:

An Immediate Action Notice was issued on 10 May 2023 for non-compliance with regulations 23 as a fire exit was locked and the key to the door was not easily accessible in the Toddler cot room and regulation 25 as there were no staff available to the children who were trained in First Aid Responder (FAR) training.

- The registered provider submitted a response on 11 May 2023 regarding the locked fire escape route which was deemed to satisfactorily address this non-compliance as an interim measure.

A referral was made to the Chief Fire Officer on 29 May 2023 to assess the suitability of this escape route.

- The registered provider submitted a response on 15 May 2023 demonstrating that three staff are registered to attend FAR training commencing on 20 May 2023.

A mandatory Garda vetting disclosure was not available for two adults who were on the premises on the day of inspection contrary to the National Vetting Bureau (Children and Vulnerable Persons) Act 2012. As a result, an Immediate Action Notice was issued on 11 May 2023. The registered provider submitted evidence of Garda vetting for the two adults on the same day demonstrating that this was in place prior to commencement in the service.

- A regulatory compliance meeting was held on 05 July 2023 with the registered provider and two members of the management team 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, person in charge, staff and children who were present on the day of the inspection.

Part II - Registration and Register

Regulation 8 - Notification of change in circumstances

(3) Where a registered provider has been unable for good and proper reason to notify the Agency within the time specified in paragraph (1) or (2), as the case may be, of a change in the details in relation to the pre-school service contained in the register pursuant to section 58C(2) of the Act or Regulation 7(2), the registered provider shall notify the Agency in writing of the change as soon as possible thereafter.

Non-Compliance Information

(3)
The registered provider did not notify the Agency in writing of the change in the number of children the service can accommodate at one time. The service is registered to provide care to a maximum of 40 children, however on the day of inspection there were 43 children present from 10:15 to 12:00.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

Registrations limited to 40 going forward.

Supporting documentation submitted

No supporting documentation submitted.

Summary Comment

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

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) Following a discussion with the person in charge it was confirmed that four adults commenced working in the service since the last inspection on 08 September 2022. Documentation was reviewed in respect of these adults and met regulatory requirements as follows:
- (a)(b) Of the eight validated, written references that were required from a past employer or a source other than a past employer, one reference was available from a past employer.
- (c) Garda vetting disclosures from the National Vetting Bureau of An Garda Síochána were available for **three** adults.

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

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

Non-Compliance Information

A number of issues were identified with how the service manages safer recruitment processes as detailed below:

(2)(a)(b) There were no references available in respect of two adults. There was no second reference available in respect of one adult.

(d) It was not possible to determine whether there was a requirement for police vetting for two adults present on the day of inspection as there was no records of experience on file for these adults.

(3) The registered provider did not take appropriate measures to ensure that all adults were suitable to work in an early years service prior to their commencement as outlined below:

- It is acknowledged that a past employer reference and a reference from a reputable source were available for one staff member however, there was no evidence available to demonstrate that these references had been validated by the registered provider.
- The registered provider did not ensure that a Garda vetting disclosure was obtained for one adult prior to them commencing work in the service. The staff member commenced working in the service on 14 November 2022 and Garda vetting was obtained on 08 December 2022.

(4) There was no evidence available to show that one adult who had been employed since the last inspection who was working directly with the children in the service held a relevant major award in Early Childhood Care and Education on the National Framework of Qualifications.

Non compliances in relation to (2)(a)(d) and (3) above were present on the last inspection on 08 September 2022. The corrective and preventive actions submitted by the registered provider did not prevent the reoccurrence of these non-compliances.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(2)(a)(b) Two past employer references were submitted in respect of one adult. One reference from a reputable source submitted in respect of another adult. A reference for a third staff member is currently being sought.

(3) Staff Personnel files are currently being organised & updated. Checklist is now in place to ensure all documents for new staff will be received.

Supporting documentation submitted

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

Summary Comment

(2)(a)(b) One reference remains outstanding for one staff member. The regulatory requirement has not been met.

(2)(d) Police vetting is outstanding for one staff member. The regulatory requirement has not been met.

(3) There was no evidence to demonstrate that the references submitted had been validated by the registered provider. The regulatory requirement has not been met.

(4) Evidence of appropriate qualifications remains outstanding for one adult. The regulatory requirement has not been met.

Part III – Management and Staff

Regulation 10 - Policies, procedures etc. of pre-school service

A registered provider of a pre-school service shall ensure that the written policies, procedures and statements specified in Schedule 5 are in place for the service.

Non-Compliance Information

The registered provider did not ensure that all written policies, procedures and statements specified in Schedule 5 were in place for the service. There was no evidence available on the day of inspection to demonstrate that the service had the following required policies:

1. Policy on administration of medication
2. Policy on infection control
3. Policy on managing behaviour

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

All files and policy documents are being reviewed and are being updated. All policy folders will be readily available in the main office for review by staff and any visitors, parents or inspectors. A copy of Nappy Changing Procedures & Policies, Medication administration & Policies, Accident & Incidents, Sleep Procedures & Policies were all given to staff for review. These policies are to be reviewed monthly and updated if any changes are needed

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 this non-compliance.

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.

(4) Subject to paragraph (5), where a registered provider contemporaneously provides-

(a) a sessional pre-school service, and

(b) a full day care service or a part-time day care service, or both, the minimum ratio of adults to children applicable for the duration of the sessional pre-school service in respect of the children attending that service shall be the ratio specified in paragraph (3).

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

(a) a registered provider of a pre-school service other than a child-minding service or a sessional pre-school service shall ensure that there are at least 2 adults on the premises at all times,

Compliance Information

(2) The minimum ratio of adults to children for full time services was adhered to at all times during the inspection in the Toddler room. There were seventeen children in the Toddler room being supervised by three adults on the day of inspection.

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

Non-Compliance Information

(1) The registered provider did not ensure that, at all times, there were an adequate number of adults working directly with the children in the Ladybird ECCE room.

(4) The minimum ratio of adults to children was not maintained in the service at all times. An insufficient number of adults were available to the children attending on a mixed full day care and sessional care basis in the Ladybird ECCE room where the Honeybees and Ladybirds ECCE groups were both present as evidenced below:

- Between 10:15 to 12:00 there were two adults caring for twenty-six children in this room. These children were in the 3-6 year age range and were attending on a mixed full day care and sessional basis.

The minimum ratio of adults to children for the 3-6 year age range for this type of care is 1:11.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

Staff Plan/Roster for Sept 23 to Jun 24 drafted to ensure staff to child ratio is being adhered to at all times. Staff roster books are completed a month in advance to ensure sufficient staff in each area daily and also to roster for any holiday or leave requests. Roster books will be reviewed a week in advance to ensure sufficient staffing levels for the following week.

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. These actions will be assessed on the next inspection.

Part IV – Information and Records

Regulation 16 – Record in relation to pre-school service

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

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

Compliance Information

(h) Details of the attendance of each child in the service were recorded at the time of entering and leaving the service.

Non-Compliance Information

(i) The staff roster was not available to demonstrate the adults' hours of working. There was no documentary evidence of planning for sufficient cover to maintain the required staffing levels at all times.

An accurate staff roster was not available on the last inspection on 08 September 2022. The corrective and preventive actions submitted by the registered provider did not prevent reoccurrence of this non-compliance.

(k) A sample of accident and incident records were reviewed and were not completed adequately, contrary to the service's accident and incident policy, as evidenced below:

- a. On the day of inspection in the outdoor area a child pulled the free-standing wooden mud kitchen down on top of themselves. A record of this incident was not completed.
- b. One of the accident and incident records reviewed was incomplete as it was not signed by a parent.

Failure to record incidents and to ensure that parents have been informed of an injury to their child may pose a risk to the continuity of care of the child.

(j) A sample of medication administration records were reviewed. Some of these records were incomplete. Four records were not signed by a second staff member as a witness to the administration of the medication and one record was not signed by the parent. Failure to have medication administration witnessed or to ensure that parents have been informed poses a risk to the children.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(i) Staff Plan/Roster for Sept 23 to Jun 24 drafted to ensure staff to child ratio is being adhered to at all times. Staff roster books are completed a month in advance to ensure sufficient staff in each area daily and also to roster for any holiday or leave requests. Roster books will be reviewed a week in advance to ensure sufficient staffing levels for the following week.

(j)(k) Manager to review the policies, procedures & checklists. To be included as agenda items at monthly staff meetings. The agenda sheet is to be completed noting attendees and any comments by staff. Updated Procedures re Medication administration & recording have all been given to staff to update themselves with. These policies and procedures will all be reviewed and noted at regular staff meetings.

Supporting documentation submitted

Written and photographic 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. These actions will be assessed on the 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-

(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

The service had a healthy eating policy in place and staff reported that children in the sessional Ladybirds ECCE room bring in their own lunch from home. Lunch took place at 11:10. Staff stated that the service provides meals for the children attending the Toddler and Honeybees ECCE room. Dinner was served at 11:00 and 11:25 respectively. Drinking water was accessible to children throughout the day and children were given water with their meals. Younger children were provided with bibs for dinnertime. Older children were encouraged to feed themselves. Staff were observed sitting with children during dinner and children were given time to eat their meal. A child in the Toddler room who does not eat the dinners provided by the service was provided with an alternative from home.

Children's care needs were observed to be met promptly. Staff were observed cleaning children's faces after dinner. Children in the Ladybirds and Honeybees ECCE room were encouraged and supported to be independent, including using the toilet independently and cleaning up after their play. Children's nappies were changed regularly and staff were observed engaging warmly with children when providing this care. There was a designated sleep time in the Toddler room. The sleep needs of the younger children in the Toddler room were met with children placed to sleep when they displayed signs of tiredness. An older child in the Toddler room who does not have a sleep during the day was brought to the Honeybees ECCE room during the designated sleep time.

Staff demonstrated a good awareness of the needs of each child in their care. Staff interacted warmly with the children throughout the inspection and were observed to use gentle tones and praise when promoting positive behaviour.

Staff described how they communicate with parents regarding their child's day at arrival and collection times and parents were observed in the service during these times.

Staff in the Toddler room described how they record information about each child's day detailing information on food, sleep, nappy changes and activities in a booklet. This booklet was given to parents at collection time.

The Honeybees ECCE and Toddler rooms were arranged to provide a range of play materials and areas of interest providing children with the freedom to play and explore. Areas of interest included small world toys, construction toys, jigsaws, mark making stations, home corners and dress up materials. These rooms provided a range of developmentally appropriate play experiences for the children and were adequately resourced with a variety of materials. The materials were observed to be accessible to the children on low level shelving. Family photos, birthday displays, children's photos and children's artwork were displayed in the care rooms.

A fully enclosed outdoor play area was available to the rear of the premises with a mix of artificial grass, real grass and bark surfacing. The outdoor area was well resourced with a range of developmentally appropriate play equipment. Children from the Honeybees and Ladybirds ECCE groups accessed the outdoor area on the day of inspection and were observed engaging in energetic and imaginary play.

Non-Compliance Information

1. Two children in the Toddler room, aged 11 months and 2 years respectively were not provided with the opportunity to feed themselves during dinnertime. The children were not provided with their own spoon on the day of inspection to promote independence and to develop hand-eye coordination and fine motor skills.
2. On the morning of inspection, the Honeybees and Ladybirds ECCE groups were both present in the Ladybirds ECCE room. A low-level divider was in place to divide the room into two separate areas. The range of materials within the environment accessible to the Ladybirds ECCE group was inadequate for the effective provision of challenging, diverse, creative and enriching play experiences for children to promote all areas of development. There were no designated areas of interest and limited play materials were available to the 13 children present in this area of the room.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

1. Staff to encourage Toddlers to feed themselves.

2. Designated areas of play allocated to encourage development.

Supporting documentation submitted

Photographic 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 V - Care of Child in Pre-school Service

Regulation 20 – Facilities for rest and play

(1) Subject to this regulation, a registered provider shall ensure that-

(b) there are adequate and suitable facilities for a pre-school child to rest during the day, and in the case of an overnight pre-school service, during the day and the night.

Compliance Information

(1)(b) The Honeybees ECCE and Toddler rooms were equipped with a cosy area for children to rest as required.

Non-Compliance Information

(1)(b)

1. The environment in the Toddler room was not conducive to sleep on the day of inspection. The lighting in the room was bright and could not be adequately dimmed to create a restful environment for the seven children who were placed to sleep.

This non-compliance was found on the last inspection on 08 September 2022. The corrective and preventive actions submitted by the registered provider did not prevent reoccurrence of this non-compliance.

2. There was no suitable rest area available to the children in the Ladybirds ECCE room on the day of inspection. Staff stated that an additional area off the main room, which is used as a rest area, was closed for the day as there were not enough staff to monitor children in this area.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

1. Blinds were removed per the Fire Officers report. Sleep procedures were drafted and will be posted in the Toddler room the Cot room. Sleep Policy & procedures were updated the given to all staff members for review. To assess the impact of no blinds in the sleeping area, a Sleep Survey sheet has been drafted, which is to be conducted on a weekly basis to monitor conditions for sleeping and to monitor if any difficulties have been encountered with children sleeping in the Toddler room or the Cot Room. The new Sleep Survey will be conducted weekly to assess the impact of the children's sleep with no blinds in the Toddler room and Cot room. Any impact/changes in sleep patterns will be noted. Manager to discuss the Sleep Survey at the next staff meeting.
2. Rest area available in room.

Supporting documentation submitted

Written and photographic 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 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 inspectors found by observation of practice, review of documentation, discussion with staff and inspection of the premises that the registered provider 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.

- Hand sanitisers and hazardous materials were stored safely out of reach of children.
- All storage facilities were inaccessible to children.
- Individual bed linen was provided for the children in the Toddler room and staff stated that all bed linen is laundered twice per week or as required.
- 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:

- Liquid soap, warm water and paper towels were available to facilitate hand washing. Staff were observed to carry out hand washing as appropriate.
- Waste was managed appropriately with the use of pedal bins.
- A system was in place for effective sterilisation of soothers.
- Children's lunches were stored in the fridge.

Non-Compliance Information

General Safety:

1. An Immediate Action Notice was issued on the day of inspection as adequate measures had not been taken to ensure children could be evacuated in a timely manner in the event of a fire. The emergency exit in the cot room adjacent to the Toddler room was locked and the key was not easily accessible. The registered provider submitted a response on 11 May 2023 which was deemed to satisfactorily address this non-compliance as an interim measure. This matter has been referred to the Chief Fire Officer to assess the suitability of this escape route.

This non-compliance was present on the last inspection on 08 September 2022. The corrective and preventive actions previously stated by the registered provider failed to prevent reoccurrence of this non-compliance.
2. Heavy equipment was not secured, posing a risk of tipping and injury. Inspectors observed a free-standing wooden kitchen in the outdoor play area (see Regulation 16(k) for details).

Infection Control:

Inspectors observed a number of practices which posed a risk of transmission of infection within the service:

3. The service's nappy changing procedure was ineffective for infection control purposes. There was no requirement in the procedure to remove soiled gloves when redressing a child. Some nappy changing practices observed on the day of inspection in the service were inadequate for infection control purposes. Staff were observed redressing the children while wearing the same used gloves and children's hands were not consistently washed following nappy changes.
4. In the Toddler room children's hands were not washed before dinner.
5. Staff were observed lifting the lid of the bin in the Ladybirds ECCE room to dispose of waste.
6. The paper towels for hand drying were not stored in dispensers in the sanitary accommodation areas in use by the Honeybees and Ladybirds ECCE rooms both upstairs and downstairs. Staff members and children were observed handling the entire roll of paper to break pieces off for hand drying.
7. A soiled mop and bucket were stored beside the toilet in the Ladybirds ECCE sanitary accommodation within reach of the children.

Administration of Medication:

8. Documentation, procedures and practices in place for children attending the service requiring medication were inadequate, posing a potential risk to the health and safety of children as follows;
 - a. There was no documented care plan available for one child attending the service who required daily medication.
 - b. Medication for this child was not stored in its original packaging and was not clearly labelled.
 - c. There was no record available of the daily administration of this medication.
 - d. There was no evidence of prior written parental consent for the administration of this medication.
 - e. There was no administration of medication policy available to evidence the procedures to follow in relation to the storage and use of medication.

Safe Sleep:

9. Procedures and practices in place in relation to safe sleep for children attending the Toddler room were inadequate and contrary to the service's policy on safe sleep posing a potential risk to the health and safety of children as follows;
- a. A child under one, who was sleeping in the cot room on the arrival of the inspectors, was not sufficiently checked. An adult was observed checking the child from a window panel outside the cot room where an adequate assessment could not be completed. Sleep checks were recorded at intervals of 10 minutes retrospectively for this child when they awoke at 11:05.
 - b. A fleece blanket was used as bedding for a child under one year which can pose a risk of overheating.
 - c. Seven children were observed sleeping in the Toddler care room and eight children were sleeping in the adjacent cot room. One sleep check record sheet was in use for both areas. A number of issues were observed with this as evidenced below:
 - i. Sleep checks for two children who were sleeping in the cot room had been pre-recorded at intervals of 10 minutes from 11:35 to 13:35 and 11:40 to 13:20 respectively.
 - ii. There were no sleep checks recorded for five children who were sleeping in the cot room adjacent to the Toddler room. During this period, the sleep check record was in the main care room.
 - iii. Sleep checks for six children sleeping in the main care room were recorded retrospectively between 11:30 and 12:00 as the sleep check sheet was in the cot room.
 - d. All staff were not aware of safe sleep guidance in relation to room temperatures being maintained between 16°C and 20°C where children under 2 are sleeping.

Concerns regarding unsafe sleep practices had been identified on previous inspections in 2021 and 2022. The preventive actions submitted by the registered provider had not been effective in preventing the reoccurrence of this non-compliance.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1. We have engaged with a contractor to address the issue of the locks in the Toddler room and Cot room. The locks have now been changed and they will shortly commence on the emergency lighting work due to be completed as per the Fire Officers report. Locks are to be checked on a weekly basis for 6-8 weeks to ensure no issues with works recently completed. These checks will be carried out as part of the Manager's morning checks.
2. Mud kitchen now fixed to wall/wooden fence

Infection Control:

3. Staff advised re changing gloves for nappy changes. Updated Nappy changing procedures & Infection control procedures are now posted in the changing area. Updated Procedures re Nappy changing have all been given to staff to update themselves with. These policies and procedures will all be reviewed and noted at regular staff meetings.
4. Staff advised re washing Toddlers hands before dinner.
5. Staff advised re using pedal bins correctly.
6. Staff advised re ensuring paper hand towels in dispensers.
7. Staff advised re storing cleaning products correctly away from reach of children.

Administration of Medication:

8. Updated Procedures re Medication administration & recording have all been given to staff to update themselves with. These policies and procedures will all be reviewed and noted at regular staff meetings.

Safe Sleep:

9. Updated Procedures re Sleeping procedures have all been given to staff to update themselves with. These policies and procedures will all be reviewed and noted at regular staff meetings. Separate Sleep checklists/monitoring sheets will be in the Toddler room and the Cot room for staff to update. Safe Sleep Training Awareness Programme with South Dublin County Childcare planned for Aug/Sep when all staff have returned from summer holidays and are available to attend. A certificate will be issued upon completion. No fleece blankets now in use.

Supporting documentation submitted

General Safety:

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

Infection Control:

3. Written and photographic evidence was presented to demonstrate the corrective and preventive actions submitted by the registered provider.
4. Photographic evidence was presented to demonstrate the corrective and preventive actions submitted by the registered provider.
5. Photographic evidence was presented to demonstrate the corrective and preventive actions submitted by the registered provider.
6. Photographic evidence was presented to demonstrate the corrective and preventive actions submitted by the registered provider.
7. Photographic evidence was presented to demonstrate the corrective and preventive actions submitted by the registered provider.

Administration of Medication:

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

Safe Sleep:

9. 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. These actions will be assessed 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.

Non-Compliance Information

(1)
An Immediate Action Notice was issued on the day of inspection as a person trained in first aid was not immediately available to the children on the day of inspection. The registered provider submitted a response on 15 May 2023 demonstrating that three staff are registered to attend FAR training beginning on 20 May 2023.

This non-compliance was present on the last inspection on 08 September 2022. The corrective and preventive actions submitted by the registered provider did not prevent reoccurrence of this non-compliance.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

Three staff completed FAR training. Staff rosters are completed to ensure that a staff member with a current FAR cert will be on the premises at all times.

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 for as stated by the registered provider have been deemed to address this non-compliance.

Part VII - Premises and Space Requirements

Regulation 29 - Premises

A registered provider shall ensure that the premises of the service are-
(c) kept adequately lit, heated and ventilated

Non-Compliance Information

29(c) A malodour was present in the downstairs nappy changing area.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

Authorisation given to architect to obtain tenders for the work and this process is currently ongoing.
Work to be carried out to ventilate the area.

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 for as stated by the registered provider have been deemed to address this non-compliance once completed.

Part VII - Premises and Space Requirements

Regulation 30 - Minimum space requirements

(1) Subject to paragraphs (2) to (6), a registered provider shall ensure that adequate clear floor space is available in the premises for the work, play and movement of children attending the pre-school service.

(4) Where a registered provider contemporaneously provides-

(a) a sessional pre-school service, and

(b) a full day care service or a part-time day care service, or both,

the minimum clear floor space applicable for the duration of the sessional preschool service in respect of the children attending that service shall be the floor space specified in paragraph (3).

Non-Compliance Information

(1)(4)

The minimum clear floor space requirement was not maintained at all times in the Ladybirds ECCE room where the Honeybees and Ladybirds ECCE groups were present as evidenced below;

In the Ladybirds ECCE room overcrowding occurred between 10:15 and 12:00 where the Honeybees and Ladybirds ECCE groups were present. Twenty-six children and two staff were observed in the room which measured 34.4 square metres. Considering the ages of the children attending and the space requirements for each child, the total space required was 47.2 square metres.

A small room, usually used as a rest area, in the Ladybirds ECCE room was closed on the day of inspection as staff stated there were not enough staff to monitor children in this area. The total space in the Ladybirds ECCE room, had this room been open, was 41.9 square metres. If all of the space was used the total space available was not sufficient for the number of children present in the room.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

Registrations capped at 40 – 29 Toddler room (18 Toddlers and 11 ECCE) and 11 ECCE upstairs from September. Cot room upstairs will remain closed and ECCE Ladybird room will be for 11 external ECCE registered children. Room downstairs will be used for 11 ECCE aged children from the Toddler room.

Supporting documentation submitted

No supporting documentation submitted.

Summary Comment

The corrective and preventive actions for as stated by the registered provider have been deemed to address this non-compliance once implemented. This action will be assessed on the next inspection.