

# Early Years Inspectorate Regulatory Report

## Pre School

**TUSLA Identifier:** TU2015DY017

**Name of Service:** Ballymun East Community Centre

**Address of Service:** Woodhazel Close, Ballymun, Dublin 9, Co. Dublin

**Eircode:** D09 N9K4

**Name of Registered Provider:** Deborah Cooper

**Service type:** Full Day, Part Time, Sessional

**Date(s) of Inspection:** 10/05/2023

<b>No of pre-school children:</b>	<b>AM</b>	44	<b>PM</b>	22

<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. Finnegan Hayes
<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).

Conditions if applicable

Not applicable.

### Description of service

Ballymun East Community Centre was established in this location in 2000 as a community based childcare service. The service provides sessional, part time and full day care and education to children aged from 1 to 6 years and participates in the Early Childhood Care and Education (ECCE) scheme which is delivered from 9.00am to 12.00 noon. Opening times are from 9am to 5pm daily.

There are five care rooms currently in operation which are spread over two floors. The Turtle Room (10 to 18 months) and Little Wonders (18 to 24 months), a kitchen and an office are on the ground floor and Tara Tots (2 to 3 years), Jumping Jacks (2.5 to 3.5 years) and the Rainbow Room (3 to 5 years) are on the first floor. Little Einstein's (3 to 5 years) on the first floor is not currently in operation. There is sanitary accommodation located off each of the rooms, and sleeping facilities located off the Turtle Room, Little Wonders and Tara Tots. The outdoor play areas are located at the front and the side of the premises, however the area to the side of the building is not currently in use.

### Staffing

There are 18 staff employed by the centre including the registered provider who manages the oversight of the service. The person in charge and a childcare liaison worker assist in managing the oversight of the service and are available where needed to provide cover across the rooms, 12 staff who work directly with the children, a caretaker, a cook and an administration worker. There are also 17 adults employed under the Community Employment (CE) programme including 7 childcare workers, 3 cleaning staff, 4 kitchen staff, 2 caretakers and an office worker. These are managed by the CE supervisor.

There were 30 adults on the premises throughout the day of the inspection, including the registered provider, the person in charge, the childcare liaison worker, 9 childcare staff, the caretaker, the cook, the CE Supervisor and 15 CE workers including 6 CE childcare staff.

### Methodology

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

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

The findings on inspection are based on:

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

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

The inspection focused on an examination of compliance under regulations 9(1)(2)(a)(b)(c)(d), (4); 11(1)(4)(8)(9); 21, 23, 26 and 29. However, on inspection additional non-compliances were identified under Regulation 8 and 16. These findings are outlined within the relevant regulations within this report.

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

- Regulation 21 – Equipment and Materials
- Regulation 23 – Safeguarding Health, Safety and Welfare of Children
- Regulation 29 - Premises

As a result, the scope of the inspection included the Turtle Room, Little Wonders, Tara Tots, and Jumping Jacks and did not include the Rainbow Room and Little Einstein's.

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 II - Registration and Register

### Regulation 8 - Notification of change in circumstances

*(1) A registered provider of a pre-school service other than a temporary pre-school service shall, subject to paragraph (3), notify the Agency in writing of any proposed change in the details in relation to the pre-school service contained in the register pursuant to section 58C(2) of the Act or Regulation 7(2) at least 60 days before it is proposed that the change would take effect.*

### Non-Compliance Information

(1) The registered provider did not notify the agency of the change of the person in charge in the service.

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

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

The service notified the Agency of the change of person in charge.

#### **Supporting documentation submitted**

Evidence was submitted of the application for change in person in charge.

### Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 8(1) has been adequately addressed.

## 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) 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.

The files of 35 adult were reviewed. The registered provider had completed the following checks:

(2)

(a) Thirty validated written references were available from recent past employers.

(b) Forty validated written references were available from a source other than a past employer.

(c) Completed Garda vetting disclosures were available in respect of the 35 adults.

(4) The 17 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 and Youth Affairs.

### Non-Compliance Information

(2)(d) One adult who had lived outside of the state for six months or more as an adult did not have international police vetting from that state available for inspection.

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

#### Corrective and Preventive Action

The service has applied for international vetting for this person. The staff member does not have direct access to the children.

The service will ensure that if a person has lived in a different country, that international vetting will be applied for as well as the normal garda vetting.

#### Supporting documentation submitted

Evidence of application for international police vetting was submitted.

#### Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 9(2)(d) remains outstanding and will be reviewed on the next inspection.

### 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) There were an adequate number of adults working directly with the children. There were 11 adults working with 44 children when the inspectors arrived unannounced to the service at 9.30am.

(4) The correct adult/child ratio was maintained in the service throughout the inspection at all times.

The adult child ratios were maintained as follows;

- Turtle Room: 2 adults to 4 children aged between 10 to 18 months.
- Little Wonders: 2 adults to 6 children aged between 1 to 2 years.
- Tara Tots: 2 adults to 6 children aged between 2 to 3 years.
- Jumping Jacks 3 adults to 15 children aged between 2.5 and 3.5 years.

- Rainbow Room: 2 adults to 13 children aged between 3 to 5 years.

## 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;

#### Compliance Information

(1)(h) a record of the details of the attendance of children was maintained on a daily basis.

#### Non-Compliance Information

(1)(j) There was no record available of details of the staff roster on a daily basis.

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

##### Corrective and Preventive Action

The staff sign in sheets have now been modified with the correct required information. New sheets are available daily.

##### Supporting documentation submitted

A copy of the staff roster was submitted.

#### Summary Comment

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

## Part V - Care of Child in Pre-school Service

### Regulation 20 – Facilities for rest and play

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

(a) having regard to the number of pre-school children attending the service, their respective ages and the amount of time they spend on the premises, there are adequate and suitable facilities for each child 19 to play indoors and, where required by these Regulations, outdoors, during the day, and

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

## Compliance Information

(1)(a)

- There was an adequate supply of cots available to children under two years of age. There were 10 cots available on the premises.
- There were defined rest areas with soft flooring and cushions available in the Turtle Room and Little Wonders.

## Part V - Care of Child in Pre-school Service

### Regulation 21 – Equipment and materials

*A registered provider shall ensure that there is adequate and suitable furniture, play and work equipment and materials available on the premises of the pre-school service.*

## Compliance Information

- There was an adequate supply of play materials and equipment available to the children according to their age and stage of development, to include: arts and crafts materials; range of jigsaws; range of construction toys; sorting and stacking toys; range of toys for transporting such as cars and trains with tracks, small world play toys.
- The toys and equipment were laid out on low level shelving, visible to the children.
- The furniture and equipment was observed to be well maintained, durable and easy to clean.

## Non-Compliance Information

1. The equipment and materials available in Tara Tots Room did not support independent play. For example:
  - The equipment was not organised or grouped into defined interest areas which can assist children to better focus on their play activities.
  - Books were stacked on a shelf and were not displayed to be visible to the children.
  - Some of the equipment available was not suitable for the age of the children in the room, such a musical spinning toy which was more suited to a younger age group.
  - Play equipment for the kitchen was limited and was not stored adjacent to the kitchen.

- Some of the play materials were not freely available and were stored out of reach of the children, for example the sand was not accessible on the day of the inspection.

It is acknowledged that staff were aware that equipment and materials in this room required investment and planning, and a list of resources had been drafted to submit for purchase.

2. Battery operated toys were not working in the Turtle Room and Tara Tots Room. Toys and equipment need to be appropriately maintained.
3. The tables in Jumping Jacks Room were not a suitable height for the children in the room. The tables were at chest height to some of the children while they were seated for tabletop activities and mealtime. Furniture provided must be appropriate for children to use to encourage them to participate comfortably in self-feeding and tabletop activities.

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

#### Corrective and Preventive Action

1. The service has purchased new toys and equipment for the rooms which are age appropriate and have assisted the staff in arranging their room in defined areas using high scope supports. All the toys and equipment are accessible to the children to play freely with them, sand and water are assessable to all the children. The books have been displayed and more scattered cushions available to make area cosy.

Preventive Action: the service will be more supportive with the staff and check on their rooms and equipment regularly.

2. All the battery-operated toys in both rooms were checked and batteries where replaced. The ones that didn't work where discarded, and new ones purchased.

Preventive Action: The staff where informed to check the toys regularly and the service have purchased replacement batteries which are stored in the office.

3. The service has replaced the tables and where they weren't replaced the maintenance person cut the legs of the table to the appropriate size.

Preventive Action: the service will ensure seating is the correct size

#### Supporting documentation submitted

Photographic evidence for points 1, 2 and 3 was submitted.

### Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 21 has been 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:

- All cleaning agents and sharp equipment were stored out of reach of the children in locked presses or on high shelves.
- The kitchen was inaccessible to the children in the day of the inspection and staff was aware of safety protocols.
- The staircase was adequately lit, with appropriate handrails and the flooring was in good condition and non-slip.
- All radiators were appropriately covered.

##### Infection Control:

- Thermostatically controlled warm water was available at all sinks.
- Bins in the outdoor play area were inaccessible to children.
- Children were observed to handwash before dinner.

##### Administration of Medication:

- There was a record available for the administration of medication.

#### Non-Compliance Information

##### General Safety:

The following hazards were found in the outdoor area which increased the risk to children:

1. The gate leading to the enclosed play area to the front was not secured whilst the children were playing there. There was a risk children could leave the play area unsupervised.
2. There was no gate to close off the area at the maintenance shed to the front of the building. Children could gain access to this area.
3. Children could gain access to the space behind and to the side of the two sheds in the outdoor play area where discarded items such as rusty metal, broken wood and tyres were stored. These posed a risk of injury.

4. The wood on the side of the blue shed and end of the blue fencing was chipped, splintered and unfinished. These posed a risk of injury to children.
5. The foam on the seat on the seesaw was exposed. This posed a choking hazard to children.
6. There was no risk assessment available for the outdoor play area to identify risks to children. There was no consideration of risks or hazards, and the measures put in place to address or minimise these.
7. Sand had not been cleared up from the floor by the nappy change area in Jumping Jacks care room, leaving the floor slippery and a hazard for children.

### Infection Control:

The following increased the potential risk of infection:

8. There was an increased potential for cross contamination as the following items were observed to be stored in the sanitary accommodation of the following rooms:
  - Two low chairs were stored on the floor in the Turtle Room.
  - Two spacer devices for the administration of oral inhalation medication in Little Wonders Room.
  - Ride on cars and wooden blocks in Tara Tots.
  - A box of blocks and art materials in Jumping Jacks.

Only items for use in the sanitary accommodation area should be stored there.
9. There was no liquid hand soap in the dispenser in the sanitary accommodation in Tara Tots Room and in one of the toilets in Jumping Jacks room.
10. The waste disposal unit in the following areas were not pedal operated and required repeated hand touch to operate:
  - The sanitary accommodation in Jumping Jacks Room.
  - Staff toilet.
11. The radiator cover in Tara Tots Room was not painted in one section, leaving the wood exposed. This was not a suitable surface for effective cleaning.

### Administration of Medication:

12. There was no written care plan available for a child requiring medication in Little Wonders Room. Clear written instruction must be available detailing when to administer medication, and the required amount.

### Safe Sleep:

13. The temperature of the Tara Tots cot room was not maintained between 16-20°C whilst children were sleeping as per the service's safe sleep policy. The inspector recorded the temperature of the Tara Tots cot room while a child was sleeping as 21°C at 11.34am.

There was no plan or procedure in place to reduce the temperatures in the room.

- Sleep checks were observed to be completed via a viewing panel in Tara Tots cot room. Viewing panels must not be used a substitute for physically monitoring sleeping children as it will not identify changes in the child colour of breathing appropriately.

### Fire Safety:

- Fire drills were not carried out on a regular basis. The last fire drill was on the 13<sup>th</sup> October 2022. This did not support the safe evacuation of the premises in the case of an emergency. A service should carry out monthly fire drills in order for staff and children to be familiar with the evacuation process.

### Action submitted by the Registered Provider

#### Corrective & Preventive Action

#### General Safety:

- New risk assessment sheets were developed for the staff to complete before they enter the play area and to check all gates are closed, the maintenance person is currently building an extra gate to ensure extra safety.  
Preventive action: the service will check risk assessment sheets.
- There has since been a gate built to ensure children can't access this area.  
Preventive action: This was also added to the risk assessment sheet.
- This area has been blocked in.  
Preventive action: The staff will check all areas before entering the play area and use the risk assessment sheets.
- The wood has been sanded and is now smooth.  
Preventive action: The Maintenance person will check this continuously on risk assessment sheet.
- The leather has been replaced on the seesaw.  
Preventive action: The Maintenance person will check this continuously on risk assessment sheet.
- The service has since developed a risk assessment sheet for staff and maintenance person.  
Preventive action: The staff will check all areas before entering the play area and use the risk assessment sheets. The maintenance team will check the outside area at different times during the day regularly.
- The service has since changed where the sand area is in this room, and now have a unit separating the area from the nappy changing area to protect staff and children from slipping.  
Preventive action: Staff will still be mindful to tidy sand up.

### Infection Control:

8. The chairs were removed from this area. All Spacer devices have individual boxes and are stored on a shelf in appropriate area. Ride on cars have been removed. Art equipment and blocks have been removed.

Preventive action: Staff were informed that they need to store excess furniture toys correctly and hygienically. Sanitary areas and nappy areas to be left strictly for that reason staff have been informed and regular checks will be done.

9. All hand soaps have been restocked and extra has been placed in the rooms to ensure there is always adequate soap there.

Preventive action: The staff were informed to let office know when replacement soap dispensers are been used so we can restock them.

10. New bins have been ordered.

11. The Radiator cover in Tara tots has been painted where the wood was exposed.

Preventive action: Regular checks of the rooms and conditions will be done on the upkeep of the centre.

### Administration of Medication:

12. The service has created new Care Plans for each child in the relevant rooms. Their medication is stored in their own plastic sealed boxes with the care plan instructions inside.

Preventive action: the service will ensure every child that needs a care plan there is one provided and that all room leaders and assistants are aware of our new measures.

### Safe Sleep:

13. The service has humidifiers, and the staff are aware now that they can turn this on to fan if the temperature was over the correct reading.

Preventive action: All rooms have these humidifiers and have been given the instruction to use them when necessary.

14. The service has discussed this with all staff that they must enter the cot area and check the child.

Preventive action: Spot checks will be done on staff to ensure they are following correct sleep policy; the policy has been placed in each of the rooms and staff have read through the policy.

### Fire Safety:

15. The service has addressed this and since started doing fire drills there will be a log of each drill recorded

## Supporting documentation submitted

### General Safety:

1. Completed risk assessment sheet.
2. Photographic evidence
3. Photographic evidence
4. Photographic evidence
5. Photographic evidence
6. Photographic evidence
7. No evidence submitted.

### Infection Control:

8. No evidence submitted.
9. No evidence submitted.
10. Photographic evidence
11. Photographic evidence.

### Administration of Medication:

12. Photographic evidence  
Copy of care plan.

### Safe Sleep:

13. And 14 Copy of safe sleep policy.

### Fire Safety:

15. Copy of recent fire drill record.

## Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliances identified under Regulation 23 has been addressed and will be reviewed on the next inspection.

### 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 in writing of fire drills was available on the premises.
  - (b) An up-to-date maintenance record was available for the Fire extinguishers and smoke alarms in the premises. The fire extinguishers were serviced on 1<sup>st</sup> September 2022 and the smoke alarms were maintained on the 27<sup>th</sup> March 2023.
- (4) A procedure to be followed in the event of a fire was on display in each of the care rooms and in the hallway.

### Part VII - Premises and Space Requirements

#### Regulation 29 - Premises

- A registered provider shall ensure that the premises of the service are-
- (a) of sound and stable structure,
  - (b) safe and secure,
  - (c) adequately lit, heated and ventilated,
  - (d) cleaned, maintained and repaired, as required,
  - (e) equipped with adequate and suitable sanitary facilities

#### Compliance Information

- (a) On visual inspection the building appeared to be of a sound and stable structure.
- (b) The premises appeared to be safe and secure. For example:

- The entrance to the service was securely locked on arrival to the service which prevented unauthorised persons gaining access and also prevented children leaving unsupervised. Staff monitored entry and exit to and from the building.
  - All exits were clearly marked with emergency lighting and were unobstructed.
- (c) All rooms and sanitary accommodation were adequately ventilated.
- (e) The sanitary accommodation was partitioned with suitable doors to provide children with privacy.

### Non-Compliance Information

(d) The premises were not observed to be cleaned, maintained and repaired as required as evidenced by the following:

- There was a hole in the wall in the nappy changing area in the Tara Tots Room.
- In Tara Tots the walls appeared dirty and paint was chipped and peeling in places.
- Tiles were broken in the sanitary area in the Jumping Jacks Room.
- Paint was chipped on the outdoor slide and swing unit.

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

#### Corrective and Preventive Action

The hole in the wall in the nappy area has since been repaired.

The walls in tara tots and all the classrooms have all been freshly painted.

There has been new lino placed in the sanitary area in Jumping Jacks

The paint on the outside slide and swing area has been repaired.

Preventative action: The maintenance staff will do regular checks on the grounds and ensure the upkeep is up to correct standards

#### Supporting documentation submitted

Photographic evidence of the wall in the nappy changing area, Tara Tots room, the slide submitted.

### Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliances identified under Regulation 29 has been addressed and will be reviewed on the next inspection.