

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier: TU2015DY131

Name of Service: LYCS Early Years Education Service

Address of Service: Rory O Connor House, Hardwicke Street, Dublin 1

Eircode: D01 HK25

Name of Registered Provider: Sarah Kelleher

Service type: Full Day, Part Time, Sessional

Date of Inspection: 24/04/2025

No of pre-school children:	AM	29	PM	15
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Address of the Early Years Inspectorate:	Early Years Inspectorate 2 nd Floor, Unit 4/5 The Nexus Building Blanchardstown Corporate Park Ballycoolin Dublin 15 D15 CF9K
Inspection undertaken by:	C. Harte
Title:	Early Years Inspector

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

LYCS Early Years Education Service is a community run service located in the inner city in North Dublin. The service opens from 8:45am-5pm daily providing full-time, part-time, and sessional care and education to children aged 0-6 years and participates in the Early Childhood Care and Education (ECCE) scheme. The service consists of five care rooms; Baby room, Toddler room, Tweeny room, pre-ECCE room and ECCE room, an additional room on the first floor is used for gross motor activities, a staff room, office kitchen and sanitary facilities. An enclosed outdoor area is located to the side of the building.

Staffing

The registered provider employs 19 staff to work in the service including the person in charge, deputy person in charge, 15 early years practitioners, a receptionist and a cleaner. The registered provider does not work directly in the service and did not attend the service the day of the inspection but joined the inspection feedback meeting held the following day.

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.

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

- Regulation 19(1)(a) Health, Welfare and Development of child
- Regulation 16(1)(h)(j)(k) Records in relation to Preschool Service.
- Regulation 23 Safeguarding the Health, Safety and Welfare of the Child

As a result, the scope of the inspection included the Tweeny room and Toddler 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.

Acknowledgments

The inspector wishes to acknowledge the cooperation of the registered provider, 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.

(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 if required.
 - (b) A review of the staff roster and discussion with management demonstrated that a designated person in charge was rostered to be on the premises the week of the inspection for the duration of the opening hours of the service. The person in charge was present in the service when the inspector arrived.
 - (c) The service had a management structure in place with clear roles and responsibilities.
- (2) A review of paperwork and discussion with management showed that there are currently 19 staff employed by the registered provider to work in the service. The files of 5 staff who had commenced employment since the last inspection were reviewed as part of the inspection process. A review of records maintained by Tusla

demonstrated that garda vetting disclosures for 5 existing staff members had expired since the last inspection, these were also reviewed.

The registered provider has completed the following checks:

- (a) Nine written and validated references were available from past employers.
 - (b) One written and validated references were available from a source other than a past employer.
 - (c) Garda vetting disclosures had been obtained for 10 staff members. 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 available for 4 adults who had lived in a country other than Ireland for a period of six months or more as an adult.
- (4) Evidence was available to show that five staff members 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.

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 29 preschool children being cared for by 10 adults on the morning of the inspection. The person in charge and deputy person in charge was available to cover breaks and assist in care rooms as required.
- (2) The adult child ratios were correct when the inspector arrived unannounced to the service and throughout the inspection.

Part IV – Information and Records

Regulation 16 – Record in relation to pre-school service

(1) A registered provider shall ensure that a record in writing is kept of the following information in relation to the service:

- (h) details of attendance by each pre-school child on a daily basis;
- (i) details of staff rosters on a daily basis;
- (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

- (1)
- (h) Attendance records detailing the arrival and departure of the children on a daily basis were maintained.
 - (i) A service roster was available that was reflective of the staff present on the day of the inspection.

Non-Compliance Information

- (j) The registered provider did not ensure a full record in writing was maintained for medication administration. A sample of 12 records were reviewed and 6 were observed incomplete.
- One record did not include the signature of the staff member who witnessed the administration of the medication.
 - One record did not include the child's full details who received the medication, or the signature of the staff member administered the medication.
 - One record did not include the child's full details who received the medication or the parents signature confirming they had been informed of the administration.
 - Two records did not include the child's full details who received the medication.
 - One record did not include the child's full details, parent signature or staff members signature who witnessed the administration
- (k) The registered provider did not ensure a full record in writing for was maintained accidents and incidents. A sample of 12 records were reviewed and 7 were observed incomplete.
- Three records did not include a parent's signature confirming they had been informed of the incident.
 - Three records did not include a parent's signature or the mangers signature.
 - One record did not include the full details of the child involved in the incident.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

- (j) The team continues to ensure that the medication administration forms are completed correctly and signed by management and relevant persons at all times. Training was carried out in a staff meeting addressing the importance of medication administration reporting.
- (k) The reports have been reviewed and completed appropriately by the management team. Training was carried out in a staff meeting addressing the importance of accident/incident reporting.

Supporting documentation submitted

- Staff meeting minutes.

Summary Comment

The corrective and preventative actions provided by the registered provider are sufficient to address the non-compliance under Regulation 16.

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) The following practices were observed in place to support the children attending:

- Management advised the service uses an external company for the main meal and that all food served is supplied by the service. A weekly menu was clearly displayed within the service and was reflective of the meal served the day of the inspection.
- Mealtimes were observed to be social occasion as children sat with their peers and were joined by staff. The main meal on the day of inspection was Penne Napoli. Additional portions were brought to the care room and offered to the children.
- During garden time staff responded quickly to a child's request for a snack. Breadsticks and apples were brought to the garden for all children present should they choose to have some.

- Staff joined the children during play and were observed to use strategies such as labelling and repetition to encourage language development during interactions.
- Transitions were observed to be timely and well organised. Children were given a verbal indication of what was going to happen next, and staff were familiar with the routine which facilitated positive transitions.
- A staff member was observed to offer comfort to a child who hurt themselves in a calm and caring manner.
- Children were regularly reminded about toileting, and nappy changing practices were regular supporting children's comfort.
- Staff helped create a restful environment for the children during sleep by dimming lighting, removing heavy layers of clothing and playing soft music.
- Children's photos and artwork was displayed throughout the service.
- Parents were observed to enter the service during drop off and collection and engage in conversation with staff members sharing updates on the child's day. Staff explained how they use a software application to share daily updates with the parents.
- Key service policies and staff information were displayed in the service reception area for parents.

Non-Compliance Information

1. In the Toddler room children's drinks were not supplied in developmentally appropriate drinkware. A child aged over 1.5 years were observed to self-pour their drink into a small play cup and prefer the toy cup over their bottle to drink from during a mealtime. Staff did not respond adequately to the child's cues demonstrating a level of ability and want for age-appropriate drinkware. This was not in line with service policy that advises independence in children is encouraged and scaffolded as they are ready.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

1. The management team spoke with staff and explained why each child must have their own age-appropriate bottle, beaker or cup. The team immediately put this system in place on a shelf with all items labelled and in full access to the children. Management also used the example mentioned in the report that picking up on the children's cues is imperative to providing what the children need. Management will continue to monitor the use of the drink station that is in place in the toddler room, ensuring the team maintain an accessible area for the children and that the children are able to drink from their own bottle/beaker/cup freely.

Supporting documentation submitted

- Photographic evidence.

Summary Comment

The corrective and preventative actions provided by the registered provider are sufficient to address the non-compliance 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 entrance was secure when the inspector arrived unannounced. A buzzer system, with a camera was observed in place. Staff advised the Tweeny room, office and reception area can view the camera and identify visitors before entry.
- A low-level handrail was in place on the staircase to assist the children.
- Blind cords were secure.
- Cleaning products were observed safely stored out of reach of children.

Infection Control:

- Children were supported to wash their hands following toileting and before mealtimes.
- Foot pedal bins were present in the sanitary areas to assist hygiene practices.
- Children had individual bed linen and staff advised how they laundered weekly or more frequently if required.
- Adequate space of a minimum of 50cm was provided between cots in the cot room to limit the spread of infection.

Safe Sleep:

- Sleeping children were physically monitored at 10-minute intervals and records of these checks were maintained in a timely manner.
- An ambient temperature of 18-22°C was maintained in rooms where children over one year old were sleeping.

Fire Safety:

- Fire evacuation routes were observed clear of any obstructions.

Non-Compliance Information

General Safety:

1. The sink water temperature in the Tweeny sanitary area exceeded the maximum allowed temperature of 43°C. The water temperature was recorded at 46.4°C at 11.06am which posed a potential risk of injury.
2. A cot observed in use on the day of inspection had an ill-fitting mattress cover that was too large and posed a potential risk of injury.
3. The floor in the Tweeny room was washed after dinner. The floor was observed visibly wet while children were in the room settling for sleep and other children entered the room the access the toilet during their garden time. This posed a potential slip risk for the children.

Infection Control:

4. Children were observed to have access to and play with stagnant water while in the outdoor area which posed an infection control risk.
 - Staff removed a lid to a water tray which contained stagnant water and proceeded to allow children to engage in waterplay.
 - A red container which included a selection of toys was observed with stagnant water gathered.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1. Management have set a specific amount of time for the water switch to be turned on each day and carried out water temperature checks to ensure this was appropriate time to manage the water temperature. Management have also asked the team to continue to monitor the temperature and report any changes. The temperature has been below 43 degrees to date. Management have contacted a plumbing company to review the possibility of more specific temperature control measures in addition to managing the water switch and ongoing temperature checks.
2. The team removed the bedding from the cots and replaced them with appropriate fitted sheets. The team were advised by management to ensure that the correct sheets are used for the cots and for the flat beds as they are both different. The sheets have been arranged in separate cubbies. One for flat bed sheets and another for cot mattress to avoid future confusion over usage.

3. The team have been advised that mopping during the day when children are actively moving around the room is a hazard. This practice was discontinued immediately. The team have been instructed to only mop rooms when no children are present and at the end of day when no one else will be using the room after.

Infection Control:

4. The water was removed immediately on the day from the container and the water tray was cleaned. The container is no longer in the garden. The red container with toys was also removed and brought to be deep cleaned. The garden's daily risk assessment includes insuring there is no stagnant water on site. If any areas are deemed not suitable for use due to rain/storm, it will be cleaned before any class uses the garden space.

Supporting documentation submitted

General Safety:

- Contractor correspondence.
- Photographic evidence.

Infection Control:

- Photographic evidence.

Summary Comment

The corrective and preventative actions provided by the registered provider are sufficient to address the non-compliance under Regulation 23.

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

- (1) A review of the staff roster indicated that a person qualified in First Aid Responder (FAR) was rostered to be on the premises and available to the children during the operating hours of the service on the day of inspection.

(2) (a)(b) An adequately equipped first aid box was available and easily accessible to staff if required and was stored out of reach of children.

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.

Compliance Information

The registered provider ensured the following:

- (1) There was a complaints policy maintained that outlined the following:
 - (a) The procedure to be followed when making a complaint.
 - (b) The way complaints would be dealt with.
 - (c) The procedures for keeping the complainant informed on how the complaint is being dealt with.

Non-Compliance Information

(2) (a)(b) There were no written complaints log available for review and management confirmed the service does not have a sufficient mechanism in place to maintain a list of complaints received. This was not in line with service policy that advises formal and informal complaints will be stored in complaints record file. There was no record available in line with service policy for one complaint received since the last inspection.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(2) (a)(b) The manager created a new template to note any concerns informal or formal. The document contains areas of information regarding the concern, who reported, the date reported, actions taken and any follow up information. The management team have been instructed to produce written reports on concerns brought to them by parents and will write a detailed description of the concern as well as any action that has been taken. A follow up report will be logged, if necessary, in due course as appropriate.

Supporting documentation submitted

- Template concerns form.

Summary Comment

The corrective and preventative actions provided by the registered provider are sufficient to address the non-compliance under Regulation 32.