

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015DY272				
Name of Service:	Cherryorchard Community Childcare Service Ltd				
Address of Service:	Croftwood Crescent, Cherry Orchard, Dublin 10, Co. Dublin				
Eircode:	D10 YV32				
Name of Registered Provider:	William Mangan				
Service type:	Full Day, Part Time, Sessional				
Date of Inspection:	28/05/2024				
Date 2 of Inspection:	29/05/2024				
No of pre-school children:	<table border="1"> <tr> <td>AM</td> <td>76</td> <td>PM</td> <td>57</td> </tr> </table>	AM	76	PM	57
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Address of the Early Years Inspectorate:	Carysfort House, Carysfort Avenue, Blackrock, Co Dublin				
Inspection undertaken by:	L. Magee & R. Brien				
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

Cherryorchard Community Childcare is a community-based service based in a residential area of Cherry Orchard, South County Dublin. The service provides sessional, part-time and full day care to pre-school children aged six months to six years of age. School aged care is also provided. The service operates between 8:30am and 5pm Monday to Friday. The service is purpose-built, single storey facility with eight care rooms, a designated sleep room and a sensory room. There were two enclosed outdoor play spaces available to the children. One in an internal courtyard in the service and a second to the rear of the premises.

Staffing

There are 38 adults currently employed to work in the service including the designated person in charge, an adult who performs administrative duties and acts as the deputising person in charge, two cooks, two cleaners and 26 adults who work directly with the children. On the first day of inspection 28 adults were present, 22 of whom worked directly with the children including one adult on a work placement programme. On the second day of inspection 29 adults were present, 23 of whom worked directly with the children including two adults on a work placement programme. The registered provider does not work directly 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 unannounced and focused on areas of governance, health, welfare and development of child and safety. The inspection may also focus on other areas as required:

The inspection plan was to assess compliance under the following regulations:

- Regulation 9 Management and recruitment
- Regulation 11 Staffing levels
- Regulation 19 Health Welfare and Development of the Child.
- Regulation 23 Safeguarding Health, Safety and Welfare of Child

A sampling process was used to assess compliance under these regulations. As a result, the scope of the inspection included the Baby, Wobbler, Toddler 1 and Toddler 2 rooms.

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 inspectors wish to acknowledge the cooperation of the person in charge, staff and children who were present on the day of the inspection.

Part III – Management and Staff

Regulation 9 – Management and recruitment

(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) Garda vetting disclosures for thirty-seven adults were reviewed on the day of inspection. Four new members of staff commenced working in the service since the last inspection dated 23 October 2023. These files were reviewed as part of the inspection process and for the purpose of assessing compliance with this regulation.

- (a) Four validated references were available from past employers.
- (b) Four validated references were available from a source other than a past employer.
- (c) Garda vetting disclosures from the National Vetting Bureau of An Garda Síochána were available for thirty-seven adults. These disclosures were reviewed to assess compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years. Renewed Garda vetting was available for thirty-five staff, however, the service did not adhere to the re-vetting timeframes as outlined in the Early Years Inspectorate Regulatory Notice for two staff members. Please refer to the information outlined under regulation 23 of this report.
- (d) Police vetting was not required as none of the adults had lived outside the state for longer than six consecutive months.

(4) One adult employed to work directly with pre-school children had attained major awards in Early Childhood Care and Education at a minimum of Level 5 on the National Framework of Qualifications. Two adults who did not have the required qualification had a Letter of Qualification Recognition which had been issued by the DCEDIY. One adult was employed to work on a community employment scheme and did not require a qualification.

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) An adequate number of adults were working directly with the children at all times during the inspection.

(2) The minimum ratio of adults to children for full day care services was adhered to at all times during the inspection.

On the first day of inspection 22 adults worked with 76 children. On the second day of inspection 23 adults were working with the 71 children.

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-

(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 (b)

Appropriate and suitable care practices were observed on the day of inspection as evidenced below:

The service had a healthy eating policy. Healthy meals and snacks were served no more than 3 hours apart. Meals and snacks were appetising and healthy for children. Children sat together and enjoyed a nice, relaxed environment while eating their meals. Drinks were available to the children at all times. Children in the Wobbler, Toddler 1 & Toddler 2 rooms were supported to use the toilet and wash their hands with an appropriate balance of independence and supervision by staff. This was also observed when the children in Toddler 1 all took turns serving themselves dinner when it arrived. Extra food was available if required. Floor mats were provided to facilitate children to sleep in Toddler 1 while the children in the Baby room and Wobbler room slept in their cots. The children in Wobbler, Toddler 1 and Toddler 2 children spent time enjoying the outdoor area.

Non-Compliance Information

1. One child in the Baby room was observed being fed and not been given an opportunity to self-feed during their meal. Children who feed themselves are better at regulating their hunger and satiety cues.
2. Four children were observed, lying down and going to sleep drinking bottles of milk on both days of inspection. Going to sleep with a bottle significantly increases the risk of early childhood dental decay.
3. The sleep cues of 1 child were not met on both days of inspection. One child was observed falling asleep in their feeding chair while waiting for their dinner on day 1 of inspection. Despite dinner arriving 40 minutes earlier on day 2, this child fell asleep in their feeding chair just as dinner was finished.
4. The children in the Baby room did not use the outdoor area on the days of inspection.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

1. We met with the staff in the baby room and went through the food health, safety & nutrition policy. We discussed the importance of self feeding and also sent out the information to parents:
<https://www2.hse.ie/babies-children/weaning-eating/weaning/tips/>

We had a team meeting on the 1st of August 2024 and went through the Tusla report and the food health, safety & nutrition policy and all staff signed off on the policy.
2. We spoke with parents and the four children were weaned off the bottles at nap time from the week of the 3rd of June 2024. <https://www2.hse.ie/babies-children/sleep/how-to-help-your-child-sleep-through-the-night/>.

We have amended the safe sleep policy and children will no longer have bottles of milk over the age of 2. From the Wobbler room we will begin to wean children off bottles of milk and share information with parents. We had a team meeting on the 1st of August 2024 and went through the Tusla report and the amended safe sleep policy and all staff signed off on the policy.
3. We met with the staff in the baby room and also amended the safe sleep policy. We went through the safe sleep policy with the baby room staff. We discussed the importance of following sleep cues and also sent out the information to parents.

We had a team meeting on the 1st of August 2024 and went through the Tusla report and the amended safe sleep policy and all staff signed off on the policy.
4. We have asked all parents to bring in outdoor gear for the babies and have cordoned off an area for the babies to use.

We had a team meeting on the 1st of August 2024 and went through the Tusla report and discussed the importance of outdoor play and went through the outdoor play policy and all staff signed off on the policy.

Supporting documentation submitted

Written and photographic evidence was presented to demonstrate the corrective and preventive actions submitted by the registered provider.

Summary Comment

The corrective and preventive actions as stated by the registered provider have been deemed to address these non-compliances. These actions will be assessed on the next inspection.

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:

External gates and doors were secured to prevent children from exiting the service unsupervised and to prevent unauthorised persons from gaining access to the pre-school. Heavy equipment was secured to prevent tipping and injury. Cleaning products and hazardous materials were stored securely out of reach of the children. Toys and play equipment observed in use by children on the day of inspection were safe and in working order.

Infection Control:

The premises were observed to be maintained in a clean condition. Completed cleaning schedules were in place demonstrating the daily and weekly procedures taken by the service. The sanitary facility was equipped with warm water, liquid soap and disposable paper towels.

Administration of Medication:

There was evidence of the policy on administration of medication being implemented. Staff knew the requirements and had a clear understanding of their roles and responsibilities in relation to the policy on administration of medication.

Non-Compliance Information

General Safety:

1. Garda vetting was available for two staff members. However, these vetting disclosures were not dated within the previous three years in adherence with the Early Years Inspectorate Regulatory Notice 'EYI-RN12.3 Renewal of Garda Vetting.

Infection Control:

On the day of inspection, the risk of infection spreading within the service was observed and is outlined below:

2. Adults and children's hands were not washed at the appropriate times during nappy changing. Handwashing did not occur before the children ate their lunch in the Baby room.

3. The nappy changing mat used by the children from the Wobbler room could not be cleaned effectively, posing a risk of cross contamination. Inspectors observed a large tear in the mat with the inner foam exposed.
4. There were no waterproof coverings on each of the mattresses on 7 cots in the Sleep room and 8 cots in the Wobbler room. A waterproof covering on a mattress can be easily cleaned and prevents the build-up of bacteria inside the mattress.
5. Adults and children were observed lifting the lid of the bins with their hands and not using the foot pedal provided.
6. The sheets and blankets in Toddler 1 were stored, stacked together, which is ineffective for infection control purposes. This was a non-compliance on the last inspection dated 23 October 2023.

Safe Sleep:

7. One child, aged 15 months, slept in a bouncer in the Baby room for 10 minutes on the first day of inspection which is contrary to the safe sleep policy of the service. Staff confirmed this is the sleep routine for this child to sleep on a daily basis despite a cot being available for this child.
This was a non-compliance on the last inspection dated 23 October 2023.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1. We applied for Garda vetting for the two staff members on the 28.05.2024. At the start of each school year we will check the Garda Vetting for all staff on file. This has been added to our staff training checklist too. Staff will be re-vetted every 2 years going forward.

Infection Control:

2. We met with the staff in the baby room and went through the infection control and handwashing policy. We had a team meeting on the 1st of August 2024 and went through the Tusla report and discussed the importance of infection control and handwashing and went through the infection control and handwashing and all staff signed off on the policy.

3. We immediately replaced the nappy changing mat on the day of the inspection 28/05/2024. We always have spare changing mats in the store room. The changing mats have been added to the daily risk checklist for the sanitary areas.
4. We purchased new waterproof mattress coverings on the day of the inspection. We had a team meeting on the 1st of August 2024 and went through the Tusla report and the amended safe sleep policy and all staff signed off on the policy.
5. We had a team meeting on the 1st of August 2024 and went through the Tusla report and the infection control and handwashing policy.
6. We met with staff from the Toddler 1 room to ensure that the shelved wardrobe is being used to store the beds. We had a team meeting on the 1st of August 2024 and went through the Tusla report and the safe sleep and infection control policies.

Safe Sleep:

7. We met with the staff in the baby room to discuss the safe sleep policy. We discussed the risks of sleeping in bouncers and also sent out the information to parents. In future with children who do not sleep in cots at home and who will not settle in cots in the service we will do individual sleep care plans for the children along with their parents and the key carers.

Supporting documentation submitted

General Safety:

Written evidence was presented to demonstrate the corrective and preventive actions submitted by the registered provider.

Infection Control:

Written and photographic evidence was presented to demonstrate the corrective and preventive actions submitted by the registered provider.

Safe Sleep:

Written evidence was presented to demonstrate the corrective and preventive actions submitted by the registered provider.

Summary Comment

The corrective and preventive actions as stated by the registered provider have been deemed to address these non-compliances. These actions will be assessed on the next inspection.