

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2015DS132
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<b>Name of Service:</b>	Daisy Chain Montessori and Childcare Ltd
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<b>Address of Service:</b>	Eden Business Centre, Grange Rd, Ballyboden, Dublin 16, Co. Dublin
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<b>Eircode:</b>	D16 VC03
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<b>Name of Registered Provider:</b>	Lucy Madigan & Gemma Rave
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<b>Service type:</b>	Full Day, Part Time, Sessional
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<b>Date(s) of Inspection:</b>	01/11/2023
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<b>No of pre-school children:</b>	AM	31	PM	31
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<b>Address of the Early Years Inspectorate:</b>	Early Years Inspectorate 2 <sup>nd</sup> Floor, Unit 4/5 The Nexus Building Blanchardstown Corporate Park Ballycoolin Dublin 15   D15CF9k
<b>Inspection undertaken by:</b>	C. Harte and E. Griffin
<b>Title:</b>	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).

### Description of service

Daisy Chain Montessori and Childcare is a full day care service located in a small shopping mall area of in South Dublin. The service is one of four services owned by the registered provider. The service operates Monday-Friday 7:30am -6:30pm providing care to children between 1-5 years of age. The service has four care rooms: Wobbler room (1-2 years), Toddler room (2-3 years), Montessori 1 and 2 (3-5 years). The premises also has an outdoor area, sleep room adjoined to the Wobbler room, kitchen, and staff room. The service participates in the Early Childhood Care and Education (ECCE) programme.

### Staffing

The service employs fourteen adults to work directly with the children. The person in charge and training manager were present on the day of inspection providing support to staff and cover when necessary. The registered provider attended the service on the day of the 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 and safety. The inspection may also focus on other areas as required.

A sampling process was used to assess compliance under regulation:

- Regulation 16 Record in relation to a pre-school service,
- Regulation 19 Health, Welfare and Development of child,
- Regulation 23 Safeguarding the health, safety, and welfare of child.

As a result, the scope of the inspection included the Wobbler room and Toddler room.

Inspection findings are documented in the inspection report which is first issued in draft format to the service with an opportunity to respond to any findings. Where statutory requirements are identified as not being met, the registered provider must demonstrate how they have rectified the non-compliance and will prevent any non-compliance from re occurring. The Corrective Action and Preventive Action plan (CAPA) will be used to inform decisions about compliance with regulatory requirements. Where the registered provider fails to meet the statutory requirements an escalation process may be commenced.

The inspectorate reserves the right to edit responses received for reasons including clarity, completeness and compliance with administrative and legal processes.

The contents of the report are compiled by the inspectorate body.

## Acknowledgments

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

### Part III – Management and Staff

#### Regulation 9 – Management and recruitment

(1) A registered provider shall ensure that-

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

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

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

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

#### Compliance Information

(1)(a)(b) The service had a named person in charge and designated person to deputise in their absence if required.

A review of the roster demonstrated that a person in charge or a deputy is on the premises during the opening hours of the service.

(c) A clear management structure was in place in the service and staff and management were aware of their role and responsibility.

(2) A total of eighteen staff files were reviewed on the day of inspection including files for one unpaid worker and three ancillary staff. The registered provider had completed the following checks to ensure suitability and competency:

- (a) Twenty-two validated written references were available from past employers.
- (b) Fourteen validated written references were available from a source other than a past employer.
- (c) Completed Garda vetting disclosures were available in respect of the eighteen adults.
- (d) Six adults who had lived outside of state for six months or more as an adult had international police vetting from that state available for inspection.

(4) Twelve adults who worked directly with the children attending the service held at least a major Early Childhood Care and Education at Level 5 or above on the National Framework of Qualifications or a qualification deemed to be the equivalent.

### Non-Compliance Information

(4) Evidence was not available to show that two staff members working directly with the children held at least a major award in Early Childhood Care and Education level 5 on the National Qualifications Framework or a qualification deemed to be equivalent.

### Corrective & Preventive Action submitted by the Registered Provider

#### Corrective Action

Qualifications provided for two staff members.

The company now has included in its recruitment policy and practice that:

- any staff member that only has transcripts available must furnish the company with a full certificate once received from their college.
- Failure to provide the correct Certification or proof of finishing the qualification will mean a cessation to employment.

#### Preventive Action

Regulation 9 audits by the recruitment officer.

#### Supporting documentation submitted

Qualification certificates.

### Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 9(4) has been addressed.

### 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) There were an adequate number of adults working directly with the children as there were seven adults working directly with the 31 children who were present on the day of inspection.
- (2) The correct adult/child ratio was maintained throughout the service.

Room	Age group	No. of children	Staff available	Staff required
Wobbler room	1-2 years	10	3	2
Toddler room	2-3 years	8	2	2
Montessori 1	3-5 years	5	1	1
Montessori 2	3-5 years	8	1	1

### 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

- (1) The following information was available for review:
- (h) Attendance records detailing the arrival and departure of the children daily were maintained.
- (i) A record was maintained of the staff roster which was reflective of the staff present on the day.

## Non-Compliance Information

(1)(j) Two types of forms were observed to be in use for recording medication administration. A review of form type one demonstrated no available record for parental signature for administration of medication beyond the first entry and was formatted to allow multiple entries.

Form type two was for the use of antifebrile medication only and did not have a space for a parental signature. Its is acknowledged registration forms contain generic signature for antifebrile medication however a signed record is required per administration.

These forms were observed in use by both the Toddler and Wobbler rooms.

## Corrective & Preventive Action submitted by the Registered Provider

### **Corrective and Preventive Action**

The administering of medicine form was immediately removed from all rooms and a new form was created.

An email was sent to all managers about the change.

The administration of medication form was updated, and all staff have read and signed it.

### **Supporting documentation submitted**

New administration of medication form.

Memo of updated medicine form signed by staff.

Copy of email sent to managers re updated medication form.

## Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 16(1)(j) has been addressed.

### 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

(1) (a) The following observations are examples on how each child's learning, development and well-being was observed being facilitated during the inspection:

#### Basic Needs:

- Staff were observed interacting with children using soft tones and a supportive manner. This modelled positive interactions.
- Staff were responsive to the actions of the children, for example when a child in the Wobbler room fell a staff member immediately approached to support them.
- Staff advised the inspector an alternative meal option was available if a child did not like the dinner provided.
- Staff encouraged children to use the toilet and assistance was provided if necessary. Children wearing nappies were asked by staff before changing. This demonstrated a respectful care practice.

#### Supporting relationships around children:

- A key worker system was observed in practice supporting partnership between parents/guardians and the staff. This promoted a welcoming sense for families and a sharing of learning experiences.
- Children in the Toddler room were observed completing tasks and responsibilities following mealtime. This fostered independence and self-care.
- Children were given sufficient time to enjoy their snacks and dinner. Staff were observed sitting with children during their meals. This facilitated mealtimes to be a social occasion for children to engage with peers and staff.

### Physical and material environment:

- A variety of wall displays and photos promoted a sense of belonging for the children. These included a birthday wall, a family wall and all about me posters.
- Visual daily routines were available and were reflected in practice. Routine provides for predictability and comfort.
- Children had access to a climbing frame and slide in the outdoor area creating opportunity for gross motor movements.

### Non-Compliance Information

1. Children in the wobbler room had limited access to resources at their level. For example:
  - The main shelving unit at the child's level for holding resources was observed to have two empty boxes and one empty shelving space.
  - There were no resources available in the toy kitchen area.

This limited the children's opportunity for choice and active participation.

2. In the outdoor area the mud kitchen had one bowl available. This impacted the children's ability engage with the resources as intended and reduced play opportunities.

### Corrective & Preventive Action submitted by the Registered Provider

#### Corrective Action

- The resources in the wobbler room were immediately audited. The investigation demonstrated that there were sufficient resources however the practice of putting all toys in to be sterilised resulted in a lack of toys available at the child's level. A memo was sent to all staff regarding this practice and providing an alternative.
- Staff were shown the list of play resources required for this age group and the Aistear/ Siolta practice guide on indoor environments to enhance play experiences.  
New resources were purchased for the kitchen area.
- It is agreed that the garden space requires a lot more resources to support different types of play.  
Resources have been bought for the Mud kitchen outside as well as more socio-dramatic creative play resources.

## **Preventive Actions**

- The service is currently formally engaging with a quality improvement programme. We had recognised ourselves we buy lots of resources and really stock rooms to ensure quality learning experiences but in our audits, we noted that staff were not maintaining the level of resources required for quality play and learning outcomes.
- The service is using the Aistear/Siolta practice guide to improve the self-reflection required and self-assessing of rooms.
- The service has completed the introduction to Aistear/ Siolta practice guide training.
- The service provide staff with non-contact time to audit and assess their rooms using the Aistear Pillar learning environments reflective tool.

## **Supporting documentation submitted**

Signed staff memo regarding room resources.

Quality improvement support goals for the service.

Receipts for the purchase of new equipment.

Picture of equipment stored at service.

Copy of wobblers room equipment audit.

Copy of certificates of completion for introduction to Aistear/ Siolta practice guide training for three staff.

Non-contact time documents.

## **Summary Comment**

The inspector has reviewed the actions and evidence submitted. The non-compliances identified under Regulation 19(1)(a) have been adequately addressed.

### 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 two entrance doors to the service were secure. This prevented unauthorised persons entering the service unknown to staff and prevent children from leaving the service unsupervised.
- Cleaning agents within care rooms were observed to safely stored out of reach of children.
- Foods supplied by parents/guardians were observed to be stored in the fridge.
- The access gate in the outdoor play area was observed to be secure.

##### Infection Control:

- Children were observed washing their hands before mealtimes.
- The premises was observed to in a clean and hygienic condition with documented cleaning records available.
- Individual bed linen was used for the sleeping children.
- Soothers were observed to be hygienically stored.

##### Safe Sleep:

- An ambient temperature of 18-22°C was maintained in rooms where children aged over 1 year old were sleeping.
- Lighting was subdued in the sleep rooms and soft music was played.
- The sleep rooms reminded quite supporting rest for the children.

#### Non-Compliance Information

##### General Safety:

1. A wire string of lights held to the wall by tape in the Wobbler room was hanging down in reach of children. This posed a risk of injury.

##### Infection Control:

2. Staff did not wear aprons during nappy changing. This procedure was not in line with best practice or the services policy which posed a risk of cross contamination.

## Administration of Medication:

3. A care plan available for one child did not detail the required dosage but stated to refer to dosage information on the medication box. The box was not available for the medication and the label did not include dosage information. This posed a risk of inaccurate administration of medication.

## Safe Sleep:

4. Four cots were observed with toys while children were sleeping. The service safe sleep policy states toys will be removed. This posed a choking hazard.

## Action submitted by the Registered Provider

### Corrective & Preventive Action

#### General Safety:

1. The wire was immediately reported on the maintenance list and has been secured.

#### Preventive actions:

- Room audits – a memo was sent to all staff and H&S officers reminding them of the importance of reporting all health and safety non-compliance to the manager. Staff were retrained on the daily health and safety risk assessments.
- Refresher training is scheduled for the health and safety officers early January paying particular attention to risk assessment.

#### Infection Control:

2. Nappy changing - staff are now wearing aprons for all changes as per our policies and procedures.

#### Preventive actions:

- A reminder email was sent to all staff regarding wearing an apron for all changes.
- Audits are carried out by the manager to ensure best practice.

#### Administration of Medication:

3. Care plans: This was immediately investigated because the practice is that all children with care plans are notified to the registered provider who works on a care plan with the manager. A plan has now been written up.

#### Preventive action:

Individual care plan - Our procedure on individual care plans was sent out as a reminder to all managers that all children with an individual care plan must be shared with the registered provider who will oversee the drafting of the care plan.

**Safe Sleep:**

Safe sleep policy was immediately altered to reflect safe practice.

Preventive actions:

- An email was sent to all managers regarding the practice of an empty cot for sleep time.
- Safe sleep audits are carried out to ensure safe practices and that the child has an empty cot during sleep time.

**Supporting documentation submitted**

**General Safety:**

Photo submitted of secured wire.

Evidence of health and safety audits.

Communication from registered provider regarding health and safety refresher training.

**Infection Control:**

Updated nappy changing policy.

Copy of email shared regarding nappy changing policy.

**Administration of Medication:**

Copy of memo regarding child's individual care plan signed by staff.

Copy of care plan created for child.

**Safe Sleep:**

Copy of safe sleep policy.

Copy of email sent to manager regarding safe sleep policy and practice.

Safe sleep checklist for registered provider spot check.

**Summary Comment**

The inspector has reviewed the actions and evidence submitted. The non-compliances identified under Regulation 23 have been adequately addressed.

## 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) Adequately stocked first aid boxes were stored out of reach of children easily accessible if required by staff.

#### Non-Compliance Information

(1) A review of the staff roster and first aid response (FAR) certificates demonstrated that between 5:30pm-6:30pm a person trained in first aid was not available to children.

#### Corrective & Preventive Action submitted by the Registered Provider

##### Corrective and Preventive Action

Staff member with FAR will be rostered to the centre on the latest shift to ensure that there is a FAR trained staff member on site at all times.

Preventive actions:

- An email was sent to all managers to notify the registered provider when a FAR trained employee resigns.
- Additional staff from the service will be trained in FAR.

##### Supporting documentation submitted

Email from registered provider to service managers regarding FAR trained staff.

Service roster.

#### Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliances identified under Regulation 25(1) has been addressed.