

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2015DS147
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<b>Name of Service:</b>	Parkside Childcare
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<b>Address of Service:</b>	20a Fonthill Abbey, Ballyboden Rd, Rathfarnham, Dublin 14, Co. Dublin
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<b>Eircode:</b>	D14 XA99
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<b>Name of Registered Provider:</b>	Emma Buckley
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<b>Service type:</b>	Full Day, Part Time, Sessional
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<b>Date of Inspection:</b>	15/04/2024
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<b>No of pre-school children:</b>	AM	137	PM	120
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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   D15 CF9K
<b>Inspection undertaken by:</b>	T. Nelson and E. Hosford
<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).

<b>Conditions if applicable</b>	Not applicable.
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### Description of service

Parkside Childcare is a full day care service located in Dublin 14 and is registered to provide early childhood care and education to a maximum of 146 children aged from 0-6 years. The service operates from 7:30am to 6:30pm, five days a week and provides an Early Childhood Care and Education (ECCE) sessional service from 9.30am to 12.30pm.

The service is located in a converted detached residential premises with separate buildings onsite. There is a dedicated sleep room which is located on the ground floor and sanitary facilities are available in all buildings. The service has a kitchen in which to prepare food for the children. There are eleven care rooms in operation: the Wobbler Rooms 1, 2 and 3, Toddler 1A & 1B, Toddler 2A & 2B, Preschool 1A & 1B, and Preschool 2A & 2B. There are two enclosed outdoor areas at the rear of the property.

### Staffing

The person in charge reported there are currently 47 staff employed by the service including two onsite managers, a quality liaison staff and three kitchen staff members. The registered provider is supernumerary and manages the oversight of the service.

On the day of inspection there were 34 staff members present, including the person in charge and two kitchen staff members. A director of the company arrived during 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/ safety. The inspection may also focus on other areas as required.

The inspection focused on an examination of compliance under:

- Regulation 9(1),(2)(a)(b)(c)(d),(3) (4) (7) Management and Recruitment
- Regulation 11(1),(2), Staffing Levels
- Regulation 16(1)(h)(i)(j)(k) Records in relation to the Preschool Service
- Regulation 23 Safeguarding the Health, Safety and Welfare of the Child
- Regulation 25 First Aid
- Regulation 27 Supervision
- Regulation 31 Notification of Incidents

A sampling process was used to assess compliance under the following:

- Regulation 16(1)(h)(j)(k) – Record in relation to Preschool children
- Regulation 23 Safeguarding the Health, Safety and Welfare of the Child
- Regulation 27 Supervision

As a result, the scope of the inspection included Wobbler 1, 2 and 3 rooms.

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

This inspection was triggered as a result of a statutory notification of an incident received to the inspectorate on the 28 March 2024.

### Acknowledgments

The inspectors wish to acknowledge the cooperation of a director of the company, the 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*

*(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.*

*(7) A registered provider shall ensure that all employees, unpaid workers and contractors are appropriately supervised and provided with appropriate information, and where necessary training, including in relation to the following:*

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

*(c) these Regulations.*

### Compliance Information

(1)(a) The service had a designated person in charge and named person to deputise as required.

(b) The person in charge was present during the inspection.

(2) The following was reviewed:

- The files of eight staff who were new to the service since the last inspection held on the 28 September 2023.
- The Garda Vetting disclosures of five staff members whose Garda Vetting was required to be renewed since the last inspection held on the 28 September 2023.

The registered provider had completed the following checks:

(a)(b) Sixteen validated written references were available from recent past employers or a source other than a past employer for the eight full files reviewed.

(c) Garda vetting had been obtained for all 13 disclosures reviewed. The service also demonstrated compliance with the Early Years Inspectorate Regulatory Notice which required the service to renew Garda vetting every three years.

(d) Documentary evidence showed that five staff had lived outside of the state for six months or more as adults and international police vetting from that state was available for inspection.

(3) Documentary evidence available showed that all of the checks outlined in (2) had been carried out prior to any of the adults having contact with the children in the service.

(4) The six staff who worked directly with children attending the service held at least a major award in Early Childhood Care and Education at Level 5 or above on the National Framework of Qualifications or a qualification deemed eligible by the Department of Children, Equality, Disability, Integration and Youth Affairs.

(7)(a) The registered provider had ensured all adults in the service were appropriately provided with information following a recent policy update. For example:

- Documentary evidence was available that all adults had received information on a recent update on the Outdoor Play policy and procedures within the service.
- The inspector's reviewed a sample of documentary evidence of recent staff meetings and room meetings.

This was in line with the service Supervision and Appraisal policy which stated staff would be briefed on service changes.

### Non-Compliance Information

(7)(a) There was no documentary evidence available that the registered provider had ensured that adults new to the service were provided with appropriate information on the service policies and procedures. New staff require an appropriate induction period in order to safeguard the wellbeing of children in the service.

For example:

- The files of six staff new to the service were reviewed. The documentary evidence available did not show that new staff had been informed of and understood the policies, procedures and practice of the service. There was no record available of the details of induction topics covered with dates of completion for the induction of new staff members.
- This was not in line with the service Supervision and Appraisal policy which stated that the service will ensure each employee is fully assisted in understanding and becoming familiar with the demands of the post.

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

#### Corrective Action

All staff complete an induction period with the service Training and Compliance officer prior to commencing their employment. Policies and Procedures are made familiar to the employee and the employee signs off on this. The officer carries out regular checks of staff to ensure that they understand and implement the correct procedures. The induction forms and training sessions are now to be fully checked, signed and dated by each employee.

### **Preventive Action**

The service has created a new Induction form and checklist. All inductions and signing off of employees on their induction and understanding policies and procedures will be stored and made available to Tusla inspectors onsite at the childcare facility in each employee's file. The service has also engaged with the company who manage their software application which will track and document all training carried out.

### **Supporting documentation submitted**

Induction Training Checklist

Evidence of engagement with software company.

### **Summary Comment**

The inspector has reviewed the actions taken and evidence submitted. The non-compliance identified under Regulation 9(7)(a) has been adequately 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.*

*(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).*

### **Compliance Information**

(1) On the day of inspection there were an adequate number of adults working directly with the children, with four additional staff available to provide support where needed to meet the basic care needs of the children. There were 31 staff available to the 137 children in attendance when the inspectors arrived unannounced to the service at 10.02am.

(4) The adult to child ratios were correct when the inspectors arrived unannounced to the service and throughout the inspection. Twenty-seven staff were allocated to work directly with the 137 children who were present on the morning of the inspection with a breakdown as follows:

- Wobbler 1 room - 5 adults to 16 children aged between 1-2 years old.
- Wobbler 2 room - 2 adults to 8 children aged between 1-2 years old.
- Wobbler 3 room - 2 adults to 8 children aged between 2-3 years old.
- Toddler 1a room - 1 adults to 6 children aged between 2-3 years old.
- Toddler 1b room - 2 adults to 10 children aged between 2-3 years old.
- Toddler 2a room - 2 adults to 8 children aged between 2-3 years old.
- Toddler 2b room - 3 adults to 16 children aged between 2-4 years old.
- Preschool 1a room - 1 adults to 7 children aged between 3-4 years old.
- Preschool 1b room - 3 adults to 21 children aged between 3-4 years old.
- Preschool 2a room - 3 adults to 17 children aged between 3-4 years old.
- Preschool 2b room - 3 adults to 20 children aged between 4-5 years old.

### 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) The registered provider ensured the following was maintained:

(h) Attendance records detailing the arrival and departure of the children on a daily basis 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) The registered provider did not ensure a full record in writing was maintained for the administration of medication. Following a review of 17 records, the full name of the two staff members carrying out the administration was not recorded 17 times. The signature of the parent on collection of their child was not recorded following one administration.

(k) The registered provider did not ensure a full record in writing was consistently maintained for accident and incidents. Following a review of 18 records of accidents and incidents, the following was observed:

- There was no records available for three children who had been involved in an incident or accident in the service.
- Two forms did not have the full name of the staff member who completed the incident or accident record.
- Two forms did not have a record of the date the parent had signed the accident form and one form did not include the name of the staff member that informed the parent.
- Two forms did not record a date of the incident or accident and one form did not include the surname of the child.

## Corrective & Preventive Action submitted by the Registered Provider

### Corrective Action

(j) Staff reminded by memo that their full name is required when signing off medicine administration. Parents will be reminded by email that it is imperative that they sign and complete the medication administration form on collection of their child if medicine was required.

### Preventive Action

(j) Parkside Childcare has engaged with early years specialist software company, with training training for staff on this software application. This will eliminate the need to rely on employees and parents signing off a hard copy. All completion of medicine administration will be signed off electronically, negating human error.

### Corrective Action

(k) All staff were reminded by a memo of the importance of fully completing any accident or incident involving a child. This includes completing their full name and dates that parents signed the accident/ incident form. This memo also encompasses what constitutes an accident/ incident and that a complete record is always to be maintained in relation to a child in relation to an accident/ incident.

### **Preventive Action**

(k) Parkside Childcare has engaged with early years specialist software company. This will ensure that an accident/ incident form is completed fully and completely before being able to submit it to a child's file for record keeping.

### **Supporting documentation submitted**

Copy of memos to staff.

Evidence of engagement with software company.

### **Summary Comment**

The inspector has reviewed the actions and evidence submitted. The non-compliances identified under Regulation 16(1)(j)(k) 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 service had an electronic door release system which was managed and monitored by staff to restrict unauthorised persons from gaining access to the premises and to prevent children from exiting the service unsupervised.
- Outdoor play areas were fully enclosed.
- Staff reported being aware of appropriate procedures and engaged in effective strategies for children who displayed challenging behaviours which may pose a risk to other children.
- The kitchen was observed to be inaccessible to the children.
- Corner protectors were observed in care rooms where required.

#### **Infection Control:**

- The premises were in a clean and hygienic condition and documented up to date cleaning records were available and displayed in the premises.
- Liquid soap and thermostatically controlled warm water were available at all wash hand basins used by the children and the staff members.
- Staff were observed supporting children to hand wash before and after mealtimes.
- Staff and visitors were observed to wear protective shoe covers where required.
- Nappy changing was observed to be carried out in line with appropriate infection control practice.
- Soothers were observed to be stored in appropriate lidded containers.
- Mattresses were wipeable and bedding used was stored in line with appropriate infection control practice.

### Safe Sleep:

- A log was maintained where the temperature of the room and the colour, breathing and position of sleeping children was checked every 10 minutes.

### Fire Safety:

- Fire exits were observed to be unobstructed.
- An evacuation cot was available for the efficient evacuation of younger children in the case of an emergency.

## Non-Compliance Information

### General Safety:

1. Risk assessments for the outdoor play area were not consistently completed in line with recent updates on the outdoor play policy. This can reduce the impact of safeguards in place for safe outdoor play. The following was observed:
  - A risk assessment checklist was not consistently completed in the care rooms prior to children accessing the outdoor play area.
  - The risk assessment in use in two of the care rooms was not a recently updated version and did not have updated safeguards included on the checklist.
2. An air freshener was accessible to children in an unlocked cupboard in one of the care rooms. This posed a risk of injury to the child.

### Infection Control:

The following increased the potential risk of infection:

3. The paper towel used for hand drying in Wobbler 3 was not hygienically dispensed and required repeated touch, thereby increasing the potential of cross contamination.
4. There was an increased potential for cross contamination as sponges used for art activities were stored by the sink in Wobbler 1 nappy changing area where staff and children washed their hands. Only items for use in the sanitary accommodation area should be stored there.

### Administration of Medication:

5. The sharing of information on the administration of medication was not sufficient to support effective safe practice in one of the care rooms. Two staff members questioned were not aware of the practice around the administration of the medication.

### Action submitted by the Registered Provider

#### Corrective & Preventive Action

##### General Safety:

1. **Corrective action:** All staff were reminded of the new policy and risk assessments have been checked each day by management and old risk assessment forms were removed entirely from site ensuring only the new form is used. Risk assessments of the garden areas are completed every morning by service management. Garden area risk assessments are completed by staff members of each classroom prior to children accessing the outdoor play area.

**Preventive action:** Parkside Childcare will be implementing a new software application which will include a digital completion of a risk assessment for each classroom prior to children accessing the garden area. This will be a more efficient manner of completing risk assessments and ensure that only the most up to date form is being used in line with policies and procedures prior to children accessing the garden. This is preventive in nature as it will be more easily monitored by management through the software programme.

2. **Corrective action:** The air freshener was removed from the cupboard on the 15<sup>th</sup> April 2024 and staff ensure the child safety lock is always closed.

**Preventive action:** All staff furnished with a memo on the 13<sup>th</sup> May 2024 as a reminder that air fresheners are to be stored out of reach of children at all times.

##### Infection Control:

3. **Corrective action:** There was a Blue Roll used in Wobbler 3 is only for wiping down nappy changing mats after a change. It is not meant to be used for hand drying. The service hand towel dispensers mounted and fully stocked.  
**Preventive action:** Staff will ensure hand towel dispensers are fully stocked at all times. Management have ordered Blue Roll dispensers.
4. **Corrective action:** The sponges were removed from the wash hand basin and all staff issued with a memo reminding them that any art activity sponges used are only to be stored/ rinsed in the sink within the classroom area. The memo will also include that wash hand basins in the nappy changing areas are only to be used for washing hands.  
**Preventive action:** Management will ensure to monitor items within the nappy changing areas, ensuring nappy changing wash hand basins are used for solely washing hands and classroom sinks are used for art activity sponges.

### Administration of Medication:

5. **Corrective action:** All staff were furnished with a memo highlighting the policy and procedure on medicine administration. The care plans for specialist administration of medicine are displayed in the rooms. The service will ensure all staff are comfortable, confident, and competent administering specialist medicine.  
**Preventive action:** Updated policies and procedures will be issued to all staff by the 30<sup>th</sup> May 2024 and management will ensure each staff member signs off on their understanding of these. Management will continue to monitor the understanding and implementation of medicine administration in particular through regular training sessions. Parkside will engage in Paediatric First Aid training for all staff in the coming months.

### Supporting documentation submitted

#### General Safety:

1. Evidence of recent Risk assessments. Evidence of engagement with software company.
2. Copy of staff memo

#### Infection Control:

3. Order form for blue roll dispensers.
4. Copy of memo to staff.

#### Administration of Medication:

5. Copy of Memo to staff.

### 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) The service provided evidence that a person trained in First Aid Responder training was available at all times to the children attending the pre-school.

(2)(a) and (b) Suitably equipped first aid boxes were available and were safely stored in an easily accessible and conspicuous position on the premises and in the outdoor area.

### Part VI - Safety

#### Regulation 27 – Supervision

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

#### Compliance Information

Children were appropriately supervised throughout the inspection within the care rooms, sleep rooms, sanitary facilities and outdoors. The following was observed:

- Staff were observed to be carefully positioned in both the care rooms and the outdoor play areas in order to ensure adequate supervision of the children.
- An adequate number of staff were available to appropriately supervise children during transitions such as handwashing before mealtime and settling for sleep.

### Part VIII - Notifications and Complaints

## Regulation 31 - Notification of incidents

*A registered provider shall notify the Agency in writing within 3 working days of becoming aware of any of the following incidents occurring in the preschool service:*

*(d) a serious injury to a pre-school child while attending the service that requires immediate medical treatment by a registered medical practitioner whether in a hospital or otherwise.*

### Compliance Information

(d) The registered provider ensured a notification of an incident was submitted to the inspectorate within the required timeframe.