

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015DY129
--------------------------	-------------

Name of Service:	Lollipop Lane
-------------------------	---------------

Address of Service:	19 Moyle Road, Dublin Industrial Estate, Dublin 11
----------------------------	--

Eircode:	D11 EV81
-----------------	----------

Name of Registered Provider:	Paul Byrne
-------------------------------------	------------

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

Date of Inspection:	05/06/2024
----------------------------	------------

No of pre-school children:	AM	51	PM	26
-----------------------------------	----	----	----	----

Address of the Early Years Inspectorate:	Early Years Inspectorate, Floor 7 Brunel Building, Heuston South Quarter, St. John's Road West, Kilmainham, Dublin 8
Inspection undertaken by:	E. Finnegan Hayes & C. Harte
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.
---------------------------------	-----------------

Description of service

Lollipop Lane is a privately operated service providing full day care to children aged 1 to 5 years old. The service operates from a two-storey building located within an industrial estate in North Dublin. The service opens from 8:00am to 6:00pm Monday to Friday. The service consists of five care rooms, a cot room, an office, two kitchens, and sanitary facilities. The Baby room, Toddler room and Playschool room are located on the ground floor while Preschool room 1 and Preschool room 2 are located on the first floor. An enclosed outdoor area is available to the rear of the premises.

Staffing

The registered provider employs seventeen staff to work in the service including the person in charge, an administrator, and a cook. Fourteen staff were present on the day of inspection of these twelve were working directly with the children. The registered provider does not work directly with the children in the service.

Methodology

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

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

The findings on inspection are based on:

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

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

A sampling process was used to assess compliance under;

Regulation 16- Records in relation to the preschool service,
Regulation 19- Health, Welfare and Development of the Child,
Regulation 23-Safeguarding the Health, Safety and Welfare of the Child,
Regulation 29 Premises.

As a result, the scope of the inspection included the Baby room, Toddler room, Play school room and Preschool room 2.

Inspection findings are documented in the inspection report which is first issued in draft format to the service with an opportunity to respond to any findings. Where statutory requirements are identified as not being met, the registered provider must demonstrate how they have rectified the non-compliance and will prevent any non-compliance from re occurring. The Corrective Action and Preventive Action plan (CAPA) will be used to inform decisions about compliance with regulatory requirements. Where the registered provider fails to meet the statutory requirements an escalation process may be commenced.

The inspectorate reserves the right to edit responses received for reasons including clarity, completeness and compliance with administrative and legal processes.

The contents of the report are compiled by the inspectorate body.

Additional Information

An immediate action notice was issued to the registered provider on the day following the inspection under Regulation 23 in relation to a non-compliance identified under Regulation 9. A written response was received which mitigated the risk.

Acknowledgments

The inspectors wish to acknowledge the cooperation of the person in charge, deputy 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) The service had a designated person in charge and a named person to deputise when required.
- (b) The roster showed that a designated person in charge is rostered to be on the premises during the opening hours of the service.
- (c) The service had a management structure with clear roles and responsibilities.

(2) A review of the roster and discussion with management showed that there are currently seventeen staff employed in the service; one of whom had commenced employment since the previous inspection in July

2023. The file of the new staff member was reviewed along with Garda vetting disclosures for all staff members and the registered provider. Qualification records for all staff who work directly with the children were also reviewed.

- (a) One written and verified reference was available from a previous employer in relation to one staff member.
- (c) Garda vetting disclosures had been obtained for sixteen staff and the registered provider and the service adhered to the re-vetting timeframes as outlined in the Early Years Inspectorate Regulatory Notice, requiring services to renew Garda vetting every three years.
- (d) There was no evidence to suggest the staff member required Police vetting.

(4) Evidence was available to show that thirteen adults who worked directly with the children held at least a major award in Early childhood Care and Education at Level 5 on the National Qualifications Framework, or a qualification deemed by the Minister to be equivalent.

Non-Compliance Information

- (1) (a)(b) A second written and verified reference was not available for one staff member who had commenced employment since the last inspection.
- (2) (c) Garda vetting had not been obtained for one staff member who was present in the service on the day of inspection but was not working directly with the children. This posed a risk to the safety of the children. An immediate action notice was issued to the provider under Regulation 23 Safeguarding the health, safety and welfare of the child in relation to this non-compliance.
- (3) The registered provider did not ensure that the checks required under (2) were completed prior to the start date of one new staff member who commenced employment since the last inspection.
- (4) Evidence was not available to show that two staff who worked directly with the children held at least a major award in Early Childhood Care and Education at Level 5 on the National Qualifications Framework, or a qualification deemed by the Minister to be equivalent. This was a non-compliance on the previous inspection in 2023.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

- (1) (a)(b) A written and verified reference is now on file. The service will ensure it is always kept in the staff file.
- (2) (c) Garda vetting has been obtained for the staff member. The service have updated the child protection policy regarding vetting for admin staff.
- (3) Corrected and updated though the employee checklist and signed off by two of the persons in charge.
- (4) One staff member has misplaced their certificate and has applied for a replacement copy. The second staff member completed their final module in October 2023 but has not yet received her certificate. In future we will ensure staff have 8 modules in Childcare. Monthly rechecks on staff files and after inspections that files have not been misplaced.

Supporting documentation submitted

Documentation in relation to above has been reviewed.

Summary Comment

The registered provider has addressed the non-compliance under (9)(1), (2) and (3) however the non-compliance under (9)(4) remains outstanding as evidence of the qualification of either staff has not been provided. The registered provider is required to submit the qualification certificates to the inspector once they are received and to maintain these on the staff members personnel files.

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) The registered provider ensured there was adequate staff available to the children at all times during the day for example ten staff members were working directly with 51 children on the morning of inspection. The person in charge and deputy person in charge were available to cover breaks and assist in rooms as needed.
- (2) Ratios were maintained in the care rooms. The following was observed;

- In the Baby room two staff members were caring for 7 children aged 1-1.5 years old.
- In the Toddler room two staff members were caring for 5 children aged 1.5-2 years old.
- In the Playschool room two staff members were caring for 7 children aged 2-3 years old.
- In Preschool room 1 two staff members were caring for 15 children aged 3-4 years old.
- In Preschool room 2 two staff members were caring for 17 children aged 3-5 years old. Two school aged children were also present.

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:

(j) details of any medication administered to a pre-school child attending the service with signed parental consent

Compliance Information

(1) (j) A sample of 22 medication administration records were checked; all of which were found to be completed in full of all necessary details.

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.

Compliance Information

(1)(a)

Basic needs:

- The service has a healthy eating policy; three meals and two snacks were provided at regular intervals. Both dinner and tea consisted of a hot meal provided by external company.
- Water was available and accessible to the children on low level shelving in the care rooms.
- Nappy changing was done on a set schedule and as needed to ensure the children's comfort.
- Children were supported to self-feed with adults on hand to help where required which supported independence.

Physical and Material environment:

- Low level tables and chairs were available for children to engage in tabletop activities and eat meals comfortably.
- Highchairs were used for younger children during mealtimes and children were observed to be removed promptly when they finished eating.
- The outdoor area offered a range of toys and equipment for gross motor play.

Supporting interactions with child:

- Information about the children's day; sleep times, nappy changing, and food were recorded and shared with parents through a software application.
- Staff used low tones when speaking to the children and were observed to engage in activities with the children at their level for example staff in the Baby room sat on the floor to play with the children. This allowed staff to actively engage with the children and support their learning.

- Staff addressed minor conflicts appropriately in a child centred way for example a staff member in the Toddler room intervened in a dispute over a buggy and supported one child to get another buggy to resolve the conflict.

Non-Compliance Information

1. (a)

1. A suitable sleep environment was not provided for two children who were observed to sleep in the Baby and Toddler care rooms for example the Baby room was observed to be bright and noisy, and children were observed playing loudly while the child slept, and the child was observed to startle a number of times in response to loud noises.
2. The individual sleep needs of one child were not observed to be met on the day of inspection which led to the child being visibly upset. At 10:25am a child was observed showing clear signs of tiredness and staff repeatedly acknowledged the child was tired and would sleep soon. Staff advised the child would fall asleep in a bouncer seat and then be transferred to a cot. The child was observed crying, yawning, and rubbing their eyes before falling asleep. The child was observed sleeping in the care room from 10:48am-11:12am before waking, crying, moving to a soft pillow on the floor and lying down. The child continued to cry, yawn, rub their eyes and appear tired until 12pm. Although staff acknowledged the child's sleep cues, they did not respond appropriately to provide an opportunity for restful sleep which the child required.
3. The Playschool room did not provide a stimulating play environment for the children present with limited resources available to the children and toys were not grouped appropriately to support spontaneous play experiences. For example, there was no props or supporting equipment for the chalk board or dolls house while the cars were not located in close proximity to the car table. Jigsaws were stacked on a high shelf out of reach of the children and the box of trains was inaccessible due to the size and weight of the box. Children require a range of toys and equipment with associated props to be visible, accessible, and grouped appropriately to support choice and invoke interest in a variety of play experiences.
4. Children in the Toddler room did not access the outdoor area in accordance with the daily rota on the day of inspection despite the weather being appropriate to do so. Children require access to the outdoor area daily to engage in gross motor activities which may not be appropriate for the indoor environment.

(1) (b)

5. Staff were not observed to clean children's noses in a timely manner for example two children in the Toddler room were observed to have nasal discharge from 10:25am-10:41am when their noses were cleaned following nappy changing. Children of this age require adult support to ensure their noses are cleaned for their comfort and to ensure adequate infection control.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(1) (a)

1. The creche has two sleep rooms however for those who find it challenging to sleep alone, we have changed our rest areas in the classrooms to give as much downtime as is possible in a classroom. Staff working with under 2's have been reminded of the importance of supporting and encouraging the children who find it difficult in transitioning to our sleep rooms. We are also liaising with parents to allow and encourage younger children to sleep in cots.
2. The child mentioned was unwell, only attends mornings and usually naps at home. The Practitioner on the day felt it would upset the child further to put the child in the sleep room alone. Child was sent home sick 90 mins later and the Person In Charge on the day supported the Practitioner during this time. A more restful option in the room has been provided in the care room.
3. Issues have been rectified. Staff meeting with three practitioners on the day in regard to environments. Higher level of supervision and support provided.
4. We will ensure management on the floor support those working alone to accommodate outdoor play. This was discussed at a staff meeting in July.
5. Infection control policy reissued to staff and discussed with staff involved. Person In Charge will provide supervision.

Supporting documentation submitted

Documentation and photos have been reviewed.

Summary Comment

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

Part VI - Safety

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

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

Compliance Information

General Safety:

- The service door was adequately secured which prevented unauthorised person entering the building while a low-level divider which was fitted with a bolt lock provided a small containment area preventing children from accessing the door.
- Cleaning supplies were stored out of reach of the children throughout the service.
- Toys were maintained in good working order and free from hazards.
- Nappy changing units were sturdy and secure for changing children.
- Highchairs were maintained in working order for use during mealtimes in the baby room.
- Thermostatically controlled warm water, liquid hand soap and dispensed handtowels were available throughout the service to facilitate adequate handwashing.
- Handwashing was completed before mealtimes.
- The nappy changing procedure observed was in line with best practice and the service policy.
- Children's beakers were individually labelled.

Safe Sleep:

- Sleeping children were physically checked by staff every 10 minutes and this information was recorded on a software application.
- An ambient temperature of 18-22°C was maintained in rooms where children aged over 1 year were sleeping.

Fire Safety:

- Staff were knowledgeable of the fire evacuation plan including the route to take and the location of the assembly point.

Non-Compliance Information

General Safety:

1. The service did not follow the manufacturers instruction in relation to the use of bouncer seats in both the Baby and Toddler rooms for example three bouncer seats were observed to be used in a reclined

position for children aged over 1 year old who were capable of sitting unaided. The instruction stated that the reclined position should only be used for children who cannot sit unaided. This posed a risk of injury to the children.

2. Radiator covers were not adequately secured to the wall in the Baby room and Preschool room 2 and were observed to move when pulled. This posed a potential risk of injury to the children.
3. A handbag belonging to a staff member was accessible on a shelf in the Toddler room posing a potential risk of injury.
4. Sections of the flooring in the garden were observed to be lifting and posed a trip hazard to the children.
5. Wood panels beside the gate at the end of the garden were broken and posed a risk of injury to the children for example the wood was broken and splintered, and nails were exposed where the wood had lifted.

Infection Control:

6. Paper handtowels were not hygienically dispensed in the Playschool room posing a risk of cross contamination.
7. The bin used for disposal of nappies was not pedal operated and posed an infection control risk due to repeated touching. It is acknowledged that the service had a pedal operated bin which was broken, and correspondence was reviewed which showed the service were awaiting a replacement from the manufacturer in the coming months.
8. A sofa in the Playschool room was torn which did not allow for easy cleaning and posed an infection control risk.
9. A pillow in the Playschool room did not have a cover and posed an infection control risk.
10. Foam climbing blocks which were in the outdoor area were torn which prevented adequate cleaning and posed an infection control risk.

Administration of Medication:

11. Health care plans which detailed the signs and symptoms and procedure to be followed in the event of an emergency were not available for two children who required emergency medication which may impede the child receiving adequate care in the event of an emergency.
12. A bottle of medication which was out of date was observed to be stored in one care room and posed the risk of it being administered to a child. It is acknowledged that the medication was labelled as out of date and that the service policy does not set out the procedure to dispose of out-of-date medication.

Safe Sleep:

13. The registered provider did not ensure the use of suitable sleep equipment for two children aged between 14-20 months old who were observed to sleep in a bouncer seats which posed a potential risk to the children. Bouncer seats are prohibited for use for sleeping children.
14. The registered provider did not ensure the service safe sleep policy checklist was implemented to ensure the safety of the children. A child aged 19 months was observed to be put into a cot to sleep with a bottle. Although the staff member was present, this practice is not in line with the service policy and posed a risk of choking to the child.

Fire Safety:

15. A designated emergency exit door in the Baby room was obstructed and could not be opened on the morning of the inspection as a shutter on the outside had not been raised fully. This posed a potential risk to the children in a fire emergency. It is acknowledged that an additional fire route was accessible on the day of inspection however all emergency exit doors should be maintained free of obstruction at all times.
16. The attendance of two school aged children who were present during the inspection was not recorded on the service attendance records which posed a risk to the children in the event of a fire emergency. A record of the presence of all persons present in the building is required to ensure safe evacuation in the event of a fire emergency.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1. Removed all bouncers. Lollipop lane no longer use bouncers effective 1st July.
2. The radiator covers have been fixed and the service have employed a reliable handyman so matters can be attended to promptly.
3. Staff were reminded of the importance of storing handbags up high out of reach. Hooks are available on back of doors in under 2s care rooms and high shelves in over 2s care rooms. Person in charge will supervise this issue.
4. This has been added to the maintenance list for the handyman and will be completed by 16th Aug. Areas flattened down to stop tripping hazard.
5. This has been added to the maintenance list for the handyman and will be completed by 16th Aug. The area has been barricaded off. New handyman will be available to fix issues as they arise.

Infection Control:

6. Paper handtowels are now in the dispenser. Infection control policy has been issued to staff highlighting this.
7. Bin has been replaced. Have an extra bin as a replacement if needed.
8. The sofa has been sent for repair.
9. Pillows without covers discussed at staff meeting. PIC will supervise this issue.
10. Torn foam blocks discarded. Garden maintenance plan weekly checked by PIC.

Administration of Medication:

11. Health care plans have been obtained for both children. PIC will ensure they are available at all times in the relevant classrooms.
12. Out of date medication has been disposed of. We have updated our safety plan.

Safe Sleep:

13. Bouncers discarded and are no longer in use.
14. Staff meeting with staff member and reissued safe sleeping plan.

Fire Safety:

15. The importance of shutters being fully opened was discussed at a staff meeting with PIC. Outside / garden policy was re-issued to staff.
16. Discussed at staff meeting that visiting children are put on the class rolls and the importance of it. Update Fire policy and reissue.

Supporting documentation submitted

Documentation in relation to above has been reviewed.

Summary Comment

The registered provider has addressed the non-compliance under Regulation 23. In relation to point 16 the registered provider has been made aware they will need to register the service as a school age service in order to have school age children in attendance at any time.

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.

(2) A registered provider shall ensure that a suitably equipped first aid box for children-

(a) is safely stored in an easily accessible and conspicuous position on the premises, and

(b) is available to the children attending the pre-school service at all times.

Compliance Information

(2)(a)(b) The registered provider ensured that a suitably equipped first aid box was available on the premises, safely stored and accessible to staff when needed. The first aid box was stored in a cupboard in the hallway, a notice on the door clearly showed the location.

Non-Compliance Information

(1) The registered provider did not ensure that a staff member trained in First Aid Response (FAR) was immediately available to the children at all times during the service opening hours. A review of the FAR certificates of three staff members and the roster showed that a staff member trained in FAR was not available to the children from 4:45pm-6pm on the day of inspection. This posed a potential risk to the children.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

Ensuring FAR cover 50 hours per week. Opening it out for a fourth staff member to train in FAR.

Supporting documentation submitted

Staff roster

Summary Comment

The registered provider has addressed the non-compliance under Regulation 25.

Part VII - Premises and Space Requirements

Regulation 29 - Premises

A registered provider shall ensure that the premises of the service are-

- (a) of sound and stable structure,*
- (b) safe and secure,*
- (c) kept adequately lit, heated and ventilated*
- (d) cleaned, maintained and repaired, as required, and*
- (e) equipped with adequate and suitable sanitary facilities.*

Compliance Information

- (a)
 - There were no visual defects observed or highlighted through conversation with the registered provider or staff.
- (b)
 - The door was secured, and staff were observed to attend the door to allow access to visitors.
 - The outdoor area was secure preventing unauthorised persons accessing the garden area.
- (c)
 - Windows were opened in care rooms to allow fresh air to circulate.
 - Windows provided natural light in all care rooms. This was supplemented as required by artificial light.
 - Light in the cot room was controlled using the blinds to ensure low lighting which was conducive to sleep.
- (e)
 - The service was equipped with an adequate number of toilets, nappy changing units and sinks for the number of children attending on the day of inspection

Non-Compliance Information

- (d)
 1. A build-up of dirt was evident on the vent in the nappy changing area and Preschool 2 care room which may hinder it effectiveness.
 2. The upstairs sanitary area needed maintenance; a number of areas were observed to require repair for example;

- A number of gaps were present in the lino in the toilet cubicles which did not ensure a smooth easy to clean surface and a build-up of dirt and debris was observed posing an infection control risk.
 - Pipework was not adequately enclosed, and dirt and debris were observed behind the pipes accessible to the children.
 - A build-up of dirt was evident on the vent which may hinder its effectiveness.
 - A spotlight fixture was not adequately secured and was observed hanging down from the ceiling.
 - The sealant at the base of one sink pedestal was observed to have a build-up of dirt and could not be adequately cleaned posing an infection control risk.
 - Wooden boxing behind the toilet opposite the entryway was not secured appropriately. The top board was lifting, and screws were observed sticking out.
3. The carpet was not non-slip and was observed to be coming away from the stair. This posed a risk of injury from slip or trips.
 4. Edging used to secure the floor in the hallway was observed to be worn with porous wood exposed which prevented adequate cleaning.
 5. Shatterproof covers were not observed to be fitted on two lights in Preschool room 2 which posed a risk of injury to the children.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

- (d)
1. Vents cleaned. Regular maintenance worker under PIC and owner.
 2. All cleaning surfaces listed, cleaned. Lino is scheduled to be replaced by will be replaced by 23rd Aug.
 3. Carpet secured and will be replaced by Aug 23rd. Regular Maintenance worker, under PIC and owner.
 4. Will be replaced by Aug 23rd. Regular Maintenance worker, under PIC and owner.
 5. Listed with maintenance worker as urgent. Will be completed by 31st July. Regular Maintenance worker, under PIC and owner.

Supporting documentation submitted

Photographs have been reviewed in relation to; point 1, point 2 in relation to cleaning and point 3 in relation to the carpet being secured.

Summary Comment

The registered provider has addressed the non-compliance under point 1 and partially addressed points 2 and 3. Regulatory compliance remains outstanding in relation to the point 2, 3, 4, 5 as the actions provided to correct the non-compliances have not yet been completed but it is acknowledged that the service has a plan in place to rectify the issues identified.