

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier: TU2015DY179

Name of Service: Saol Beag Project Creche

Address of Service: 58 Amiens Street, Dublin 1.

Eircode: D01 K253

Name of Registered Provider: Catriona Crowe

Service type: Full Day

Dates of Inspection: 01/08/2024

Date 2 of Inspection: 02/08/2024

No of pre-school children:	AM	1	PM	3
	AM	2		

Address of the Early Years Inspectorate: Early Years Inspectorate
2nd Floor, Unit 4/5
The Nexus Building
Blanchardstown Corporate Park
Ballycoolin
Dublin 15 | D15 CF9K

Inspection undertaken by: Ciara 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

Saol Beag Project Creche is a full day care service located in an urban setting in city centre Dublin. The service operates as non-profit forming part of a wider integrated community services project. The service is registered to provide early childhood care and education to a maximum of 11 children. The service is open from Monday to Thursday 9.30am-4:00pm and Friday 9:30am-3:00pm.

The service operates out of one care room made up of two adjoining spaces and sanitary accommodation on the ground floor of a mixed-use building. Management explained that currently the front care room is in use while the second adjoining space is currently only used for sleep and access to the sanitary facilities.

Staffing

There were two adults present and working directly with the children on both days of the inspection. The service currently employs three staff including a manager and relief worker.

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

The inspection focused on an examination of compliance under:

- Regulation 9(1),(2)(a)(b)(c)(d),(3), (4) Management and Recruitment
- Regulation 11(1),(2) Staffing Levels
- Regulation 16(1)(h)(i)(j)(k) Records in relation to the Preschool Service
- Regulation 19(1)(a) Health, Welfare and Development of child
- Regulation 23 Safeguarding the Health, Safety and Welfare of the Child
- Regulation 25 First Aid
- Regulation 29 Premises

However, on inspection additional non-compliance which posed a risk was identified under Regulation 8 Notification of Change in Circumstance and Regulation 31 Notification of Incidents. These findings are outlined within the relevant regulation(s) within this report.

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 day two of the inspection under Regulation 23 in relation to a non-compliance identified under Regulation 9. A written response was received on the 6th August 2024 which mitigated the risk.

An immediate action notice was issued to the registered provider on day two of the inspection in relation to concerns under Regulation 23- Safeguarding the Health, Welfare and Development of child. A response which adequately addressed the concerns was received on 6th August 2024.

An immediate action notice was issued to the registered provider on day two of the inspection in relation to concerns under Regulation 23- Safeguarding the Health, Welfare and Development of child identified under Regulation 25. A response which adequately addressed the concerns was received on 6th August 2024.

Acknowledgments

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

Part II - Registration and Register

Regulation 8 - Notification of change in circumstances

(1) A registered provider of a pre-school service other than a temporary pre-school service shall, subject to paragraph (3), notify the Agency in writing of any proposed change in the details in relation to the pre-school service contained in the register pursuant to section 58C(2) of the Act or Regulation 7(2) at least 60 days before it is proposed that the change would take effect.

Non-Compliance Information

- (1) The registered provider did not notify the agency of a change of person in charge in advance of the change happening. Discussion with the person in charge during the inspection showed that the previous person in charge ceased the role in May 2024 and the current person in charge was not notified to the agency.

Corrective & Preventive Action submitted by the Registered Provider

Corrective Action

A change of circumstance form has been submitted to the registration department.

Preventive Action

Management will ensure the agency is notified of any proposed change of circumstances relating to the pre-school service in advance of the change taking effect.

Summary Comment

The change of circumstance application was closed as an incomplete application on the 01/10/2024. The service must submit a CIC application with all supporting documentation requested in order for the change to be processed and approved.

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,*

(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.
 - (b) Discussion with the management demonstrated that the designated person in charge is rostered to be on the premises for the duration of the opening hours of the service.
- (2) A discussion with management confirmed there are currently three staff employed in the service. The files of all three staff were reviewed.
- (a) (b) Two written references were available in relation to one staff member from past employers. One written and verified reference was available in relation to one staff member from a past employer.
 - (c) Garda vetting disclosures had been obtained for two staff. The service also demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years for two staff members.
 - (d) Police vetting was not required as none of the 3 staff files reviewed demonstrated that the staff members had resided outside of the jurisdiction for 6 months or longer as an adult.
- (4) Evidence was available to show that two 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.

Non-Compliance Information

- (2)(a)(b)
- There was no written and verified references available in relation to one staff member.
 - There was no verification available for two references in relation to one staff member.
 - There was only one written and verified reference available in relation to one staff member.

(c) Garda vetting had not been obtained for one staff member. 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) Procedures specified in paragraph (2) were not carried out prior to staff being appointed and allowed access to children attending the service. A review of a staff file demonstrated that a staff member was employed prior to obtaining a garda vetting disclosure.

(4) There was no evidence available to show that one staff member 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.

Corrective & Preventive Action submitted by the Registered Provider

Corrective Action

(2)(a)(b) Written references for two staff members will be verified by senior management. The third staff member is no longer working in the service.

(c) Garda vetting was obtained for the staff member before they returned to the service.

(3) Senior management were informed of the non-compliance and that staff should not have been employed prior to obtaining Garda vetting.

(4) The staff member no longer works in the centre.

Preventive Action

(2)(a)(b) Management will ensure that each employee and student is suitable and competent to work with children. This will be achieved by asking them for two written references and validating them prior to the employee's starting date. Both references will be dated and signed by the person who validates them.

(c) Management will ensure that all reasonable measures are taken to safeguard the health, safety and welfare of all children attending the service.

Management will ensure that all employees' files are kept safe and not misplaced.

(3) Management will ensure that all reasonable measures are taken to safeguard the health, safety and welfare of all children attending the service.

I will ensure that all new staff members and students are not granted access to the children attending the service prior to obtaining a Garda Vetting Disclosure.

(4) Management will ensure that all qualifications are recognised and listed by the Department of Children, Equality, Disability, Integration and Youth.

Supporting documentation submitted

- Garda vetting document.
- Validated references.

Summary Comment

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

Part III – Management and Staff

Regulation 11 - Staffing levels

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

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

Compliance Information

(2) Ratios were maintained on both days of the inspection.

Day	No. of children	Age range	No of staff available	No of staff required
Day 1	3	1 year 11 months - 4 years	2	2
Day 2	2	1 year 11 months - 4 years	2	2

Non-Compliance Information

(1) The registered provider did not ensure an adequate number of adults were working directly with the children at all times during the first day of the inspection. The staff available in the room were unable to respond adequately to the care needs of the children. This is detailed under the non-compliance section of Regulation 19.

Corrective & Preventive Action submitted by the Registered Provider

Corrective Action

Senior management were informed of the inspection feedback. A discussion was had on the importance of providing additional support.

Preventive Action

Management will ensure at all times that an adequate number of adults is working directly with the children attending the preschool service.

Supporting documentation submitted

- Care plan.

Summary Comment

The inspector has reviewed the actions taken and evidence submitted. The non-compliance identified under Regulation 11 has been addressed.

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

(h) Details of attendance of each preschool child was recorded in a booklet in the care room.

Non-Compliance Information

- (i) There was no staff roster available detailing which staff were rostered to work or the break times of any staff member.
- (j) A full record in writing was not maintained for medication administration. A sample of six medication administration records were reviewed, the following was observed:
- Three records did not include a parent's signature. This is not in line with service policy.
 - Three records did not include the signature of a second staff member. This is not in line with service policy.
 - Three records did not include a full date of birth for the children. A date of birth is required to ensure the correct child involved can be identified should the record be required in future.
- (k) A full record in writing was not maintained for accidents and incidents. Seven of ten records reviewed were not completed in full with the necessary information.
- One record did not include a parent's signature confirming they had been informed of the incident.
 - Six records did not include a signature of a second staff member.
 - Three records did not include a full date of birth for the children. A date of birth is required to ensure the correct child involved can be identified should the record be required in future.
 - One record did not include a child's full name. A full name is required to ensure the correct child involved can be identified should the record be required in future.

Corrective & Preventive Action submitted by the Registered Provider

Corrective Action

(16)(i) A staff roster for the service has been created to ensure that either the designated person in charge or an identified name deputy are both rostered and on the premises at all times during operational hours. The roster includes staff working hours, breaks, general duties, fire safety responder and first aid responder. A new staff member is listed as our fire safety responder until our fire safety training is completed.

(j) Management spoke with staff about the importance of keeping medication administration records up to date and completed in full. A staff memo was shared with the team about best practices to ensure the information was understood the memo was signed by all employees.

(k) Management spoke with staff about the importance of keeping accident and incident records up to date and completed in full. A staff memo was shared with the team about best practices to ensure the information was understood the memo was signed by all employees.

Preventive Action

(16)(i) The staff roster will be checked on a daily basis to verify availability of all staff. The staff roster will be reviewed daily and changes may need to be made accordingly.

(j) Management will check medication administration records on a regular basis and make sure they are up to date.

(k) Management will check accident and incident records on a regular basis and make sure they are up to date.

Supporting documentation submitted

- Staff roster.
- Signed staff memo.

Summary Comment

The inspector has reviewed the actions taken, and evidence submitted. The non-compliances identified under Regulation 16 have been addressed.

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,

Compliance Information

(1)(a) The following observations are examples of how each child's learning, development and well-being was observed being facilitated during the inspection:

- Staff interacted with children in a caring and respectful manner. Staff used low tones and were observed to bend to the children's level when interacting offering eye contact.
- Staff used strategies such as labelling and repetition to support children's language development and used positive language and praise to encourage their efforts of communication.
- During dinner time staff encouraged children to self-feed promoting self-care skills and independence.

- A three-week menu was on display and children were offered extra portions during dinner time. A water jug and cups remained in the care room for children to drink throughout the day.
- Staff were knowledgeable of children’s families and engaged the children in conversations naming family members and discussing recent events. This helps foster a sense of belonging and security for the children.
- Engagement with families was facilitated through conversation during drop off and collection times and the use of a notice board in the hallway.
- Staff advised how a care plan for a child with a medical need was created in consultation with the child’s family. Working in partnership with children’s families helps ensure the children’s needs are met and their overall wellbeing is supported.

Non-Compliance Information

(1)(a)

Basic needs:

1. During the first day of inspection, it was observed the needs of the children were not adequately met when a single staff member was caring for the group. While the interactions between staff and children within the service were calm and supportive when staff members were alone, they struggled to meet the needs of all children in the group which resulted in children displaying behaviours which required support.

Examples included:

- A child arrived at the service at 11:00am while a single staff member was present in the garden. As the staff member spoke with a parent and greeted the child another child climbed on an unstable table in the outdoor area. The staff member found it difficult to comfort the child and settle them into the service while trying to disengage a child from risky behaviours which may have led to an injury.
- At 1:44pm while one staff member was present a child who was awake in a cot lifted the mattress and sat on the panel below. The staff member went to the child when advised by the inspector. As the staff member attended to the child in the cot a child remaining in the adjoining care space engaged in risky behaviours such as climbing on stacked chairs.
- At 2:00pm a single staff member struggled to maintain an enjoyable mealtime experience as one child dropped their food, another child spilled their drink across the table and on themselves unobserved and a third child moved around the room while strapped into their chair.

Physical and material environment:

2. There was no rest area available in the front care room where children were being cared for. Children need access to a rest area during the day so they can take breaks from activities. This restricted children's choice to rest comfortably and share the space with their peers, the area should be an inviting space with soft seating or matting allowing for the children's comfort and provide a space to rest or lay down.
3. The care room was not laid out and ready for use by the children when the inspector arrived in the service 9:55am despite a child being present and the service opening time being 9:30am. The tables were observed pushed into the wall and supporting resources were not laid out in their defined areas. For example, staff placed the kitchen resources in home corner at 10:21am. Having the care space appropriately prepared for the children including layout of furniture and accessibility of toys and resources helps create a welcoming environment and supports children's free choice in play.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

1. **Corrective action:** All employees were notified of the non-compliance and explained the necessary steps required to correct the non-compliance. Management is providing extra support to children which has reduced the number of risky behaviours and has allowed for staff to comfort other children and settle them into the service when necessary.
Staff are monitoring the sleep area at all times.
Additional support is being provided to help make mealtimes a more enjoyable experience. The staff have been encouraged to sit beside the children during mealtimes and eat with them whenever possible.
Preventive action: Management will continue to provide support in the care room when required. The purchase of a new mattress should help prevent children from lifting it. However, staff will continue to monitor the situation.
Additional support during mealtimes will continue to be provided. The low chairs with straps have been removed from the care room.
2. **Corrective action:** Two washable mats, one small sofa, several cushions, two bookshelves and books were bought to create two beautiful rest areas. Management spoke with staff about the importance of children having access to a rest area. A staff memo was shared with the team to inform them of best practices which has been signed by all employees.

Preventive action: Management will ensure that both rooms have got two rest areas at all times. I will ensure that both rest areas are kept clean and in good working order at all times. Any damaged equipment will be discarded immediately and replaced accordingly.

3. **Corrective action:** Management explained to staff the importance of having defined play areas in both rooms and having the room prepared for the children when they come in. A staff memo was shared with the team to inform them of best practices which has been signed by all employees.

Preventive action: Management will monitor the situation and ensure that all these relevant changes being implemented on a daily basis.

Supporting documentation submitted

- Signed staff memo.
- Photographic evidence.
- Care plan.

Summary Comment

The inspector has reviewed the actions taken, and evidence submitted. The noncompliance's identified under Regulation 19 have been addressed.

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 at the service unannounced. An intercom and magnetic lock system were in place for the main entrance door. Internally the doors leading into the care room were secured with a pin code lock to gain access.
- Cleaning agents were safely stored out of reach of children.

Infection Control:

- Windows were open allowing fresh air to circulate.
- Warm water and hygienically dispensed soap were available in the sanitary area.

Administration of Medication:

- A detailed medical care plan was available for the child with additional medical needs.

Safe Sleep:

- Staff were observed to complete physical checks every 10 minutes on a sleeping child recording the position, colour and breathing of the child.

Non-Compliance Information

General Safety:

1. An ambient temperature of 18-22°C was not maintained in the front care room where children were playing. The temperature on day 1 of the inspection was observed to be 27°C at 1:47pm. An immediate action notice was issued to the provider in relation to this non-compliance.
2. The use of a low chair with straps hindered movement and posed a risk of injury to a child and their peers. The child stood up from the table and tried to wander the room while the chair was still strapped. Once returned to the table by staff and remaining strapped in the child then tried to climb underneath the table risking injury to children at the table with the legs of their chair. The child could sit and stand unaided and therefore did not require the support of the low chair with straps to sit safely.
3. A child was placed into a cot and lay flat while drinking a bottle. This is not in line with service policy which states no bottles in cots.
4. Chairs were observed stacked in the care room posing a risk of injury to children. At 10:05am and 1:44pm on day 1 of the inspection it was observed that a child attempted the climb on the stacked chairs.
5. A tall shelving unit used to store books was not secured to the wall and was unstable when touched. At 10:05am on day 1 of the inspection it was observed that a child tried to climb the unit. This posed a potential risk of injury to children.
6. A table in the garden with plant pots on top was unstable and rocked when touched posing risk of injury to children.
7. A large BBQ in the garden accessible to children was connected to a gas canister and a drip tray filled with liquid posed a risk of injury to children.
8. A trailing flex was observed in the care room accessible to children posing a risk of injury.

Infection Control:

9. Handwashing practices were inconsistent with HPSC best practice guidance and service policy. On day 1 of the inspection the following was observed:
 - Children's hands were not washed before mealtimes.
 - Children did not wash their hands after returning from playing in the garden.

- A child's hands were not washed following nappy changing.

10. Stagnant water was observed in a sensory tray in the garden which posed an increased risk of infection.
11. Although a small pedal bin was available in the sanitary area this was not used for the disposal of nappies. This is not in line with the regulatory notice November 2022 advising that disposable nappies should be disposed of in a foot-operated, lined, lidded bin that is leak proof, sealable and easy to clean.
12. Nappy creams were not individually labelled and were stored in a basket together. This posed an infection control risk.
13. Toilet roll was placed on the cistern which posed an infection control risk.
14. Cot mattresses were not observed to be waterproof and did not have a waterproof cover which posed an infection control risk.

Safe Sleep:

15. An ambient temperature of 18-22°C was not maintained in a room where a child aged over 1 year old was sleeping. The temperature on day 1 of the inspection was observed to be 23.1°C at 12:14pm. An immediate action notice was issued to the provider in relation to this non-compliance.
16. There was no thermometer available to complete sleep room temperature checks. Temperature checks are required to ensure the sleep room temperature is maintained between 18-22°C where children over 1 year are sleeping. This is not in line with service safe sleep policy that advises a temperature monitor is used.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1. **Corrective action:** A probe was bought immediately. Two big fans were also bought. The staff were informed about the importance of maintaining an ambient temperature between 18-22°C at all times. The staff were asked to carry out several check throughout the day to ensure that the ambient temperature of 18-22°C is maintained. A staff memo was shared with the team to inform them of best practices which has been signed by all employees.
Preventive action: Management will check the temperature of both rooms and ensure the right temperature is maintained and will check room temperature records daily to ensure they are being filled in appropriately.
2. **Corrective actions:** the low chairs with straps have been removed. Only low chairs without straps are being used in the front room. The staff were informed that any child who is able to sit and stand unaided

does not require the support of the low chair with straps to sit safely. A staff memo was shared with the team to inform them of best practices which has been signed by all employees.

Preventive action: Management will ensure that the corrective action is maintained going forward and that only low chairs without straps are kept in the front room.

3. **Corrective action:** All staff members were made aware of this non-compliance and explained the relevant steps that needed to be taken to correct this non-compliance. All parents have been explained that children cannot be placed into a cot lying flat while drinking a bottle. The bottle needs to be given to the child before or after their sleep, depending on their routine, this in line with our safe sleep policy which states no bottles in cots. A staff memo was shared with the team to inform them of best practices which has been signed by all employees.

Preventive action: All employees have read our policies and procedures and have been made aware of our safe sleep policy. A copy of our safe sleep policy was offered to parents.

4. **Corrective action:** All staff members were made aware of this non-compliance and explained the relevant steps that needed to be taken to correct this non-compliance. All employees were informed that chairs cannot be stacked in the care rooms for safety reasons. A staff memo was shared with the team to inform them of best practices which has been signed by all employees.

Preventive action: Management will ensure that chairs are not stacked in the care rooms at any given time and will remind the staff about safety if necessary.

5. **Corrective action:** The tall shelving unit was removed immediately in the presence of the inspector and has since been disposed of. All staff members were informed that shelving units that are unstable when touched and not secured to the wall pose a potential risk of injury to children and need to be removed from the care room immediately. A staff memo was shared with the team to inform them of best practices which has been signed by all employees.

Preventive action: Management will ensure that only shelving units secured to the wall are used in both care rooms from now on and that all reasonable measures are taken to safeguard the health, safety and welfare of all pre-school children attending the service and that the environment of the service is safe.

6. **Corrective action:** The table in the garden was removed immediately after the inspection. All staff members were informed that unstable furniture cannot be stored in the outdoor as it poses a potential risk of injury to children.

Preventive action: Management will ensure that any furniture that poses risk of injury to children is removed from the garden immediately.

7. **Corrective action:** The BBQ in the garden was removed immediately following the inspection. All staff members were informed that a large BBQ cannot be accessible to children as it poses a risk of injury. A staff memo was shared with the team to inform them of best practices which has been signed by all employees.

Preventive action: Management will ensure that any large equipment that poses risk of injury to children is removed from the garden immediately.

8. **Corrective action:** The handyman came to secure the trailing flew in the care room.

Preventive action: Management will ensure that trailing flex in the care room is secured to the wall and does not pose a risk of injury to children.

Infection Control:

9. **Corrective action:** The staff were informed that handwashing practices need to be consistent and that children need to wash hands before meals, after returning from playing in the garden and following nappy changing. A staff memo was shared with the team to inform them of best practices which has been signed by all employees.

Preventive action: The hand washing policy will be displayed in the toilet in the next coming days. Management will ensure that all employees read it and are aware of this policy.

10. **Corrective action:** The staff were informed that any stagnant water observed in the sensory tray in the garden needs to be emptied out and removed immediately as it poses an increased risk of infection. A staff memo was shared with the team to inform them of best practices which has been signed by all employees.

Preventive action: Management will 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. All employees will be asked to remove any stagnant water that it is observed in the sensory tray immediately. This practice will be checked and reviewed on a regular basis.

11. **Corrective action:** A foot-operated, lined bin that is leak proof, sealable and easy to clean was bought for the disposable nappies. A staff memo was shared with the team to inform them of best practices which has been signed by all employees.

Preventive action: Management will ensure that only a foot-operated, lined bin that is leak proof, sealable and easy to clean, is always kept in good working order. If the bin becomes damaged it will be removed and replaced.

12. **Corrective action:** New nappy creams were bought for all children in both care rooms. They were individually labelled and stored in the changing unit. The staff were informed that new nappy creams had been bought for all children who attend the service.

Preventive action: Management will ensure that nappy creams are individually labelled from now on. Under no circumstances will nappy creams be shared among children as this poses an infection control risk.

13. **Corrective action:** Toilet roll was removed from the cistern immediately after the inspection. The staff were made aware of this non-compliance and two new toilet holders were bought to hold the toilet rolls.

Preventive action: Management will ensure that toilet rolls are not placed on the cistern from now on as it poses an infection control risk.

14. **Corrective action:** Two new waterproof mattresses were bought along with two waterproof covers.

Preventive action: Management will ensure the service continues to use waterproof mattresses as well as waterproof covers.

Safe Sleep:

15. **Corrective action:** A probe was bought immediately to correct this non-compliance. Two big fans were also bought. The staff were informed about the importance of maintaining the ambient temperature between 18-22°C at all times and asked to carry out several checks throughout the day.

Preventive action: Management will check the ambient temperature in both rooms and ensure that the right temperature is maintained at all times and that room temperature records are being filled in appropriately.

16. **Corrective action:** The service thermometer was damaged a few days before the inspection. A new thermometer was bought immediately to correct this non-compliance.

Preventive action: Management will check the ambient temperature in both rooms and ensure that the right temperature is maintained at all times and that room temperature records are being filled in appropriately.

Supporting documentation submitted

General Safety:

- Invoices.
- Signed staff memo.
- Photographic evidence.

Infection Control:

- Signed staff memo.
- Bin invoice.
- Mattress and mattress protector invoice.
- Photographic evidence.

Safe Sleep:

- Signed staff memo.
- Thermometer invoice.
- Fan invoices.

Summary Comment

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

Part VI - Safety

Regulation 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.

Non-Compliance Information

(1)The registered provider did not ensure that a staff member trained in first aid response was immediately available to children in the service at all times. 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.

Corrective & Preventive Action submitted by the Registered Provider

Corrective Action

Senior management acted promptly and insured that first aid response training was paid for and organised for all employees.

Preventive Action

Management will ensure that a person trained in first aid for children is, at all times, immediately available to the children attending the pre-school service. All staff files will be checked regularly in order to ensure that all mandatory staff training is up to date.

Supporting documentation submitted

Invoice for FAR training.

Summary Comment

The inspector has reviewed the actions taken, and evidence submitted. The non-compliance identified under Regulation 25 has been addressed.

Part VII - Premises and Space Requirements

Regulation 29 - Premises

A registered provider shall ensure that the premises of the service are-
(d) cleaned, maintained and repaired, as required,

Non-Compliance Information

(d)The registered provider did not ensure the service was maintained and repaired as required. The following was observed:

- Paint in the front care room was chipped and peeling.
- A raised platform in the garden was damaged with large dips posing a trip hazard and damaged wood with exposed rusted screws which posed a risk of injury.
- Fencing panels in the garden area were damaged and cracked which posed a splinter risk.

Corrective & Preventive Action submitted by the Registered Provider

Corrective Action

Senior management and staff were informed of the non-compliance.

Senior management is in the process of organising someone to repair the paint in the front care room.

The raised platform in the garden has been removed.

The fencing panels which were damaged and cracked have been replaced with new ones.

Preventive Action

Management will ensure the service is maintained and repaired as required. A maintenance book has been purchased and staff asked to take notes of anything that might need to be maintained and repaired in the service, so we can act promptly.

Supporting documentation submitted

- Photographic evidence.

Summary Comment

The inspector has reviewed the actions taken and evidence submitted. Points two and three of the non-compliance have been addressed. Point one in relation to maintenance of the front care room paintwork remains outstanding until the proposed work has been completed.

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:

(e) an incident in respect of which a pre-school child attending the service goes missing while attending the service.

Non-Compliance Information

(e) A review of an incident record and conversation with management demonstrated that the service failed to notify the agency of a missing child.

Corrective & Preventive Action submitted by the Registered Provider

Corrective Action

Senior management and staff were made aware of the non-compliance. A staff memo was shared with the team to inform them of best practices which has been signed by all employees.

Preventive Action

Management will ensure that the registered provider is aware of Regulation 31 of the Child Care Act (1991) and notifies the Agency in writing within 3 working days of an incident in respect of which a pre-school child attending the service goes missing while attending the service.

Summary Comment

The inspector has reviewed the actions taken, and evidence submitted. The non-compliance identified under Regulation 31 has been addressed.