

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2015DY009
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<b>Name of Service:</b>	Apple of My Eye
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<b>Address of Service:</b>	Unit 9, Meakstown Commercial Centre, Finglas, Dublin 11, Co. Dublin
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<b>Eircode:</b>	D11 KP08
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<b>Name of Registered Provider:</b>	Maria Toomey
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<b>Service type:</b>	Full Day, Part Time, Sessional
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<b>Date of Inspection:</b>	21/04/2023
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<b>No of pre-school children:</b>	AM	41	PM	44
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<b>Address of the Early Years Inspectorate:</b>	Early Years Inspectorate, Floor 2 Brunel Building, Heuston South Quarter, St. John's Road West, Kilmainham, Dublin 8
<b>Inspection undertaken by:</b>	E. Finnegan Hayes
<b>Title:</b>	Early Years Inspector

### 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

Apple of My Eye is a privately operated service providing full day, part time and sessional care to children aged 0 to 6 years old. The service operates from a two-storey purposely adapted commercial unit in a residential area in North Dublin from 8:00am to 6:00pm Monday to Friday. The service consists of four care rooms, a cot room, a sensory room, an office, kitchen, and sanitary facilities. The Baby and Toddler rooms are located on the ground floor while the Tiger's and Lion's rooms are located on the first floor. An enclosed outdoor area is available to the rear of the premises.

### Staffing

The registered provider employs 11 staff to work in the service including the manager. The registered provider does not work directly with the children in the service.

### 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 an examination of compliance under Regulation 9; (1)(a)(b)(c), (2)(a)(b)(c)(d), (4), Regulation 11; (1), (2), Regulation 23, Regulation 24, Regulation 26; (1)(a)(b), (4). These findings are outlined within the relevant regulations within this report.

A sampling process was used to assess compliance under Regulation 16- Record in relation to the preschool service, Regulation 23 – Safeguarding Health, Safety and Welfare of Child, Regulation 24- Checking in and out and record of attendance, Regulation 26 Fire Safety.

The scope of the inspection included the Baby and Toddler room.

Regulation 9 - Management and Recruitment was assessed in relation to all staff currently employed and Regulation 11- Staffing Levels was assessed across all of the rooms. Regulation 19(1)(a) and Regulation 29 were added on the day of inspection in relation to observed non-compliances.

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

An immediate action notice was issued to the service on 21st April 2023 under Regulation 23- Safeguarding the Health, Welfare and Development of the child. A response was received on the 24<sup>th</sup> April 2023 which addressed the concern.

### Acknowledgments

The inspector wishes 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) There was a designated person in charge and a named person to deputise when required.

(c) Discussion with staff and management showed a clear management structure and roles and responsibilities within the service.

(2) A review of the roster and discussion with management and staff established that there were 11 staff currently employed in the service. The files of all staff were reviewed.

(a) Four written and verified references were available from a past employer in relation to 3 staff members.

(b) One written and verified reference was available from a source other than a past employer in relation to 1 staff member.

(c) Garda vetting disclosures were available in relation to all 11 staff members.

(4) Evidence was available to show that 10 staff members who worked directly with the children held 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.

### Non-Compliance Information

(1)(b) A review of the roster showed that the designated person in charge or their deputy is not rostered to be on the premises at all times. The roster provided showed that a named person in charge was not rostered to work at the following times during the week of the inspection;

- Monday 5pm-6pm
- Wednesday 8am-8:30am
- Thursday 8am-9am
- Friday 5:30pm-6pm

(2) (a)(b) A second written and verified reference was not available in relation to four staff.

(a) There was no evidence to show that 8 written references from previous employers in relation to 7 staff members had been verified.

(b) There was no evidence to show that 5 written references from a source other than a previous employer in relation to 5 staff members had been verified.

(d) Police vetting was not available in relation to one staff member who had lived outside of Ireland for more than 6 months as an adult and there was no evidence to show that another staff member did not require police vetting.

(4) Evidence was not available to show that 1 staff member who worked directly with the children held 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.

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

#### **Corrective and Preventive Action**

(1)(b) Rosters have been updated to ensure a person in charge is on the premises at all times. Management is now aware of the requirement.

(2)(a)(b) We have ensured that all current written references from previous employers and sources other than a previous employer have been verified. All staff files will be reviewed to ensure that the correct references are on file and have been verified.

(d) One staff member has finished employment in the service and a review was conducted to ensure other staff members had all the required documentation. A new employee checklist has been implemented.

(4) All staff hold a relevant qualification

### **Supporting documentation submitted**

Documentation in relation to above has been reviewed by the inspectorate.

### **Summary Comment**

The registered provider has addressed the non-compliance under Regulation 9.

## Part III – Management and Staff

### Regulation 11 - Staffing levels

*(1) Subject to this Regulation, a registered provider shall ensure that there is at all times an adequate number of adults working directly with the children attending the pre-school service.*

*(2) Subject to paragraphs (4) and (5), a registered provider of a full day care service or a part-time day care service shall ensure that at all times the minimum ratio of adults to children specified in column (3) of Part 1 of Schedule 6 opposite a particular reference number specified in column (1) of that Part in respect of the age range of the children specified in column (2) thereof at that reference number is satisfied.*

### Compliance Information

(1) There were 41 preschool children being cared for by 8 adults on the morning of inspection. The person in charge was available to cover breaks and assist in the care rooms as required.

(2) Ratios were maintained during the inspection. The following was observed:

- Baby room; 5 children aged 1-2years were being cared for by 1 staff member.
- Toddler room; 12 children aged 2-4years were being cared for by 2 staff members.
- Tiger's room; 15 children aged 3-4years were being cared for by 3 staff members.
- Lion's room; 9 children were being cared for by 2 staff members.

## 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:*

*(k) details of any accident, injury or incident involving a pre-school child attending the service.*

#### Compliance Information

(1)(k) A sample of 14 records in relation to accidents/incidents in the service were checked; 12 were observed to be completed in full.

#### Non-Compliance Information

(1)(k) Two recorded were found to be incomplete; Signatures of the manager and parent/guardian of the child were not present on the form to show that they had been informed of the accidents.

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

##### **Corrective and Preventive Action**

(1)(k) A review of accident forms was conducted, and incomplete ones have now been completed. Forms will not be filed in future until they have been checked to ensure they are complete.

##### **Supporting documentation submitted**

Documentation in relation to above has been reviewed by the inspectorate.

#### Summary Comment

The registered provider has addressed the non-compliance under Regulation 16.

## 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

### Non-Compliance Information

(1)(a)

#### Basic needs

1. The privacy and dignity of children using the toilet was not maintained in the Tiger room where one cubicle did not have a door fitted and the toilet was visible on entering the sanitary area.
2. Staff were not observed to implement the service behaviour management policy for example in the Toddler room children were observed arguing over a play farmhouse a staff member intervened telling the children "Stop pulling, stop pulling, we're going to share the toys" before leaving the area to do other work. One child remained upset following the interaction and another staff member offered comfort a few minutes later. The behaviour management policy advises the use of conflict resolution techniques including asking for solutions from the children and offering support to resolve disputes between children.

#### Physical and Material environment

3. The environment in the Toddler and Baby rooms did not support the children to engage in meaningful play experiences in line with their emerging interests, for example play areas were not defined in either care room, cosy areas available for the children to sit and relax as required and materials were observed to be stored out of reach of the children for example in the baby room books were stored in a cupboard while in the toddler room the microwave and some dolls and associated equipment were stored behind the play kitchen on a deep window ledge which made them inaccessible for some children, a box of construction toys was stored on top of the children's workbench also making it inaccessible. Defined interest areas provide opportunities for the children to initiate activities and engage in spontaneous play in line with their interests. A lack of defined interest areas in the Toddler room was noted as a non-compliance on the last inspection.
4. A number of battery-operated toys in the Baby room were not working which limited their use and interest to the children. This was noted as a non-compliance on the last inspection.

## Programme of Activities

- The programme of activities in the Toddler room was observed to be adult led on the morning of inspection for example the children were sitting at the table in groups playing with tabletop toys such as bricks at 10:10am when the inspector first entered the room. Children remained at the table until 11am when some children began to tidy away the toys. The children were asked what toys they would like to play with now and more toys were provided to them at the table until it was time to tidy up for lunch at 11:20am. From 11am the children were observed arguing over toys and becoming upset.

## Corrective & Preventive Action submitted by the Registered Provider

### Corrective and Preventive Action

- The toilet door has been reinstated and will remain in place.
- Staff have re-read the behaviour management policy and will be asked to remain at ease during inspections.
- The rooms have been reorganised to include defined areas of interest and toys and equipment are now accessible to the children. Staff have been requested to maintain the areas.
- Batteries have now been replaced and monthly checks will be carried out to ensure toys are working. Staff have been reminded to check toys on a frequent basis and replace batteries as needed.
- Staff have been reminded to encourage child led play and have been instructed to limit tabletop activities before dinner to 20minutes. Daily routines will be amended to ensure child led play.

### Supporting documentation submitted

Documentation in relation to above has been reviewed by the Inspectorate.

## Summary Comment

The registered provider has addressed the non-compliance under Regulation 19.

### Part VI - Safety

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

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

#### Compliance Information

##### General Safety:

- The entrance door was secured on arrival to the service. Staff were observed to attend the door to allow access which prevented unauthorised persons entering the building. Coded doors inside the entrance door prevented unauthorised persons accessing the care room unsupervised.
- Internals door were fitted with high handles to prevent children leaving the rooms unsupervised and accessing unsafe areas.
- The stairs fitted with a suitable handrail for safety and the flooring was nonslip and maintained in good condition free from hazards.
- Equipment used by the children was maintained in good condition free from hazards.
- Flexes were secured out of reach of the children.
- Child proof locks were fitted on cupboards which contained items that may pose a risk to the children.
- The kitchen was inaccessible to the children in the service.

##### Infection Control:

- Warm water, liquid hand soap and dispensed handtowels were available to promote adequate hand hygiene.
- Handwashing was completed at regular intervals throughout the day as required for example children's hands were washed before mealtimes.
- Tables were cleaned before mealtimes.
- Cleaning schedules were displayed throughout the service and completed to date.
- Soothers in the Wobbler room were stored in individual labelled containers in the children's storage boxes.

##### Fire Safety:

- Fire exits were unobstructed throughout the inspection.

#### Non-Compliance Information

##### General Safety:

1. A number of bins within the service were observed to not be pedal operated for example in the Toddler room and sanitary area. Pedal operated bins are required for infection control purposes.
2. Cleaning spray was observed on the sink in the wobbler nappy changing area within reach of children.
3. Two blind cords in the wobbler room were observed not to be secured.
4. Teething granules which were out of date were observed in a basket belonging to one of the children in the Wobbler room.

### Infection Control:

5. Tissue was not hygienically dispensed in the upstairs children's sanitary areas. A dispenser was available however rolls of tissue were observed on the cistern and floor presenting a cross contamination risk due to excessive handling of the tissue roll.
6. A section of lino was missing in one cubicle of the Tiger's sanitary area. This posed an infection control risk as the floor was not easily cleaned and wipeable.
7. A number of soothers were stored loosely on a shelf in the first aid press. Staff advised they had been sterilised and were kept as spares; soothers should be stored in individual containers to prevent cross contamination.
8. Mats used by children in the Toddler room were observed to be stacked together once the sheets had been put on them this presented a risk of cross contamination.
9. Soothers owned by the children in the Toddler room were placed on top of the stacked sleep mats in the cot room prior to the mats being brought into the care room for sleep time, this poses a risk of cross contamination.

### Administration of Medication:

10. Care plans were not available for two children who required emergency medication for an allergy. Staff were unsure of the signs and symptoms and the procedure to be followed should an emergency situation occur with either child. An immediate action notice was issued to the register provider.
11. An inhaler was present in the service for a child who no longer attends which is contrary to the service policy which states medication should be returned to the parent or disposed of when a child leaves.
12. A bottle of antihistamine which was present in the first aid press was not labelled and was observed to have expired.

### Safe Sleep:

13. Temperatures in rooms where children were sleeping were not maintained at an ambient temperature of 16-20°C. The following was observed;

- ❖ The cot room temperature was recorded as 21.8°C at 12:16pm and 22.1°C at 12:48pm while three children were sleeping. The room does not have an opening window, staff wedged open the door to the hallway in an attempt to cool the room.
- ❖ The Wobbler room temperature was recorded as 22.2°C at 12:48pm and 21.4°C at 1:27pm. As all windows were open in the room staff wedged open the door to the hallway in an attempt to cool the room.

This was noted as a non-compliance on the last inspection.

14. Three children in the cot room were observed wearing jumpers while asleep during the time the room exceeded the required temperatures for sleep. This posed a risk of the children overheating while asleep.
15. Staff were not observed to conduct physical checks of sleeping children every 10 minutes as per the service policy. A staff member was observed to check the children at 12:15pm. The next check conducted was 12:34pm followed by 12:46pm. One child could be heard coughing consisting during this time. A review of the sleep check record did not accurately reflect the times the physical checks took place.
16. The zip on one mattress cover was observed to be broken which exposed the foam of the mattress. This posed a choking hazard should the child using the cot ingest the foam and also an infection control risk.

### Fire Safety:

17. The fire evacuation procedure displayed in the Toddler room did not show where the staff and children should proceed to having evacuated the care room for example it did not instruct one to proceed to an assembly point.

### Action submitted by the Registered Provider

#### Corrective & Preventive Action

#### General Safety:

1. Pedal operated bins have been placed in all rooms as required.
2. Cleaning sprays will be stored out of reach of the children as per service policy. Staff will be reminded of the risks of leaving sprays within reach of children.
3. Blind cords have been secured. Room maintenance will be completed quarterly.
4. Teething granules have been disposed of. Room leaders have been designated responsibility to carry out monthly checks to ensure standards are kept.

#### Infection Control:

5. Toilet tissue has been placed in the dispensers and room leaders will check this going forward.
6. The lino has been replaced. Room maintenance checks will highlight any issues as they arise.
7. Staff have been advised to store soother in the appropriate containers. This has been reiterated at a staff meeting.
8. Sleep mats are no longer stacked once the sheets have been placed on them. This has been reiterated to staff at a staff meeting.
9. Soothers will now be brought to the sleep mats in their containers. This has been reiterated to staff at a staff meeting.

### Administration of Medication:

10. Detailed care plans are now available for both children.
11. The inhaler has been disposed of and a room checklist has been implemented.
12. The antihistamine has been disposed of and a room checklist has been implemented.

### Safe Sleep:

13. Thermometers have been reinstated in care rooms and sleep rooms and staff have been advised to monitor the temperature in advance of sleep times. A fan which was in the cot room is now used daily.
14. Staff have been reminded of the need to kept children cool while sleeping. Staff will be monitored by room leaders and management to ensure standards and safety measures are kept.
15. Staff will monitor children every 10 minutes while sleep and record both the check and room temperatures. Staff will be monitored by room leaders and management to ensure standards and safety measures are kept.
16. A new mattress cover is in place. Monthly checks will include checking the condition of sleep mats, cots and mattresses.

### Fire Safety:

17. The fire evacuation procedure has been updated to detail where children should proceed in a fire evacuation. Fire evacuation procedures will be reviewed periodically.

### Supporting documentation submitted

Documentation in relation to above has been reviewed by the Inspectorate.

### Summary Comment

The registered provider has addressed the non-compliance under Regulation 23.

## Part VI - Safety

### Regulation 24 - Checking in and out and record of attendance

(1) A registered provider shall ensure that each pre-school child attending the service is checked in and out of the service by an employee or an unpaid worker.

(3) A registered provider shall ensure that-

(a) no person other than-

(i) pre-school child attending the service,

(ii) a person dropping or collecting such a child,

(iii) an employee, or

(iv) an unpaid worker, can enter the premises without his or her entry being approved by an employee, and

(b) a daily record in writing is kept of the entry on the premises of any such person.

#### Compliance Information

(1) Staff greeted children at the door on arrival and brought them to their respective care rooms. The same process was in place for collection time when children were leaving the service. Staff were knowledgeable on the requirements for only handing children out to authorised persons.

(3)(a) Visitors to the service were greeted at the door by staff members and permitted access. Coded locks are in place to prevent unauthorised persons accessing the areas where the care rooms are without the knowledge or approval of staff.

#### Non-Compliance Information

(1) The attendance in the service of a child who arrived in the Toddler room at 10am was not recorded on a software app which the service used to record attendance at 10:54am.

(3)(b) A record of visitors to the service was not maintained. For example, the inspector was not asked to sign in on the day of inspection. The manager informed the inspector that the visitor book has not been used as they have limited the number of people entering the building since COVID19.

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

##### Corrective and Preventive Action

(1) Staff will ensure that attendance is recorded on the software application. This has been reiterated to staff at a staff meeting and management will conduct periodic reviews.

(3)(b) The visitor book has been reinstated and will now be used at all times.

### Supporting documentation submitted

Documentation in relation to above has been reviewed by the Inspectorate.

### Summary Comment

The registered provider has addressed the non-compliance under Regulation 24.

## Part VI - Safety

### Regulation 26 - Fire safety measures

- (1) A registered provider shall ensure that a record in writing is kept of-*
- (a) any fire drill that takes place in the premises, and*
  - (b) the number, type and maintenance record of fire fighting equipment and smoke alarms in the premises.*
- (4) A notice of the procedures to be followed in the event of fire shall be displayed in a conspicuous position in the premises.*

### Compliance Information

- (1) (a) A record of monthly fire drills was available in the service. Records and conversation with staff showed that the last fire drill took place on 29<sup>th</sup> March 2023.
- (b) A record detailing the number, type and maintenance record of firefighting equipment and smoke alarms in the premises was available on the premises. The record showed that the smoke alarm was last serviced on 18<sup>th</sup> October 2022.
- (4) Notices of the procedures to follow in the event of a fire emergency were available throughout the building in care rooms and communal areas.

### Non-Compliance Information

- (1)(b) The record available did not show that the servicing of firefighting equipment was completed on an annual basis for example the firefighting equipment was last serviced on 23<sup>rd</sup> February 2022.

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

### Corrective and Preventive Action

(1)(b) The agent has now completed a service of the firefighting equipment. Management will be more diligent in ensuring certificates are in date.

**Supporting documentation submitted**

Documentation in relation to above has been reviewed by the inspectorate.

**Summary Comment**

The registered provider has addressed the non-compliance under Regulation 26.

**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**

- (c)
1. An ambient temperature was not maintained in care rooms within the service for example; the temperature of the Toddler room was recorded as 23.1°C at 11:07am while the temperature of the Wobbler room was recorded as 22.3°C at 11:48am.
  2. A malodour was present in the Wobbler room nappy changing area. A mechanical ventilation system was present in this room. Adequate ventilation is required to remove odours from rooms.

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

**Corrective and Preventive Action**

1. Thermometers have been reinstated in care rooms. Staff have been advised to monitor temperatures on an ongoing basis.
2. The time that a malodour is present following nappy changing will be monitored. Staff have been advised to monitor this.

**Supporting documentation submitted**

Documentation in relation to above has been reviewed by the Inspectorate.

**Summary Comment**

The registered provider has addressed the non-compliance under Regulation 29.