

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2015DS148
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<b>Name of Service:</b>	Cocoon Childcare Citywest
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<b>Address of Service:</b>	Unit 1&2 Block D Ground Floor, Belfry Square, Citywest, Dublin 24, Co. Dublin
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<b>Eircode:</b>	D24 DX53
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<b>Name of Registered Provider:</b>	Barry Cunningham
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<b>Service type:</b>	Full Day, Part Time, Sessional
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<b>Date of Inspection:</b>	05/07/2023
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<b>No of pre-school children:</b>	AM	40	PM	39
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<b>Address of the Early Years Inspectorate:</b>	Early Years Inspectorate, Tusla Child and Family Agency, 7th Floor, Brunel Building, Heuston South Quarter, Dublin 8.
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<b>Inspection undertaken by:</b>	E. Mulhern, M. Condon and N. McEndoo
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<b>Title:</b>	Early Years Inspectors
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### 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

Cocoon Childcare Citywest is one of 14 full-day-care services operated by the registered provider. The service opens Monday to Friday from 7:30am to 6:30pm and accommodates children aged between 0 and 6 years. The service provides the Early Childhood Care and Education (ECCE) scheme for three hours each day, 38 weeks of the year. The service operates from a purpose-built ground floor premises in a retail and apartment complex. Children are allocated to one of six pre-school rooms according to their age and have access to sanitary facilities and an outdoor play area. Five rooms were in operation for pre-school children on the day of inspection.

### Staffing

There are 16 staff employed to work directly with pre-school children including the centre manager and deputy manager. The centre manager reports to an operations manager who oversees the management of seven of the registered providers services. Thirteen staff were allocated to work directly with the children on the day of the inspection. Two members of management arrived during the inspection and worked directly with the children making a total of 15.

### 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 areas of governance, health, welfare and development of child and safety. The inspections may also focus on other areas as required.

The inspection focused on an examination of compliance under regulations 9 (2) & (4), 11 (1) & (2), 16 (h), (i), (j) & (k), 19 (1)(b) and 23 (Infection Control and Safe Sleep); however, on inspection additional non-compliance which posed significant risk was identified under Regulation 9(3). These findings are outlined within the relevant regulations within this report.

A sampling process was used to assess compliance under regulation 19(1)(b) and 23. As a result, the scope of the inspection included the Baby room, Wobbler 1 room and Wobbler 2 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 operations manager, centre manager, deputy manager, staff and children who were present on the day of the inspection.

### Part III – Management and Staff

#### Regulation 9 – Management and recruitment

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

*(a) consideration of references from the person’s past employers, if any, and in particular the most recent employer, if any,*

*(b) consideration of references from reputable sources in the case of a person who has no past employers,*

*(c) consideration of the vetting disclosure received from the National Vetting Bureau of the Garda Síochána in accordance with the Act of 2012 in respect of the person, and*

*(d) ensuring, insofar as is practicable, that where a person has lived in a state other than the State for a period of longer than 6 consecutive months, he or she provides police vetting from the police authorities in that state.*

*(3) The procedures specified in paragraph (2) shall be carried out prior to any person being appointed, assigned or allowed access to or contact with a child attending the pre-school service.*

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

#### Compliance Information

The inspection focused on all staff employed by the registered provider for regulation 9(2)(c).

The inspection focused on the recruitment records of adults who had commenced working in the service since the previous inspection dated 23 May 2022 for regulations 9(2)(a), (b) and (d) and 9(4). Eleven staff members had started working in the service since that date. The regulatory requirements were met as follows:

(2)

(a) Records were available evidencing past employer references had been considered for all new employees.

(b) Records were available evidencing sources other than a past employer had been considered for new employees who had only one or no previous employers.

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

(d) International police vetting was available for employees who had lived in another state as an adult.

(4) Records were available evidencing all staff employed to work directly with children held a major award in Early Childhood Care and Education at Level 5 on the National Framework of Qualifications or a qualification deemed to be equivalent.

## Non-Compliance Information

(3) It was not evidenced that Garda vetting was always considered prior to staff commencing work in the service. The Garda vetting disclosure available for one new employee was dated 17 February 2023. The start date recorded for the employee was 10 February 2023.

## Corrective & Preventive Action submitted by the Registered Provider

### Corrective and Preventive Action

The start date documented on the staff members file cover page, is the start date used for payroll purposes as if garda vetting is delayed, payment for employment commences on the original start date agreed. The staff member did not commence active employment until 20 February. Going forward, the start date recorded on the staff file cover page will state the date of active employment.

### Supporting documentation submitted

Document titled 'Staff wage sheet'.

## Summary Comment

The inspectorate has deemed the actions submitted to adequately address the 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.*

#### Compliance Information

(1) There was an adequate number of adults available to the children outside of staff break times. There were 13 staff allocated to work directly with 40 children including the person in charge on the day of inspection.

(2) The minimum ratio of adults to children was maintained outside of staff break times.

#### Non-Compliance Information

(1) The registered provider did not ensure that there were an adequate number of adults working directly with the children when staff took their breaks. One staff member who was due to finish work at 12:30 stayed until 12:50 as it was reported nobody was available to relieve her. The minimum ratio of adults to children was only maintained in Wobbler 2 room at times due to the presence of an adult who was on work experience. Two staff members took half an hour break instead of their usual one-hour break reporting there were “not enough staff today”. One staff member did not take any break despite being rostered to work from 8:30am to 5:30pm.

Both the centre manager and operations manager who were not rostered to work arrived during the inspection and worked directly with the children. Despite this, the minimum ratio requirement of adults to children was not maintained. This is outlined under regulation 11(2) below. The inspectors observed that if the two un-rostered staff had not arrived and usual staff breaks were taken, the minimum ratio requirements would have been further impacted. When discussed at the feedback meeting the three managers reported they were unaware of any staffing issues within the service.

(2) The minimum ratio of adults to children was not met during staff breaks as outlined in the chart below. All children were attending on a full-day-care basis.

### Non-compliant ratio of adults to children on day of inspection

Room Name	Time	Number & Age of children (years)	Number of adults available	Minimum adult to child ratio requirement
Baby Room	12:11-13:20	4 aged 0-1	1	1:3
Wobbler 1	12:05-13:05	12 aged 1-2	2	1:5
Wobbler 2	12:30-13:30	3 aged 1-2 4 aged 2-3	1	1:5 (1-2 years) 1:6 (2-3 years)

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

#### Corrective and Preventive Action

The staff roster was reviewed following the inspection and additional lunch cover was made available to ensure adult to child ratios are maintained. The staff roster will be updated daily to include cover staff where required. The centre staff roster has been reviewed and includes the daily lunch cover schedule. The centre management team will continuously review the staff requirements in line with their term-time schedule to ensure additional lunch cover is available.

#### Supporting documentation submitted

Copy of staff roster including lunch break cover for week starting 17 July 2023.

### Summary Comment

The actions submitted have been deemed to appropriately address the non-compliance. Compliance with the regulatory requirement 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) Records were maintained of the attendance of each child daily. These included the times children arrived at and left the service.

(j) Records were available detailing medications which had been given to children with signed parental consent. The records were complete including the name of the medicine and time and date it was given. A parent/guardian signature was documented indicating the information had been shared.

(k) Records were available detailing accidents and incidents that had occurred involving children while attending the service. These included the required information and a parent/guardian signature indicating the information had been shared.

#### Non-Compliance Information

- (i) It is acknowledged the service had a staff roster available. However, the roster did not accurately depict the staff present in the service on the day of inspection. One staff member who was rostered 'off' arrived during the inspection and worked directly with the children. A manager who was not named on the roster arrived during the inspection and worked directly with the children. There was no provision on the roster for who would provide cover during staff breaks.

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

## Corrective and Preventive Action

The staff roster will be updated daily where required to include the names of all staff in attendance. The weekly roster has been updated to include the lunch time schedule. The staff roster has been updated to include the daily schedule of lunches and will be updated as needed to include cover staff. The centre supervisor has been trained in lunch rostering so that if for any reason the management team cannot complete the task, the supervisor will review the rota and assign cover as appropriate.

## Supporting documentation submitted

Copy of staff roster for week beginning 17 July 2023.

## Summary Comment

The actions submitted have been deemed to adequately address the non-compliance.

## 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-

(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

Inspectors observed that staff were attentive to the personal care of the children. The children's nappies were changed routinely and if needed in between. Bibs were provided when eating to protect their clothes from becoming soiled or wet. Their noses, hands and faces were cleaned when they became soiled. Staff used opportunities when assisting with personal care for warm individual engagement with the children.

Staff sat with the children when eating. They provided them with help when needed whilst supporting their independence. Drinks of water were offered regularly and were always available. Children attending the Baby room had individual routines for food and milk bottles which mirrored their home routines. The babies were held when being bottle-fed with staff making eye contact and speaking to them in a kind manner.

The children attending the Baby room were placed to sleep according to their individual routine or when they displayed signs of tiredness. All children were provided with comfort when being placed to sleep. The sleep room

atmospheres were calm. Children's outer clothing was removed, and blankets were provided. Staff provided the children with reassurance as they were settling to sleep, talking to them gently and sitting next to them. The children who had soothers were offered these.

Staff demonstrated warmth and affection in their interactions with the children. They addressed them by name, used gentle tones and interacted with them in a positive manner. The staff provided the children with comfort when they became upset - holding them and talking to them in soft tones. Individual daily diaries were kept throughout the day to share with parents/guardians to provide for continuation of care.

### Non-Compliance Information

1. The inspectors observed that there was inadequate provision for the individual sleep requirements of children attending the Wobbler 1 room. Twelve children aged 1-2 years were in attendance. The inspectors observed three children displaying signs of tiredness including crying and rubbing their eyes; one from 10:42am. The children were not placed to sleep until the scheduled sleep time for all children at 12pm.
2. The inspectors observed that care practices did not provide for the individual dietary needs of children in the Wobbler 1 room. One child who was displaying signs of over-tiredness refused to eat the main meal of chicken, rice and vegetables which was offered at 11:30. The child was not offered the meal when they woke up and was offered the next scheduled snack of only fruit at 2pm. Through discussion with staff and review of the child's daily diary it was evident that the child ate only yogurt at 10:15. The child was not provided with any other food until the next scheduled meal of pasta and sauce at 3:30pm.
3. All children were not provided with the opportunity for outdoor play and experience. The inspectors observed that the children attending the Baby room did not spend any time outdoors on the day of inspection. A staff member told the inspector that the children had not been brought outside for the two weeks previous. The children were attending on a full-day-care basis.

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

#### Corrective and Preventive Action

1. Some of the younger children had transitioned from the Baby room to the Wobbler Room on the week that the inspection took place, and the staff were familiarising themselves with the individual care routines for the new children in their care. Management can confirm that the children are very well established now, and the individual routines are being maintained by the staff team. The staff have also since attended a training session to prompt deeper understanding of attachment and responding to children’s cues and individual needs. The centre management team are actively monitoring the daily routine in the Wobbler 1 room to ensure that needs led sleep is facilitated throughout the day.

2. The manager has reminded all staff to inform the centre chef if they require an alternative meal or snack for the children throughout the day. The centre management team are actively monitoring the daily routine in the Wobbler 1 room to ensure that alternative meals are provided when needed.

3. Prior to the inspection, a team training meeting was scheduled for completion on August 10th focusing on ‘Outdoor play’, which will be facilitated by both the centre Quality Liaison Person (QLP) and centre management team. The centre Quality Liaison Person (QLP) attends bi-monthly training days focusing on a variety of topics that support best practice and enhance learning opportunities for children. The QLP and centre management team will actively engage the staff team in training to support and enhance outdoor play provision for all care rooms.

### **Supporting documentation submitted**

- Internal record of staff attendance at training dated 18 July 2023.
- Copy of team meeting agenda including outdoor play presentation, quality and compliance dated 10 August 2023.

### **Summary Comment**

The actions submitted have been deemed appropriate in addressing the non-compliances. The practices will be reviewed on the next inspection.

## Part VI - Safety

## Regulation 23 - Safeguarding health, safety and welfare of child

*A registered provider shall ensure that all reasonable measures are taken to safeguard the health, safety and welfare of a pre-school child attending the service and that the environment of the service is safe.*

### Compliance Information

#### Infection Control:

The inspectors observed that measures had been taken to prevent the spread of infection within the service.

Examples of these are outlined below:

- The premises and equipment appeared clean and well maintained. Cleaning schedules were completed and recorded the laundering of fabric items including bed linen.
- Children's hands were washed before eating to prevent the spread of infection.
- Sanitary facilities were equipped with warm water, liquid soap, and paper towels for handwashing.
- Children's soothers and milk bottles were cleaned, stored and sterilized appropriately.

#### Safe Sleep:

The inspectors observed that measures had been taken to safeguard children during sleep as outlined below:

- Children were placed to sleep in appropriate facilities including standard cots and low-level beds according to their age and stage of development.
- An adult always remained in the room when children were sleeping on low-level beds.
- Inspectors observed staff checking sleeping children at 10-minute intervals and maintaining a record of the checks.
- Appropriate bedding was used to prevent overheating.
- Room temperatures were maintained between 16 and 20°C when children were sleeping.

### Non-Compliance Information

#### Infection Control:

1. The nappy changing procedure observed by the inspector was at variance with the service's nappy changing policy. The inspector observed the practices posed a risk of cross infection as outlined below. These issues were observed on the previous inspection dated 23 May 2022. The actions submitted by management following that inspection had not been effective in preventing the non-compliance.

- Babies' hands were not washed after nappy changing. The staff wiped the babies' hands with a wet wipe instead. This practice is not effective in cleaning children's hands adequately.

- Staff did not remove their gloves prior to dressing children following nappy changing. This poses a risk of cross infection as the gloves may become contaminated when changing the soiled nappy.
- A staff member was observed handling the lid of the bin in the sanitary area to dispose of paper towel after handwashing, posing a risk of cross contamination.

2. The pedal mechanism on the bins for disposing nappies in the Baby and Wobbler 1 room was not functioning. This resulted in staff handling the bins to dispose of nappies and leaving one of the bins unlidded with soiled nappies posing a risk of cross infection and malodour. It is acknowledged that the bin the Baby room sanitary area was replaced with a new bin when the inspector brought this to the attention of staff.

### Safe Sleep:

3. The inspectors observed loose cables within reach of a cot in the Baby room and a cot in the Wobbler 1 room posing a risk of strangulation if accessed by a child.

### Action submitted by the Registered Provider

#### Corrective & Preventive Action

#### Infection Control:

1. All staff have been retrained in the service's nappy changing policy with demonstrations on effective nappy changing and handwashing. The centre management team are actively monitoring nappy changes at regular intervals to ensure that all steps of the nappy changing and handwashing policy are being adhered to.
2. The second nappy bin located in the Wobbler 1 room sanitary area was altered and the pedal function readjusted to allow for the correct disposal of nappies. The daily risk assessment for the sanitary area has been updated to include nappy bin checks to ensure they are in working order.

#### Safe Sleep:

3. The maintenance team secured the cables in both sleep rooms on the day of the inspection. The staff were retrained in completing the risk assessments and will notify a member of management if any attention is required. Management will actively monitor the use of additional fans and coolers ensuring all cables are secure.

## Supporting documentation submitted

### Infection Control:

1. Record of staff members provided with handwashing and nappy changing policies including training.
2. Copy of sanitary area checklist template including bins.

### Safe Sleep:

3. Photographs of secured cables.

## Summary Comment

The actions submitted have been deemed to appropriately address the non-compliances.