

# Early Years Inspectorate Regulatory Report

## Pre School

|                          |             |
|--------------------------|-------------|
| <b>TUSLA Identifier:</b> | TU2015DY028 |
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|                         |                     |
|-------------------------|---------------------|
| <b>Name of Service:</b> | Little Stars Creche |
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|                            |   |
|----------------------------|---|
| <b>Address of Service:</b> | 116 North King Street, Dublin 7, Co. Dublin |
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|                 |          |
|-----------------|----------|
| <b>Eircode:</b> | D07 DW22 |
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|                                     |                   |
|-------------------------------------|-------------------|
| <b>Name of Registered Provider:</b> | Denise Cunningham |
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|                      |                                |
|----------------------|--------------------------------|
| <b>Service type:</b> | Full Day, Part Time, Sessional |
|----------------------|--------------------------------|

|                               |            |
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| <b>Date(s) of Inspection:</b> | 30/05/2024 |
|-------------------------------|------------|

|                                   |    |    |    |   |
|-----------------------------------|----|----|----|---|
| <b>No of pre-school children:</b> | AM | 16 | PM | 0 |
|-----------------------------------|----|----|----|---|

|   |  |
|---|--|
| <b>Address of the Early Years Inspectorate:</b> | Early Years Inspectorate,<br>Child and Family Agency,<br>Second Floor, Unit 4&5<br>Nexus Building, Block 6A,<br>Blanchardstown Corporate Park, Dublin 15 |
| <b>Inspection undertaken by:</b>                | Á Dunne 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. |
|---------------------------------|-----------------|

### Description of service

Little Stars Creche, located in Dublin 7, is a community service which has been in operation since 2005. It offers part-time and sessional childcare to children aged from 1 to 6 years of age from 9am to 14.30pm. However, the service is currently operating from 9am to 1pm Monday to Friday. It consists of one large room subdivided into two separate areas – the first area caters for the Baby room for children aged 1 – 2 years and the second area caters jointly for the Toddler room for children aged 2 – 3 years and the Preschool room for children aged 3 – 5 years. Both areas were in use on the day of inspection. An enclosed outdoor area is available to the rear of the building. The service participates in the Early Childhood Care and Education (ECCE) scheme.

### Staffing

The service employs ten staff to work in the service to include the registered provider who is the service manager, three childcare staff, two staff employed under the Access Inclusion Model (AIM) and two staff employed under a Community Employment (CE) scheme, a cook and an auxiliary staff member. On the day of inspection, seven staff were present to include the registered provider, two childcare staff, one staff employed under the Access inclusion Model and two staff employed under the Community Employment Scheme and the auxiliary staff member as the cook.

### 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 inspection may also focus on other areas as required.

The inspection focused on an examination of compliance under regulations as follows:

Regulation 9 Management and recruitment (2)(a)(b)(c)(d), (3), (4), (6A), (7)(a).

Regulation 11 Staffing Levels (1)(2)(8)(a).

Regulation 15 (1)(f), (3)(a), (b), (c),

Regulation 16 Record in relation to Pre- School Service (g) (h), (i), (j), (k).

Regulation 19 Health Welfare and Development of Child (1)(a), (3).

Regulation 22 Food and Drink.

Regulation 23 Safeguarding Health, Safety and Welfare of child.

Regulation 32 Complaints (1)(a)(b)(c), (2)(a)(b), (3)(a)(b), (4).

A sampling process was used to assess compliance under Regulation 16 Record in relation to Pre- School Service, Regulation 19 Health, Welfare and Development of Child and Regulation 23 Safeguarding Health, Safety and Welfare of child. The scope of the inspection included the two areas of the three rooms - the Baby room, the Toddler room, and the Preschool 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.

### Additional Information

This Inspection was triggered following receipt of information received by the inspectorate.

### Acknowledgments

The inspectors wish to acknowledge the cooperation of the registered provider, 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.*

*(6A) is inserted by S.I. No.632 of 2016 CHILD CARE ACT 1991 (EARLY YEARS SERVICES) (AMENDMENT) REGULATIONS 2016 which states; Regulation 9 of the Child Care Act 1991 (Early Years Services) Regulations (S.I. No. 221 of 2016) is amended - in paragraph (4), by the substitution of “paragraphs (5), (6) and (6A)” for “paragraphs (5) and (6)”, and (b) by the insertion of the following paragraph after paragraph (6): “*

*(6A) Paragraph (4) shall not apply to an employee of a registered provider where - (a) the registered provider receives funding for the employment of the employee pursuant to a scheme funded by the Minister and known as*

*the Access and Inclusion Model, and (b) the employment of the employee is for the purpose of providing support, pursuant to the scheme referred to in subparagraph (a), for a child attending the service to enable the child to participate in the programme known as the Early Childhood Care and Education (ECCE) funding Programme.”*

*(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;*

*(b) Part VIIA (inserted by section 92 of the Child and Family Agency Act 2013 (No. 40 of 2013)) of the Act, and*

*(c) these Regulations.*

### Compliance Information

(2) The files of ten adults were reviewed as part of the inspection.

(a) The registered provider had two written references and

Two written and validated references were available for three adults from a past employer.

One written and validated reference was available for three adults from a past employer.

(b)

Two written and validated references were available for one adult from a source other than from a past employer.

One written and validated reference was available for four adults from a source other than a past employer.

(c) Garda vetting disclosures were available for ten adults. The service also demonstrated compliance, with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years.

(d) Police vetting was not required for eight adults who had not lived outside the State for longer than six months as an adult.

(4) Documentation was available to show that seven adults 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 and Youth Affairs.

### Non-Compliance Information

(2) (a)

- One written reference was not available for one adult.
- One written reference available for two staff members from past employers were not validated.

(d) Police vetting was not available for one adult who had lived outside the state for longer than six months as an adult.

(3) The registered provider did not carry out the procedures specified in paragraph (2) prior to three staff members being appointed, assigned, or allowed access to or contact with a child attending the service, for example, one written and validated reference not present for one adult, two written references not validated for two adults, police vetting not attained for one adult and curriculum vitae not present to ascertain if police vetting was required for one adult.

(4) Two adults employed within the service and working with the early years children did not have evidence to confirm they held a major award in Early Childhood Care and Education at Level 5 or above on the National Framework of Qualifications.

(7)(a) There was no available documentation to review, to demonstrate that new staff had received induction training relating to topics such as the services policies and procedures prior to starting in the service or that all staff received ongoing training relating to the services Behavioural management policy, the Smoking/ Vaping policy, areas to be used during outdoor play and training on how complaints are dealt with.

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

#### Corrective and Preventive Action

(2)(a)

The written reference was received on the 12 June 2024.

The two written references have been validated on 31 May 2024 and the 6 June 2024.

All staff references have been updated and will be updated accordingly in the future.

(d) The staff member applied to the correct authorities and is awaiting certification. As this staff member was referred to us through a third party, the service has asked that they fully check their validity to start work and the service will do this also before any potential staff members commence work in the service.

(3) References obtained and validated, Police vetting obtained and curriculum vitae validated. The service will keep note of times in order to review all staff documents to make sure they are up to date.

(4) The service received one staff members QQI Level 5 qualification and as the awarding body are no longer in operation, the service is trying to obtain the 2<sup>nd</sup> staff member's final cert. The service has submitted the staff members transcript of individual awards as proof of their level 5 qualifications to date. No potential staff member will be allowed to commence work in the service without a copy of their final cert of achievement.

(7)(a) Policies and procedures regarding non compliances were given to all new staff prior to inspection and have been re issued since the inspection. Ongoing training will be undertaken going forward.

### **Supporting documentation submitted**

- (2)(a) Three written and validated references submitted.
- (d) Copy of Police Vetting submitted.
- (3) Copy of Curriculum Vitae submitted.
- (4) No relevant evidence submitted
- (7) Evidence of Staff Training meeting held 12 June 2024

### **Summary Comment**

The non compliances outlined under Regulation 9 (2) (a), (d) , (3), and (7) (a) have been addressed but Regulation 9 (4) remains outstanding as relevant evidence was not submitted, this 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.*
- (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.*
- (8) Without prejudice to paragraphs (2) to (7)-*
  - (a) a registered provider of a pre-school service other than a child-minding service or a sessional pre-school service shall ensure that there are at least 2 adults on the premises at all times.*

### **Compliance Information**

- (1) The registered provider ensured that there were an adequate number of adults working directly with the children attending the service. On the morning of the inspection there were five adults working directly with 16 children aged between 1 years to 6 years.
- (2) The minimum ratio of adults to children was maintained during the inspection as the table below demonstrates.

| Room Name      | Age profile      | Morning                  |
|----------------|------------------|--------------------------|
| Baby room      | 1-2 years        | 2 adults with 3 children |
| Toddler room   | 2 years -3 years | 1 adult with 4 children  |
| Preschool room | 3-5 years        | 2 adults with 9 children |

|       |             |                           |
|-------|-------------|---------------------------|
| Total | (1-6 years) | 5 adults with 16 children |
|-------|-------------|---------------------------|

The registered provider was available in a supernumerary capacity and covered in rooms as required.

(8)(a) On review of the service roster it was observed that two adults were on the premises during the operation of the service.

### Part IV – Information and Records

#### Regulation 15 – Record of pre-school child

*(1) A registered provider of a pre-school service other than a pre-school service in a drop-in centre or a temporary pre-school service shall ensure that a record in writing is kept in respect of each pre-school child attending the service containing the following particulars:*

*(f) details of any illness, disability, allergy or special need of the child, together with all the information relevant to the provision of special care or attention;*

*(3) A record in writing referred to in paragraph (1) or (2) shall be open to inspection on the premises by-*

- (a) a parent or guardian of a pre-school child but only in respect of the record relating to that child,*
- (b) an employee who is authorised in that behalf by the registered provider, and*
- (c) an authorised person.*

#### Non-Compliance Information

(1)(f) Details of illness, disability or special needs of one child, together with all the information relevant to the provision of their special care needs and requirements, behaviour management, communication with parents, progression while attending the service, was not available for one child attending the service. For example, no written or electronic records were available to demonstrate that staff reported daily communication and had engagement with parents regarding the child's developmental plans, individual actions taken by staff or suitable behaviour management techniques.

(3) (a), (b), (c) No written record as per (1) above was available for inspection by an authorised person.

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

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

(1)(f) Any communication or correspondence between parents/guardians and staff member will be recorded in writing going forward Communication folder has been placed in the rooms for any correspondence to be recorded between staff and parents/guardians to record.

(3)(a)(b)(c) Communication folder placed in rooms for any correspondence regarding issues. Staff will fill these accordingly.

**Supporting documentation submitted**

(1)(f) and (3) Template for Record of Correspondence with Parents submitted.

**Summary Comment**

Under Regulation 15, the non-compliances identified have been addressed.

**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:*

- (g) the policies, procedures and statements the service is required to maintain in accordance with Regulation 10;*
- (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**

- (j) No medication had been administered in the service since the last inspection, but medication administration forms were available to note details of medicine administered to a preschool child attending the service when required.

**Non-Compliance Information**

(1)(g) On review of the policies made available on the day of inspection, it was observed that the following policies were not updated as per the corrective and preventive actions submitted by the registered provider following the inspection of the service on the 27 October 2022.

For example, the following policies were still demonstrating incorrect information:

- Healthy Eating Policy – stated Our Health Eating menu rotates every three weeks, ensuring a variety of different nutrients and tastes which will help to educate your child’s palate. The Service has a 2-week menu plan in place, this is at variance to the policy.

- Handwashing Policy – did not include mention of handwashing after nappy changing for children or adults.
  - Nappy Changing Policy – did not include mention use of aprons, clear direction for when gloves should be removed and for when hands of children and adults should be washed.
- (h) In the Preschool room, the children attendance book was not monitored to ensure staff knew how many children were present in the care rooms, as follows:
- there were nine children observed to be present at 10.33am, on review of the attendance book there was eight children marked present.
  - there were eight children observed to be present at 11.10am. On review of the attendance book a child who had gone home at 10.40am had not been marked out.
- This reduced the effective evacuation in the event of an emergency.

- (i) While it is acknowledged that a staff roster was available which detailed the working hours of five staff. It did not accurately demonstrate which staff were present or absent on the day on inspection. For example, of the staff present in the service, two staff members were not recorded on the roster, two staff members who were absent were recorded on the roster as present and assigned to care rooms, two staff members present had no working hours recorded.
- (k) On review of ten accident and incident forms information was missing as follows:
- The surname of the child was missing from four forms.
  - The date of birth of the child was missing from two forms.
  - The date of the parent’s signature was missing from six forms.

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

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

(1)(g) The Healthy eating, Handwashing and Nappy changing policies have all been updated since inspection on the 30 May 2024. The policies were updated since last inspection on the 27 October 2022 which were submitted at that time. Unfortunately, on the day of inspection 20 May 2024 the updated policies were not given to the inspectors. The older policies have been removed and put in a separate file.

(h) Staff have been informed that they must be vigilant in recording these attendance books in future as this is very important to avoid any emergencies.

(i) New daily sign in roster placed in rooms for staff.

(k) The staff have been told of the importance of making sure that they fill these forms out completely as to avoid any confusion as to who the child was and their personal details and also as to the communication between staff

and parents/guardians. Spoke to staff regarding the importance of this and reiterated that this will not be tolerated going forward as they have been informed of this on a previous occasion.

**Supporting documentation submitted**

- (1)(g) Updated policies submitted.
- (h) Evidence of Staff Training meeting held 12 June 2024
- (i) Copy of Staff sign in sheet.
- (k) Evidence of Staff Training meeting held 12 June 2024

**Summary Comment**

Under Regulation 16, the non-compliances identified have been addressed.

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

**Regulation 19 - Health, welfare and development of child**

- (1) A registered provider shall, in providing a pre-school service, ensure that-*
- (a) each child's learning, development and well-being is facilitated within the daily life of the pre-school service through the provision of the appropriate activities, interaction, materials and equipment, having regard to the age and stage of development of the child, and*
- (3) A registered provider shall ensure that no practices that are disrespectful, degrading, exploitive, intimidating, emotionally or physically harmful or neglectful are carried out in respect of a pre-school child whilst attending the service.*

**Compliance Information**

**(1)(a) Basic Needs:**

- All children were provided with forks to eat their main meal of fishfingers, waffles and spaghetti hoops at 12.00pm.
- Between 10.13am and 11.54am, all children in the service were observed to be in the outdoor area for outdoor play.

**Supporting relationships:**

- Staff were observed to be engaged with the children and their play. They were responsive to the children and were observed to give them choices regarding their play activities.
- Staff members supported each other in the provision of care to the children.

### Physical Environment and Materials:

- In the Baby room, the six books in good condition were accessible to the children.
- The Toddler and Preschool rooms were laid out with a range of materials and toys that were suitable to the age and stage of development of the children. Equipment was accessible and children were able to explore and develop their play opportunities.
- The outdoor play area was available for the children, the surface was covered with a soft artificial surface. The equipment and materials present for outdoor play were as follows: Large outdoor puzzle, activity table with play sand and supporting equipment, box of animals, cars and trucks, activity centre, push along toys, sit on toys, buggies for dolls, ride in car, bowling skittles and balls, floor jigsaws, balance beams, providing learning opportunities for the children.

### Non-Compliance Information

#### (1)(a)

#### Basic Needs:

1. Three children in the Baby room were given popup /straw bottles to drink from after their dinner, Children over one should be offered drinks from cups as this is developmentally appropriate for this age group. This was a non-compliance on inspection 27 October 2022.

#### Physical Environment and Materials:

2. In the Baby room and in the outdoor area, battery toys were not working for example two battery operated pianos, reducing the learning development of the toys for the children.
3. In the Baby room, materials and equipment were not displayed and available to the children to enable them to explore and investigate their care room. For example.
  - Nine boxes of equipment with no labelling, were too heavy and stored at a high level, for children to access independently.
  - Supporting equipment for the play kitchen was stored out of reach on the top of a shelf unit, not accessible to the children.
  - Supporting Equipment for activity cars and playhouses was missing.
  - Equipment stored in baskets had no identifiable labelling.
  - Family wall was not visible to the children in the care room as it was up high on the wall.
  - After mealtimes, the low-level chairs were stacked and therefore were inaccessible to the children during free play, limiting the tabletop play opportunities.

(3)

1. The registered provider did not ensure that practices that are disrespectful, degrading, exploitive, intimidating, emotionally or physically harmful or neglectful were not carried out in respect of a preschool child whilst attending the service. Staff were asked how they would manage unwanted or challenging behaviour, on discussion with staff they identified to the inspector the following behaviour management practices that would include pulling a child's chair away from a table, to isolate them for 30 seconds, asking the child to consider their actions. If the behaviour escalated, they discussed that a child would be removed and brought to the cosy area, the ball pool or outside to the outdoor play area for a walk.

At 11.57am, following an incident between two children, the inspector observed a staff member tell a child to sit on a chair to consider their actions and to apologise to the other child. The child was observed to cry and become upset. Once they had apologised to the other child they were allowed to rejoin the other children. The practise of using 'time out' is an unsuitable Behaviour management technique, considered a prohibited practice under the Quality Regulatory Framework, as a child can feel isolated.

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

#### Corrective and Preventive Action

(1)(a)

#### **Basic Needs:**

1. Cups have been given to the children attending the baby room. This is an ongoing process as some of the children refuse to use them. The service will continue to offer the cups and encourage the babies to use them.

#### **Physical Environment and Materials:**

2. All toys that require batteries have been replaced and are in working condition. All toys requiring batteries will be checked regularly and staff will inform management when new ones are required.
3.
  - All boxes have been labelled showing what toys are inside. Staff will monitor to make sure no labels are removed or fall off.
  - All kitchen equipment has been moved to level that is more accessible to the children.
  - Family wall with pictures has been moved to eye level.

- Chairs on the day were stacked for cleaning after mealtime as the children were returning to the outdoor area as when indoors they are freely accessible to the children.

**(3)**

The child in question that was upset from an altercation with another child and the staff member was asking them to apologise to the child as the unwanted behaviour observed is not something the service like to see happen. On asking the child to apologise, they became very upset and the staff member tried to ask the child to sit with the other child and apologise. They refused to join the others and stood beside them until they were ready to join back in. The service has collectively revisited the behavioural management training. The service has spoken to staff about the day in question and realise that they could have used another technique but they do not use time out as a rule. A staff meeting was held with staff 12 June 2024 and the behavioural management policy and further training was completed, covering issues raised during inspection.

### **Supporting documentation submitted**

**(1)(a)**

- 1 and 2. No evidence submitted
3. Photographic Evidence submitted

**(3)**

Evidence of Staff Training meeting held 12 June 2024

### **Summary Comment**

The non compliances outlined under regulation 19 have been addressed and practices implemented will be reviewed on the next inspection.

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

#### Regulation 22 – Food and drink

*A registered provider shall ensure that adequate and suitable, nutritious and varied food and drink is available for each pre-school child attending the pre-school service.*

#### Compliance Information

- The service had a two-week menu plan which was on display in the hallway and visible to parents.
- Food provided within the service was prepared in the onsite kitchen.

#### Non-Compliance Information

1. Some of the children attending the service were not given access or provided with drinks at mealtimes and while in the outdoor area. For example:
  - In the Toddler room, the children were not offered a drink at snack time at 10am
  - In Baby room, the children were not offered a drink with their dinner at 12pm
  - During outdoor play, no drinks were available or offered to the children from 10.15am to 11.55am.

Under the Nutrition Standards for Early Learning and Care services 2023, it states clean and safe drinking water should be available and accessible to children at all times.

2. The drink when made available to children was cordial - under the Nutrition Standards for Early Learning and Care services 2023, it states 'some cordials can damage children's teeth and should not be available to children, water or milk should be the only drinks to be offered to children aged 1 to 5 years.'
3. Children attending a part time care service were not offered an appropriate nutritious food at snack time, morning snack consisted of chocolate and hazelnut flavour filled Waffles offered at 10am. It is acknowledged that the cook who prepares the food for the children was not present on the day of inspection.

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

##### Corrective and Preventive Action

1. Drinks are always readily available at all mealtimes and usually given when food is taken as the service like to see the children eat their food first and not fill up on liquids. The service will place the drinks beside the children during mealtimes going forward at all mealtimes. For outdoor play the service will have a drinks station that will be available to all.
2. Cordial has been removed from the menu and only milk and water will be available.

- Chocolate filled waffles have been removed from the menu and menu has been updated removing the said contents. The dinner which consisted of fish fingers, beans and potato waffles has had the potato waffle replaced with mashed potato.

### **Supporting documentation submitted**

- No evidence submitted.
- Copy of two-week menu submitted.
- Copy of two-week menu submitted.

### **Summary Comment**

The non compliances outlined under regulation 22 have 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:**

- On arrival to the service at 9.59am, the inspectors observed the external front door and the internal second door were secure, to prevent a child from exiting or to prevent unauthorised entrance of an adult to the service.
- The back gate in the outdoor play area was secure, while children from all three rooms played outside, to prevent unauthorised entrance of an adult to the service.
- All plug sockets were inaccessible to children with safety socket covers present.
- The kitchen area was inaccessible to the children throughout the inspection.

#### **Infection Control:**

- Thermostatically controlled water, liquid hand soap and paper towels were available for handwashing.
- Nappy changing facilities were available for the children and nappy changing was completed for the children, at set times or when required.

### Non-Compliance Information

#### General Safety:

1. While it acknowledged that the registered provider informed the inspectors that a daily inspection of the outdoor area was completed –at 8am and 9am, no written record or documentation was available to demonstrate that this had been completed. On review of the outdoor area at 11.08am, the following was observed by the inspectors, posing a safety risk.
  - Litter and debris present around the shed and in the flowerbeds to include a soft drink can, food and sweet wrappers.
  - two drains did not have suitable covers. This was a non-compliance on inspection 27 October 2022.
2. In the outdoor area from 10.13am to 11.54am, a trampoline was present and in use and while it is acknowledged that the children were supervised, trampolines are prohibited from being used in early year services.
3. In the sanitary facility, the sanitary equipment used by the children was observed to be damaged and increased the potential risk of injury. For example, the hot water tap of the sink nearest the wall was loose, moving from left to right, at 11.43am, the inspector observed a child playing with the tap. This was a non-compliance on inspection 27 October 2022. The corrective action had not been sustained.
4. In the Toddler room, cleaning agents were accessible to children, leading to a risk of injury.
5. In the Toddler and Preschool room, two mirror tiles on the wall at low level were cracked, leading to a risk of injury.
6. In the Preschool room, trailing flexes from a stereo, a sensory light and a sensory bubble tube were observed to be accessible to children, leading to a risk of injury.

#### Infection Control:

7. Nappy changing was not completed as per the service nappy changing policy and best practise guidelines, for example – the following practises were observed during one nappy change:
  - An apron and gloves were worn by a staff member for the duration of the nappy change and out into the hallway after the procedure was completed.
  - Child did not wash their hands after the procedure.

This was a non-compliance on inspection 27 October 2022.

8. In the sanitary facility, an open bin for disposal of paper towels was accessible to children, leading to a risk of cross contamination. For example, at 11.44am, the inspector observed a child take dirty paper towels out of the open bin and hold them while waiting to have their nappy changed.
9. Surfaces were observed to be damaged and therefore not washable or wipeable for effective cleaning, leading to poor infection control, for example,
  - In the Preschool room,
    - Two wooden toasters on the play kitchen were damaged.
    - The top of the shelf unit was chipped with wood missing a screw exposed.
  - In the Baby room,
    - the skirting board near the rest area was damaged.

### Action submitted by the Registered Provider

#### Corrective & Preventive Action

##### General Safety:

1. Risk assessment folder has been drawn up and is signed every day on completion of inspection of the outdoor area. The shed has been blocked on each side by a retractable fencing to stop litter blowing in and also to allow access for cleaning. The two drain covers have been replaced with a more suitable covering.
2. Trampoline has been removed from service.
3. Hot water tap has been fixed by professional company.
4. All cleaning agents for rooms have been stored in baskets away from sight and out of reach of children.
5. Damaged mirrors have been removed and replaced.
6. Any trailing flexes have been secured behind trunking attached to the wall where they are in no danger of pulling or tripping.

##### Infection Control:

7. Staff member has been informed of their mistake on the day and has been told to follow the nappy policy guidelines that they were given
8. Bin has been replaced with a pedal bin to allow sanitary procedure.
9. Wooden toasters in kitchen area have been disposed of and the chipped top shelf unit has been repaired. The damaged skirting has been replaced.

## Supporting documentation submitted

### General Safety:

1. Copy of Risk assessment submitted and Photographic Evidence of works completed.
2. Photographic Evidence submitted to demonstrate removal of Trampoline.
3. Email from Plumber confirming work completed.
4. Photographic Evidence submitted.
5. Photographic Evidence submitted.
6. Photographic Evidence submitted.

### Infection Control:

7. Evidence of Staff Training meeting held 12 June 2024 submitted
8. Photographic Evidence submitted.
9. Photographic Evidence submitted.

## Summary Comment

Under Regulation 23, the non-compliances outlined have been addressed.

## Part VIII - Notifications and Complaints

### Regulation 32 – Complaints

- (1) A registered provider shall ensure that the complaints policy of the service specifies-*
- (a) the procedure to be followed by a person for the purposes of making a complaint in relation to the service,*
  - (b) the manner in which such a complaint shall be dealt with, and*
  - (c) the procedures for keeping a person who makes such a complaint informed of the manner in which it is being dealt with.*
- (2) A registered provider shall ensure that-*
- (a) a record in writing is kept of a complaint made to the provider in respect of the pre-school service, and*
  - (b) the complaint is duly dealt with in accordance with the provider's complaints policy.*
- (3) A record in writing referred to in paragraph (2)(a) shall-*
- (a) include the nature of the complaint and the manner in which the complaint was dealt with, and*
  - (b) be open to inspection on the premises by an authorised person.*
- (4) A registered provider shall ensure that a record in writing referred to in paragraph (2)(a) is retained for a period of 2 years from the date on which the complaint has been dealt with.*

## Compliance Information

(1)(a)(b)(c)

It is acknowledged that the service had a complaints policy with the required statements and procedures documented.

## Non-Compliance Information

(2)(a) The service had no record in writing of complaints made in respect of the service.

(b) The service had no documentary evidence to demonstrate that any complaints received were dealt with according to the service complaints policy.

(3) (a)(b) A record in writing of the nature of the complaint and the manner in which it was dealt with was not available or open to inspection on the premises by an authorised person.

(4) No record of complaints was made available.

## Corrective & Preventive Action submitted by the Registered Provider

### Corrective and Preventive Action

(2)(a)(b) Complaints record in incorrect folder on the day of Inspection. Complaints folder now in proper place.

(3)(a)(b) Not available on the day of inspection as in the incorrect folder, folder updated.

### Supporting documentation submitted

(2)(a)(b) Photographic Evidence submitted.

(3)(a)(b) Photographic Evidence submitted.

(4) Photographic Evidence submitted.

## Summary Comment

Under regulation 32, the non-compliances outlined above have been addressed.