

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015DY169
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Name of Service:	Poppintree Early Education Centre
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Address of Service:	Balbutcher Lane, Poppintree, Ballymun, Dublin 11, Co. Dublin
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Name of Registered Provider:	Bernie Kelly
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Service type:	Full Day
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Date of Inspection:	15/08/2023
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No of pre-school children:	AM	22	PM	20
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Address of the Early Years Inspectorate:	Early Years Inspectorate, Child and Family Agency, 2 nd 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 2010 in the single storey community centre which is in a residential area of Ballymun. Part of the community centre is designated for the use of the preschool. There are three childcare rooms, the Baby room, the Discovery room, and the Active Learners room. The service also has a reception area, an office, a kitchen and two outdoor play areas.

The service offers full day and sessional care and education to children from birth to 6 years old. Opening times are from 8.30am to 5.15pm daily.

The service participated in the Early Childhood Care and Education (ECCE) scheme.

Staffing

The manager, ten childcare staff, the receptionist and three kitchen staff were on duty on the day of inspection.

The registered provider was invited and visited the service to attend the feedback meeting.

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 inspections may also focus on other areas as required.

The inspection focused on an examination of compliance under regulation 9, regulation 11, regulation 16 (i), (j) and (k) and regulation 23, however, on inspection additional non-compliance which posed significant risk was identified under Regulation 8. These findings are outlined in regulation 8 within this report.

A sampling process was used to assess compliance under regulation 9 and regulation 16 (i), (j) and (k).
As a result, the scope of the inspection included the Baby room.

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

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

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

Additional Information

15th August 2023

An immediate action notice was issued to the service in relation to regulation 23 sleep room temperatures which posed a risk to the safety of children. Please see details in the body of the report.

16th August 2023

The registered provider addressed the non-compliance under Regulation 23. Please see details in the body of the report.

Acknowledgments

The inspectors wish 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

(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

(2)

The staff files for 15 staff members who work at the service were reviewed. These included the person-in-charge, the deputy person-in-charge, 3 kitchen staff and 1 maintenance person.

(a)

Seven staff members had 2 validated written references from a past employer available for inspection.

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

(b)

Two staff members had 2 validated written references from a source other than a past employer available for inspection.

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

(c) All 15 staff files reviewed had the required garda vetting documents available for inspection.

(d) Two staff members required international police vetting and this was available for inspection.

Non-Compliance Information

(2)

(a) One adult did not have any references available for inspection.

One adult did not have a second reference available for inspection.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(2)(a)

In response to the non-compliances the registered provider has stated that.

- Two references were sourced for one member of staff, these references have been verified on 05/09/23 evidence of same provided to Tusla.
- Second reference for one member of staff were located, this reference was verified on 18/8/23 and evidence of same provided to Tusla.
- The manager and administrator undertook to full review of all Staffing Files on 17/09/2023 to ensure that all requirements of Regulation 9 have been met and that all material are retained and available for inspection.
- Staffing Files will be reviewed using the checklist provided on an annual basis as part of the annual appraisal systems (or as required for new staff members) to ensure that all documentation is present and available for inspection.

Supporting documentation submitted

(2)(a)

- Two validated written references for one staff member.
- A second validated written reference for one member of staff.
- Staffing Files checklist.

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 on the day of inspection. On the day of inspection, all the children were attending the service for full day care hours.
- Baby room**, there were 3 children aged 9 months to 2 years being cared for by 2 staff members.
- Discovery room**, there were 11 children aged 2 to 3 years old being cared for by 3 staff members.
- Pre-school room**, there were 8 children aged 3 to 5 years old being cared for by 3 staff members.
- (2)
- The minimum ratio of adults to children was maintained on the day of inspection. Sign-in records were available for 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:

- (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.

Non-Compliance Information

(1) (i) A staff roster was not available for inspection.

(j) Four administration of medication forms were reviewed, and the following details were missing on each form.

- The child's date of birth was not completed.
- And the medication dosage to be administered was not included.

(k) Ten accident and incident records were reviewed, and the following details were missing.

- The child's date of birth was not completed on 8 forms.
- The date that parents signed the form was not completed.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

- (1)
- (i) In response to the non-compliance the service has stated that a daily roster of staff available and the number of children in attendance is displayed outside each room and a separate centralised staff roster sheet is maintained centrally by the manager with details of staff attending and contingency planning in the case of absence. These documents are in use and evidence of same has been provided to Tusla. Weekly Rosters will be maintained and reviewed by the centre manager and administration team each Friday morning to ensure a review of the previous week and ensure adequate cover for the following week.
- (j) In response the service has stated that all staff attended a staff meeting on Friday 18th September and completed full-day training. On 21 August the policies and procedures for the administration of medication was reviewed, this including storage, administration and record keeping.

Children's ages and details will be recorded accurately on all forms and medication dosage will be accurately recorded on all forms.

Room Leaders will conduct a weekly review of all medication forms and report to the centre manager in the case of any missing information. All new staff will receive induction on the storage, administration, and recording keeping practices re: medication.

(k) The service has responded that as part of full day training on Monday 21 September, staff were required to 'audit' the incidence and accident books, noting times of incidents, spaces within the room, children involved and the accurate recording of children's information and parents' signatures. As part of the training, the policies and procedures were reviewed. Parents will be required to sign and date forms when collecting children.

Room leaders will conduct a weekly review of all accident and incident forms and report to the centre manager to reflect on preventative actions and to alert the manager in the case of any missing information. All new staff will receive induction on accurate recording of accidents and incidents and communication with parents. These records will be maintained on file and available for inspection.

(i), (j) and (k), All existing staff are required to complete the Tusla Online QRF training before 30 November 2023 and evidence of this will be retained on staffing files. All new staff will be required to complete this training as part of their induction process.

Supporting documentation submitted

(i) Documentary evidence of the service roster for the week 18 September 2023.

(j) and (k) Documentary evidence of 12 staff signing in for a meeting held on 18 August 2023 and the outline of the staff training that took place on the 21 and 22 August 2023.

Summary Comment

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

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

Non-Compliance Information

(1)(a) Basic Needs

In the Baby room, the layout of the room did not support the children's efforts to crawl and investigate their surroundings due to the following.

1. A cot blocked access to a small construction area and a child was observed to try to pull the cot out of his way.
2. There was limited clear floor space for the children to manoeuvre around the room. For example, a child was propped up in a cot for a short period of time and then taken out and placed on the floor with minimal opportunity to crawl, to pull to stand and to sit and explore as there was no space available.

Physical and material environment

3. The contents of 5 baskets were not visible to the children. There were no pictures or labelling to help the children identify contents and to encourage the children to explore its contents.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

Basic Needs

1. To address the non-compliance the service has stated that all staff working in centre, including those assigned to the Baby Room have been advised that when cots are not in use, they must be stored in the storage room and not left in the main care room.
2. In response a review of the environment was conducted on 16/08/23. On 21/08/23 and 22/08/23 the Manager and Room Leader revamped the space, ensuring adequate opportunities for freedom of movement around the room and evidence of this has been provided to Tusla.

Physical and material environment

3. In the Baby Room, the contents of baskets and storage items have been clearly labelled to support children in identifying objects and exploring contents.

The above actions will be monitored by the Room Leader and Centre Manager with monthly audits of materials, and weekly reflective practice sessions to evaluate how the children are using the spaces and materials within the room.

Supporting documentation submitted

1-3. Photographic evidence of the care room and equipment accessible.

Summary Comment

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

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 main entrance and exit door to the service was safe and secure. It was managed by staff at the reception desk and a buzzer system was in place. The door was securely closed when the inspectors arrived.
- Both outdoor play areas were securely fenced, and gates were closed.
- The kitchen area was inaccessible to the children and staff were observed to keep the door closed.

Non-Compliance Information

General Safety:

1. Unsecured cord blinds were within reach of the children in the Baby room, the Toddler room and the Preschool room. The risk of an injury to a child was possible.
2. There were no visibility strips at the children's height on the door glass panels. The risk of injury was increased as the children could accidentally walk into the glass door panels.
3. In the large garden area at the back of the premises, there was a pipe with torn tape accessible to the children, The risk of an injury to a child was possible.

Safe Sleep:

4. The Baby care room was used as the sleep room on the day of inspection and the ambient temperature was not maintained between 16 and 20⁰celsius while children were sleeping. The temperature ranged from 25.1⁰celsius at 10.52am to 25.9⁰celsius at 2.09pm. An immediate action notice was issued.
5. At 1.18pm, a staff member was observed to place a blanket over 2 sleeping children despite the high room temperatures.
6. All reasonable measures were not maintained during the childrens sleep time to try to reduce the care room temperatures as the fan which was in use was turned off, and the door to the garden area which was open was closed.
7. At 2.09pm, the temperature of the care room while children slept was 24.3⁰celsius on their room thermometer. However, the room temperature was documented by staff as 20.0 ⁰celsius on their sleep records from July to the present date.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

- 1.To address the non-compliance the service has stated that hooks have been installed to store the cords at height, out of reach of children.
2. Visibility Strips have been added at children's height on all glass panels and door panels.
3. The torn padding around a pipe in the playground has been replaced.

All staff completed two full days of training on the Childcare Regulations (2016) on 21/08/2023 and 22/08/2023. This included a review of safety requirements and self-assessments of the room. This will be maintained through weekly checks (or as required) in all rooms, and Room Leaders will inform the Safety Officer of any actions required.

As above, all existing staff are required to complete the Tusla Online QRF training before 30 November 2023 and evidence of this will be retained on staffing files. All new staff will be required to complete this training as part of their induction process.

Safe Sleep:

4, 5, 6 and 7. To address the non-compliance the service has stated that the temperature in the Baby Room will be maintained between 16⁰celsius to 20⁰celsius while children are sleeping. This is achieved through the installation of air conditioning units that were installed on 16 August 2023. In the event that the temperature

cannot be maintained in this range, children will be moved to another room. No child will be put to sleep in a room where the temperature exceeds 20⁰celsius.

All staff completed two full-days training on 21 August 2023 and 22 August 23 in which the policies and procedures were reviewed. Special attention was paid to Safe Sleep Requirements and the updated Safe Sleep Policy.

Staff members that work in the Baby Room were required to attend and complete Facilitating Safe Sleep Training. Any new staff working in the Baby Room will be required to complete this programme as part of their induction.

Recent sleep logs have been submitted to Tusla.

The Manager will oversee Safe Sleep requirements with weekly review, reflection, and record checking with the room leader to ensure all staff are informed as to the requirements and confident in their practices.

The sleep policy will be reviewed and revised on an annual basis (August 2024) or as required.

The air conditioning units have scheduled maintenance to ensure they are operating effectively.

Any new staff (including students on work placement) working in the Baby room will be required to complete the facilitating safe sleep programme as part of their induction.

Supporting documentation submitted

General Safety:

1. Photographic evidence of the blind cord secure.
2. Photographic evidence of visibility strips on door.
3. Photographic evidence of the padding repaired.

Safe Sleep:

4, 5, 6 and 7. Documentary evidence of the safe sleep policy, two staff retraining on sleep, an invoice for the installation of air conditioning units, a record of recent room temperatures maintained below 20⁰celsius and the template for recording 10 min sleep checks. Documentary evidence of 12 staff signing in for a meeting held on 18 August 2023 and the outline of the staff training that took place on the 21 and 22 August 23.

Summary Comment

An immediate action response was received on 16 August 23 with an outline of actions taken. It is acknowledged that on 16 August 23, staff training was undertaken, a new room thermometer which is easier to read was installed and new air conditioning units were installed.

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