

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015DY065
Name of Service:	Early Journeys
Address of Service:	78 The Park, Beaumont Woods, Dublin 9, Co. Dublin
Eircode:	D09 NX51
Name of Registered Provider:	Rita Keszei
Service type:	Full Day, Part Time, Sessional
Date of Inspection: Day 1	25 July 2023
Date of Inspection: Day 2	26 July 2023
Regulatory Compliance Meeting	26 October 2023

No of pre-school children:	AM	48	PM	48
Day 2	AM	50	PM	46

Address of the Early Years Inspectorate:	Early Years Inspectorate, Child, and Family Agency, Dublin Northeast, 2nd Floor, Unit 4&5 Nexus Building, Block 6A, Blanchardstown Corporate Park, Dublin 15.
Inspection undertaken by:	M Foley and E Hosford
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 service was established in 2011 and is one of two services owned by the registered provider.

The service is located in a two-storey premises in an urban area of Dublin 9. There were four care rooms namely, the Baby room, the Toddler room, and the Preschool room on the ground floor with the Ready-for-School room on the first floor. The outdoor play area is located at the rear of the premises.

The service operates from 7.30am to 6pm offering full day, part-time and sessional childcare to children aged from birth to 6 years. During the school year the service participates in the Early Childhood Care and Education (ECCE) scheme.

Staffing

The service employs 21 staff to include the registered provider, deputy person in charge, a chef and 18 childcare staff employed to work 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 was in response to a Feedback and Concern received by the Inspectorate. 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)(a),(b),(c), (2)(a), (b), (c) and (d), (3), (4) and (7)(a), regulation 10, regulation 11 (1) and (2), regulation 16 (a), (i) and (k), regulation 19 (1)(a) and (b), (2) and (3), regulation 23, regulation 25 (1), regulation 30 (1) and (2), regulation 31 (d) and regulation 32 (1)(a), (b), (c) (d), (2)(a) and (b) and (3) (a) and (b);

A sampling process was used to assess compliance under regulation 9, regulation 10, regulation 16 and regulation 19. As a result, the scope of the inspection included the preschool room and the staff files for the staff members on the staff rosters for 25/7/2023.

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 by receipt of information received to the inspectorate on the 11/07/2023.

On 1st inspection day (25/07/2023), staff files were reviewed and a request for documents not available on the day was given to the person-in-charge to have outstanding documents where possible available for the morning of 26/07/2023.

On 2nd inspection day (26/07/2023), an Immediate Action Notice (IAN) was issued regarding Regulation 9 (2)(c) – Garda Vetting as a garda vetting disclosure was not available for one staff member who was working directly with the children. A response was not submitted within the stated timeframe. A final notice to respond to the IAN was sent to the registered provider on 27/07/2023 and a response was received on 27th and 28th July 2023.

A Regulatory Compliance Meeting was held with the registered provider and deputy person in charge on the 26th of October 2023 to review the outstanding non compliances and supporting evidence required to address the issues identified on inspection on the 25th and 26th of July 2023.

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.

(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.

Compliance Information

(1)(a) The service had a designated named person-in-charge and a named person who is able to deputise on duty when the inspectors arrived.

(b) Staff rosters available indicated that, the person-in-charge, the registered provider or the deputy person-in-charge were on duty during the service opening times.

(c) There was clear management structures in place and staff were aware of their roles and responsibilities.

(2) The files for 21 staff members including the registered provider, the person in charge and the chef were reviewed.

(a) Six staff member had 2 validated written references from a past employer available for inspection.

Eleven staff members had 1 validated written reference from a past employer available for inspection.

(b) Four staff member had 2 validated written references from a source other than a past employer available for inspection.

Nine staff members had 1 validated written reference from a source other than a past employer available for inspection.

(c) Of the 21 files reviewed, 20 had the required garda vetting documents available for inspection.

(d) Fourteen staff members had the required international police vetting documents available for inspection.

(4) Twelve staff members had documentation to show that they held a major award in Early Childhood Care and Education at Level 5 or above on the National Qualifications Framework or a qualification deemed by the Minister to be equivalent.

(7)(a)

Records were available to show that staff were provided with appropriate information, and where necessary training, including in relation to policies, procedures, statements of the service. An employee handbook was available, and a record of an employee handbook acknowledgement sheet signed by staff was available.

Non-Compliance Information

(2) The registered provider did not ensure that each employee, unpaid worker, and contractor was suitable and competent taking into consideration the nature of the needs of children as the following non compliances were identified.

(a)&(b) Two staff had only one validated written reference each available for inspection.

(c) A Garda vetting disclosure was not available for one staff member who was working directly with the children on the first day of inspection. An immediate action notice was issued to the service on the second day of inspection. It is acknowledged that this staff member was not present in the service on the second day of the inspection.

(d) Police vetting was not available for three staff members who had resided outside of the country for more than six months as an adult.

(3) The procedures specified in paragraph (2) were not fully carried out for 10 of the 21 staff whose files were reviewed.

(4) Documentation was not available to demonstrate that eight staff members working directly with the children held a major award in Early Childhood Care and Education at Level 5 or above on the National Qualifications Framework or a qualification deemed by the Minister to be equivalent.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(2)

(a) and (b)

In response to the non-compliances the registered provider has stated that the second written references in respect of previous employer, including a most recent employer which were validated by the designated person in charge of the service was placed on the file. A separate written reference from a reputable source in the absence of a past employer has been submitted and was validated by the person in charge and it was placed on file.

(c)

In response the service has stated that a Garda vetting disclosure has been received in respect of the one staff member identified on inspection who did not have a disclosure and this disclosure has now been placed on file.

(d)

The service has stated that one staff member has left the service. The second staff member, without the international police vetting, has contacted the relevant embassy about vetting many times previously without any success. The third staff contacted the relevant embassy about her police clearance.

(4)

The service has responded that four staff members have left the service. Four staff have been requested to submit a Qualification recognition for work in the early learning care sector in Ireland to DCEDIY.

The service has stated that all staff files were checked, and a staff file content checklist has been put in place to ensure all the necessary documents as required are held on file.

Supporting documentation submitted

(2)

(a) and (b)

Documentary evidence of two validated written references for one staff member.

The service has stated that one staff member has left the service since the inspection.

(c)

Garda vetting disclosure

(d)

One police vetting disclosure.

(4)

Documentary evidence of staff qualifications for one staff member.

Following a Regulatory Compliance Meeting on the 26 October 2023 the following information was submitted to address the non-compliances identified on inspection.

(2)(d)

- Documentary evidence of police vetting for one staff member.
- A copy of an email sent to the relevant embassy regarding obtaining police vetting for two staff members.

(4) Email correspondence for a staff member from the DCEDIY.

Summary Comment

Following the completion of the CAPA process the following remains outstanding.

(2)(d) Police vetting for two staff members.

(4) Evidence of childcare qualifications for two staff members.

Regulation 9 will be reviewed at the next inspection.

Part III – Management and Staff

Regulation 10 - Policies, procedures etc. of pre-school service

A registered provider of a pre-school service shall ensure that the written policies, procedures and statements specified in Schedule 5 are in place for the service.

Compliance Information

The following written policies procedures and statements were reviewed.

- Complaints policy
- Child safeguarding Statement
- Behaviour Management policy
- Supervision policy

Non-Compliance Information

A written copy of the following policies was not available for inspection on Day 1 or Day 2.

- Child Protection policy
- Healthy Eating policy

It is acknowledged that on 27/07/2023 the registered provider submitted a copy of both policies.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The service has stated that the Healthy Eating Policy and Child protection policy were emailed to Tusla early years inspectorate on 27/07/2023. All the policies now have been printed out and are kept in a policy folder in the office.

Supporting documentation submitted

Policies submitted.

Summary Comment

The registered provider has addressed the non-compliances as identified.

Part III – Management and Staff

Regulation 11 - Staffing levels

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

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

Compliance Information

(1) There were an adequate number of adults working directly with the children in the Baby room and the Toddler room.

(2) The minimum ratio of adults to children was maintained in 2 care rooms, the Baby room and Toddler room.

See details in non-compliance below.

Day 1

Room	Age range	Number of children in attendance	Number of adults present
Baby room	10 months to 2 years	11 (0-1 years)	3
Toddler room	20 months to 3 years	11 (1-2 years)	3

Day 2

Room	Age range	Number of children in attendance	Number of adults present
Baby room	10 months to 2 years	12 (0-1 years)	4
Toddler room	2 to 3 years	10 (1-2 years)	2

Non-Compliance Information

(1) & (2)

There were not enough adults working directly with the children and the minimum ratio of adults to children specified was not maintained.

Day 1 In the Ready for School room

Ready-for-School room	Age range	Number of children in attendance	Number of adults present	Number of adults required
Time 10.15am	3-4 years	18	2	3
Time 1.15pm	3-4 years	19	2	3

Day 2 In the Pre-school room

Pre-School room	Age range	Number of children in attendance	Number of adults present	Number of adults required
Time 10.59am	2-3 years	10	1	2

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(1) and (2)

In response the provider has stated that more staff has been hired to meet required ratios and that ratios are displayed on staff roster to maintain required staffing level at all times.

Supporting documentation submitted

(1) and (2)

Staff roster dated 28 September and the 9 October 2023 submitted.

Summary Comment

The information submitted by the service following a request for a second CAPA has addressed the non-compliances as identified.

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:

- (i) details of staff rosters on a daily basis;*
- (k) details of any accident, injury or incident involving a pre-school child attending the service.*

Compliance Information

(1)(i) Staff rosters were available for inspection and corresponded with the names of the adults working at the service on the days of inspection.

Non-Compliance Information

(1)(k)

1. There was no incident record available for inspection relating to an incident that occurred on 11/07/2023.
2. Of the eight accident and incident reports reviewed, the signature of a parent was not completed on 6 of the reports.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(1) (k)

1. In response the service has submitted the attached print out of the report about the incident and signed by the parent.
2. All the accidents and incidents are being reported and signed on our electronic application to communicate with families. Therefore, parents have immediate notification and access to this information.

Supporting documentation submitted

2. Evidence of staff training on the 8 September 2023.

Following a Regulatory Compliance Meeting on the 26th of October 2023 the following information was submitted,

- A record of an incident report sent to Tusla Child Protection and Welfare Department.
- An electronic application record of an incident relating to an incident that occurred in July 2023.

Summary Comment

The corrective and preventive actions taken have been accepted. Regulation 16(1)(k) will be reviewed at the next inspection.

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

(b) appropriate and suitable care practices are in place in the pre-school service, having regard to the number of children attending the service and the nature of their needs.

(2) A registered provider shall ensure that no corporal punishment is inflicted on a pre-school child whilst attending the service.

(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 of the children in the Pre-school room;

- The children were observed to be relaxed and free to move from activity to activity with supervision and support provided when needed.
- The children were free to choose where they sat for their meals. Dinner prepared by the chef was chicken curry with rice and vegetable. It was brought to the room with curry, rice and vegetables in separate serving dishes. Each child was asked what they would like to eat, and their choice was served. Mealtime was relaxed and staff helped, supported, and provided adequate supervision. Additional food was available if requested.
- There were several areas of interest which were supplied with appropriate toys and equipment to facilitate role play and creativity.

Supporting relationships

- Staff engaged with the children providing guidance, helped them solve minor issues and learn about turn taking. Staff listened to the children's requests and were clear and concise in giving instructions and guidance.
- Childrens first names were used when staff were chatting with them and when they were asking the children to prepare for outdoor play.

Outdoor play.

The children from all the care rooms enjoyed outdoor play in the outdoor play area at their scheduled times. Staff were observed to provide supervision, support, and assistance as needed.

(1)(b)

- Appropriate and suitable care practices were in place in the care room. Staff spoke in gentle tone of voice while supporting the children with their activities which were age appropriate and in keeping with the needs of the children. The children enjoyed outdoor play with staff helping them with games and staff were observed to provide adequate supervision while they used the activity centre.

(2) & (3)

- There was no evidence of any disrespectful, degrading, exploitive, intimidating, emotionally or physically harmful or neglectful behaviours seen during the inspection process. The care practices were in keeping with the services Behaviour Management policy which included that no corporal punishment, or any behaviour that could make a child feel isolated or intimidated were seen. Staff were aware of practices prohibited and were aware of strategies to use in the event of a minor or difficult situation arising.
- Staff spoke about the need to include the child in a decision-making process and that the service policy states that any behaviours or situations that may arise should be dealt with in the care room, where possible.

Part VI - Safety

Regulation 23 - Safeguarding health, safety and welfare of child

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

Compliance Information

General Safety:

- The entrance and exit door to the service was safe and secure on the two days of inspection. An intercom system was in place and staff members monitored and managed all visitors to the service.
- The care rooms were maintained, and the furniture, toys and equipment were in good repair.

Infection Control:

- A soother steriliser and individual named soother containers were in use.

Non-Compliance Information

General Safety:

There was an increased risk of an injury to a child due to the following.

1. On Day 2, in the Baby room, a child who was under 1 year old, was observed lying in a bouncer drinking a bottle. The risk of a choking incident was increased due to the position of the child while drinking. The inspector spoke with the staff present, advised the staff member of the risk and the child was removed.
2. The restrictive opening device on the windows in the upstairs care room and on the landing were not connected, the hook was loose from the window. This increased the potential risk of injury to a child.

3. In the Outdoor play area, 3 areas of the grass surface were worn away and had formed 3 holes, these were noted as a non-compliance on the services last inspection and were to be addressed to reduce the risk of trip/falls hazard and the risk of an injury.
4. The concrete surface near the fire exit gate close to the preschool room was uneven and jagged and increased the possibility of a trip or fall hazard. This was also noted on the services last inspection and has not yet been addressed.

Infection Control:

The risk of the spread of infection was increased due to the following issues in the pre-school nappy changing room.

5. The nappy changing area was not adequately ventilated, the window was not open to help ventilate the area during nappy changing. The vent is activated by turning on the light and this was not used.
6. The nappy changing area was inappropriately used to store the following which increased the potential risk of cross infection.
 - Bibs ready for use, clean items for use in the care room should not be stored in sanitary facilities.
 - Floor brushes used to sweep and clean the care room.

Fire Safety:

7. The outside fire exit gate near the preschool room had a coded lock in place and staff did not know the code. They said the person-in-charge knew the code. The evacuation of the premises through this exit gate could be delayed in an emergency due to the type of lock in place and that staff did not know the code. A referral to the fire officer was made to assess the suitability of the lock.
8. There is no fire assembly sign in the area to the back of the premises which was identified as a fire assembly point within the premises. This was noted as a non-compliance in the services last inspection report dated 6/1/23 and has not yet been addressed.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1. In response the provider has stated that all staff have been informed and reminded again not to give bottles to children in a bouncer chair. Please see attached document. Manager in charge is checking regularly about children not being fed in the bouncer chair. Also, all staff team and new staff were informed not to feed children with bottles in the bouncer.

2. The service has stated that staff have been informed not to take windows off from the restrictive opening device. Manager in charge is checking regularly about the windows not being taken off from the latch. Also, all staff team and new staff were informed at the time of induction about not to take the windows off from the restrictive opening device.
3. The three holes have been fixed up again. Please see the attached picture. Manager in charge is checking for holes and uneven surfaces in the garden area in the morning making sure it's safe for children.
4. The side gate has not been in use; therefore, no children, staff or parents are using the alleyway where this concrete surface is located.

Infection Control:

5. All staff were informed to open all the windows in the nappy changing facility in the beginning of the day in order to have adequate ventilation. Manager in charge is checking that all windows in the changing facilities are open at the beginning of the day.
6. All bibs, clean items, floor brushes were removed from the preschool's nappy changing area. All staff were informed not to keep these items there. Manager in charge is checking changing rooms are free from items that are used in the rooms during the day and can cause cross contamination

Fire Safety:

7. The coded padlock was changed now to a lock which does not require a code and it is inaccessible to children. Please see the attached photo.
8. The fire assembly point in the back of the garden is not in use. The service uses one and only fire assembly point which is in the front of the service.

Supporting documentation submitted

General Safety:

1. and 2. Documentary evidence of discussion with staff.
- 3 and 4. Photographic evidence submitted.

Infection Control:

- 5 and 6. Documentary evidence of discussion with staff.
7. Photographic evidence submitted.

Fire Safety:

8. Corrective action.

Summary Comment

The registered provider has addressed the non-compliances as identified.

Part VI - Safety

Regulation 25 - First aid

(1) A registered provider shall ensure that a person trained in first aid for children is, at all times, immediately available to the children attending the pre-school service.

Compliance Information

There were 5 First Aid Responder (FAR) certificates with an expiry date of 24/07/2024 available for inspection. These included the registered provider, the person-in-charge and the named person who can deputise when needed. A person with FAR training is on duty during opening hours as indicated by staff rosters available for inspection and confirmed by the person-in-charge and the deputy person-in-charge.

Part VII - Premises and Space Requirements

Regulation 30 - Minimum space requirements

(1) Subject to paragraphs (2) to (6), a registered provider shall ensure that adequate clear floor space is available in the premises for the work, play and movement of children attending the pre-school service.

(2) A registered provider of a full day care service or a part-time day care service shall ensure that the minimum amount of clear floor space specified in column (3) of Schedule 7 opposite a particular reference number specified in column (1) of that Schedule in respect of the age range of children specified in column (2) thereof at that reference number is available for each child in that age range attending the service.

Non-Compliance Information

(1) & (2)

In the Ready-for-school Room, there was not enough clear floor space available for the number of children attending. The space available can cater for a maximum of 13 children attending a full day service or 17 attending a sessional service and this was outlined to the service following their last inspection on 06/01/2023. On Day 1 and Day 2 of inspection, in the morning, there were 18 children, age range, 3 to 5 years old attending for a full day. On review of attendance records for 11/07/2023, there were 22 children. The registered provider had exceeded the numbers permitted in this care room.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The number of children has started to decrease in the care room in question.

We will limit the number in the care room as it is outlined by the Tusla required floor space to children ratio.

Supporting documentation submitted

No evidence submitted.

Following a Regulatory Compliance Meeting on the 26 October 2023 the following information was submitted to address the non-compliances identified on inspection.

The registered provider has stated that a change of circumstance form has been submitted to Tusla CIC Team as the plan is to turn the cot room to sessional/ full time care room.

Summary Comment

Regulatory compliance remains outstanding as the inspectorate is not assured that the number of children attending the ready to school room does not exceed the minimum clear floor space permitted per child, that is 13 children attending for full day care or 17 on a sessional basis. This will be reviewed on a fit for purpose inspection.

Part VIII - Notifications and Complaints

Regulation 31 - Notification of incidents

A registered provider shall notify the Agency in writing within 3 working days of becoming aware of any of the following incidents occurring in the preschool service:

(d) a serious injury to a pre-school child while attending the service that requires immediate medical treatment by a registered medical practitioner whether in a hospital or otherwise;

Non-Compliance Information

(d) The registered provider did not notify the Agency within 3 working days of an incident that occurred on 16/05/2023 and required medical treatment.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The service provider has looked up the procedure about how to contact TUSLA if a child needs medical service outside of the preschool. When a child needs medical attention from outside we always do our very best to look after the child and her/his family, immediately. Our duty of care also encourages us to make follow up phone calls/texts to the family at late evenings and weekends, which we feel is more imperative in an accident.

In any case, when a child needs medical treatment outside of the preschool service, we will be notifying the Tusla in a written report within three days.

Supporting documentation submitted

Supporting documentation to evidence the service corrective actions submitted.

Summary Comment

The registered provider has addressed the non-compliance as identified.

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.

Compliance Information

- (1) The complaints policy outlined,
- (a) the procedures to be followed by a person for the purposes of making a complaint in relation to the service.
 - (b) the way in which such a complaint shall be dealt with, and
 - (c) the procedures for keeping a person who makes such a complaint informed of how it is being dealt with were outlined.
- (2) (a) A record in writing of a complaint made to the registered provider was available for inspection.

Non-Compliance Information

(2)(b) On Day 1 and Day 2 of inspection, a written copy of evidence to show that the complaint was dealt with in accordance with the services complaints policy was not available.

The following was not available.

- A written copy of the Incident report was not available.
- A copy of the incident report which the person-in-charge said was on the electronic system in use was not available for inspection.
- A record of communication with parents and the complainant was not available.

(3) (a) & (b) A record in writing of how the complaint was dealt with was not available for inspection.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(2)(b) The incident that happened was dealt with immediately with our best intention and ability. A report was sent on day that the complaint was made to the child protection unit. Service provider communication to staff and parents was done on the same day and the supporting document was also emailed to Tusla inspectorate at the time of inspection. Please see attached.

(3) (a) & (b) Service provider, manager in charge and deputy manager, DLP, in service will refresh the procedures of reporting to Tusla regarding child protection issues every half a year

Supporting documentation submitted

(2)(b)

- A record of communication with parents was submitted.
- A copy of a referral to the social work department,

Following a Regulatory Compliance Meeting on the 26 October 2023 the following information was submitted to address the non-compliances identified on inspection.

(2)(b) An electronic application record of an incident relating to an incident that occurred in July 2023.

(3) (a) & (b)

- Documentation between the service and a staff member regarding an incident that occurred.

Summary Comment

The registered provider informed the inspectorate that a staff member had ceased employment. The corrective action taken has been accepted. Regulatory compliance has been met.