

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015DY045
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Name of Service:	Community After Schools Project (SM)
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Address of Service:	Community After Schools Project, 91-92 Sean McDermott Street, 1 Portland Square, Dublin 1, Co. Dublin
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Name of Registered Provider:	Tom O'Brien
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Service type:	Part Time, Sessional
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Date of Inspection:	10/04/2024
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No of pre-school children:	AM	8	PM	11
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Address of the Early Years Inspectorate:	Early Years Inspectorate 2nd Floor, Unit 4/5 The Nexus Building Blanchardstown Corporate Park Ballycoolin Dublin 15 D15 CF9K
Inspection undertaken by:	C. Harte and T. Nelson
Title:	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.
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Description of service

The Community After Schools Project is a community service based in Dublin city centre on the ground floor of a retail premises. The service provides care and education for children aged between 0-6 years of age. The service operates Monday to Friday between 9:15am and 1:15pm catering to a maximum of 15 children. There is one large care room with an internal smaller care space sectioned with a partial divider. The children have access to the whole space and move between the areas depending on the activities offered. The service also operates a registered school aged childcare service Monday- Friday 1:30pm-5:30pm.

Staffing

The registered provider does not work directly in the service but meets weekly with the person in charge and was available by phone on the day of the inspection. On the day of the inspection the person in charge and six additional staff worked directly with the children.

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 and safety. The inspection may also focus on other areas as required.

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 on the day of the inspection in relation to an observed risk under Regulation 23. A response which addressed the non-compliance was received from the registered provider on 12th of April 2024. Please see body of report for details.

Acknowledgments

The inspectors wish to acknowledge the cooperation of the person in charge, staff and children who were present on the day of the inspection.

Part III – Management and Staff

Regulation 9 – Management and recruitment

(1) A registered provider shall ensure that-

- (a) the service has a designated person in charge and a named person who is able to deputise as required,*
- (b) at all times during the period when the pre-school service is being carried on, the designated person in charge or the named person referred to in subparagraph (a) is on the premises, and*
- (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.*

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

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

Compliance Information

(1)(a)(b) The registered provider ensured that there was a designated person in charge and a person to deputise in their absence. A review of the roster and conversation with staff showed that the person in charge or a named deputy were present on the premises during the opening hours of the service. The person in charge was present on the premises when inspectors arrived in the service.

(c) A clear management structure was in place in the service and staff were clear on their role and responsibilities.

A conversation with the person in charge and review of available documents demonstrated that two new staff have joined the service since the last inspection in January 2023. The files of two new staff were reviewed.

- (2)
- (a) Three written and verified references were available from a past employer.
- (b) One written and verified reference was available from a source other than a past employer.
- (c) Garda vetting disclosures had been obtained for new staff. The service also demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years.

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

Non-Compliance Information

(3) A review of available documents demonstrated that the procedure specified in paragraph (2)(b) consideration of references and (2)(c) consideration of garda vetting disclosure were not carried out prior to the employment of 1 staff member.

Corrective & Preventive Action submitted by the Registered Provider

Corrective Action

The reference and validation are now available. Management will ensure to follow the Garda vetting procedure and obtain Garda vetting for each employee before starting their employment.

Preventive Action

Prior to employment all pre-employment checks will be completed, and audits carried out to ensure compliance.

Supporting documentation submitted

Photographic evidence.

Summary Comment

The inspector has reviewed the actions taken and evidence submitted. The non-compliance identified under Regulation 9 has been addressed.

Part III – Management and Staff

Regulation 11 - Staffing levels

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

(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) On the day of the inspection the registered provider ensured there was an adequate number of adults working directly with the children attending the service. The manager was available in a supernumerary position and available to cover as needed.
- (2) The adult to child ratios were correct when the inspectors arrived unannounced to the service and throughout the inspection.
- At 9:48am six staff were caring for eight children aged between 2-3 years.
 - At 11:22am six staff were caring for eleven children aged between 2-3 years.

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

Compliance Information

(1)(a)

Basic Needs:

- Mealtimes were relaxed and allowed children sufficient time to enjoy their food facilitating a social occasion for children to engage with peers and staff.
- Children were supported to use the toilet.

Physical and Material environment:

- Children had freedom of movement through the play spaces.
- There was evidence of short-term planning displayed on the walls which was reflected in the children's artwork on display. Displaying the children's artwork helps to create a sense of belonging and build self-confidence.

Supporting relationships around children:

- Staff advised that they have weekly team meetings with the person in charge to discuss the service and supporting the children in attendance.
- Staff were observed to support a child settling in the service using gentle tones and reassuring language.
- Staff used a variety of strategies to engage with the children during play and mealtimes including questioning, commentary and labelling to support language development.
- Staff explained that with the parents' permission they share photos of the children taking part in activities this offers an insight to the child's day and supports relationships between the home environment and service.
- Staff used songs to support transitions during the day for example when going to the bathroom. Supporting the children through smooth transitions and routine helps develop a sense of predictability and security.

Non-Compliance Information

1(a)

Basic Needs:

1. A child observed to require additional support did not have a care plan or documentary evidence of their strengths, challenges, or goals. A clear and detailed care plan would help inform and support staff to reduce risk to the child's safety.

Physical and material environment:

2. In the smaller care space separated with a partial divider the layout of resources was not accessible and inviting. This discouraged exploration, organisation, and extended play experiences for the children. The following was observed:
 - Resources were stacked and placed on deep shelving units with additional items placed in front creating a barrier for children to access the toys.
 - Toys were grouped at random in boxes without themes.
 - A large storage box filled with resources was heavy and difficult for children to remove from the shelf preventing access to the materials inside.
 - Shelving at the children's level contained toys without supporting resources. For example, two shape sorters without accompanying pieces.
 - The toys stored inside boxes labelled with writing did not match their description.
3. Appropriately sized furniture was not available to suit the requirements of all children for example nine children were observed sitting at tables unable to reach the floor. One child was observed sliding on their seat back and forth and then to try repositioning themselves using the table during a mealtime to be in a more comfortable position.
4. In the larger care space, a storage box used to hold books did not display the books promoting them for use to the children and limited children's engagement in early literacy resources.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

1. **Corrective action:** An individual education plan is in progress for the child. All children will have daily record books which will be shared with the parents.
Preventive actions: An individual education plan will be developed for any children who require additional support.
2. **Corrective action:** The heavy storage box has been removed and children can access musical instruments from a basket placed on the floor. A plan is in place to replace deep shelving and label materials with photos by September 2024.
Preventive action: Management will ensure that all equipment will be appropriate for all children attending the service.

3. **Corrective action:** All furniture will be changed in the creche, so it is appropriate for use by all children attending by September 2024.

Preventive action: Management will ensure that all equipment will be appropriate for all children attending the service.

4. **Corrective action:** New bookshelves are in place beside the cosy area displaying the books and inviting children to engage.

Preventive action: Management will ensure that all equipment will be appropriate for all children attending the service.

Supporting documentation submitted

Care plan template.

Individual education plan template.

Learning journal.

Daily record page.

Photographic evidence.

Summary Comment

The inspector has reviewed the actions taken and evidence submitted. The non-compliances 1 and 4 identified under Regulation 19 have been addressed. The non-compliances 2 and 3 identified under Regulation 19 remain outstanding till actions taken are completed by September 2024.

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 kitchen area was inaccessible to children.
- High shelving was securely mounted to the walls.
- Cleaning sprays were observed out of reach of children.
- Cables and flexes were observed in good condition and out of reach of children.

Infection Control:

- Perishable items were observed to be refrigerated.
- Warm running water and liquid soap were available in the sanitary area to support hand hygiene.
- Tables were cleaned before mealtimes.
- A child's soother was stored in an individual lidded container.

Fire Safety:

- Emergency exits were observed unobstructed.

Non-Compliance Information

General Safety:

1. On arrival to the service at 9:38am the main door was unlocked, and the inspectors were able to enter unrestricted. An inspector spoke with a staff member who advised generally practice is to lock the entrance. The door was checked again at 9:43am and remained unlocked. The main door opens directly into the care room which has a child safety gate in place. The door is accessed directly from the street which posed a potential risk of unauthorised persons gaining access to the service without restriction. An immediate action notice was issued on the day of inspection.
2. A wire was exposed at the bottom of a children's pop-up tent. This posed a risk of injury.

Infection Control:

3. Toys were observed to be stored in a sanitary area. This posed an infection control risk.

Administration of Medication:

4. There was no care plan available for a child with emergency medication. Discussion with staff members confirmed they were not familiar with the administration procedures. This is not in line with the service policy that states that a written care and administration plan will be obtained on enrolment and staff will receive training on the proper use of equipment such as inhalers and auto injectors.
5. Staff advised that a child taking medication on the day of inspection regularly requires the medication while attending the service. There was no record of any medication administration for the child. This is not in line with the service policy that states medication will never be administered without written permission from parents or guardians.
6. Medication that was administered to a child was not labelled with the child's name and stored in an original container. This is not in line with the service policy that states medication must be labelled with the child's name and in the original container.

Fire Safety:

- Attendance records were not maintained in a timely manner. This posed the risk of incorrect information being provided to the fire services in the event of an emergency. At 11:22am eleven children were present on the premises but only nine children were signed in.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

- A door monitoring procedure has been put in place.
- The broken tent has been removed and replaced with a new one. Management and staff will ensure that all broken equipment is removed and will carry out a daily risk assessment.

Infection Control:

- Toys have been removed from the sanitary area. No toys will be stored in the sanitary area.

Administration of Medication:

- A care plan is now in place for the child with emergency medication. Care plans will be in place for children with emergency medication before they start attending the service.
- 5 & 6. An agreement was made with the child's family that the medication would be administered at home.

Fire Safety:

- Management will review the register to ensure attendance is recorded accurately in a timely manner.

Supporting documentation submitted

General Safety:

Photographic evidence.

Infection Control:

Photographic evidence.

Administration of Medication:

Photographic evidence.

Fire Safety:

Photographic evidence.

Summary Comment

The inspector has reviewed the actions taken and evidence submitted. The non-compliances identified under Regulation 23 have been addressed.

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) The registered provider ensured that a record of fire drills was maintained in the service. The record showed that fire drills were conducted monthly and the last one recorded was on the 6th of March 2024.
- (b) A record of the number, type and maintenance record of firefighting equipment and smoke alarms was available for review in the service. The record showed that the firefighting equipment was last serviced on 8th of August 2023 while the smoke alarms were last serviced on 21st of March 2023.

Non-Compliance Information

- (4) There was no display of the fire evacuation procedures in the service.

Corrective & Preventive Action submitted by the Registered Provider

Corrective Action

Evacuation plans are now placed throughout the service.

Preventive Action

Management have ensured that clear evacuation plans are up, that all staff and children are aware of the evacuation route and will do regular fire drills to ensure this.

Supporting documentation submitted

Photographic evidence.

Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 26 has been addressed.

Part VI - Safety

Regulation 28 - Insurance

A registered provider shall ensure that the pre-school service is adequately insured.

Compliance Information

The registered provider ensured the service was adequately insured for the number of children in attendance.