

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2015DY303
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<b>Name of Service:</b>	Christchurch Creche & Montessori School
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<b>Address of Service:</b>	Dominic Street Lower, Co. Dublin
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<b>Eircode:</b>	D01 XN81
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<b>Name of Registered Provider:</b>	Esther Brennan
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<b>Service type:</b>	Full Day
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<b>Date(s) of Inspection:</b>	19/06/2024
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<b>No of pre-school children:</b>	AM	34	PM	35
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<b>Address of the Early Years Inspectorate:</b>	Early Years Inspectorate 2 <sup>nd</sup> Floor, Unit 4/5 The Nexus Building Blanchardstown Corporate Park Ballycoolin Dublin 15   D15 CF9K
<b>Inspection undertaken by:</b>	T. Nelson and C. Kerrigan
<b>Title:</b>	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

Christchurch Creche and Montessori is a full day care service located in Dublin city centre and is registered to provide early childhood care and education to a maximum of 44 children aged 0 to 5 years, Monday to Friday. Christchurch Creche operates from a renovated single storey premises. Facilities available include the Baby room (0 to 18 months old), Toddler room (1 and a half years - 2 and a half years old) and the Montessori room (2 years and a half years - 5 years old). There is a cot room located off the Baby room, with nappy changing facilities located off the main hallway between the Baby and Toddler Room. Further sanitary facilities for staff and children, the kitchen and an office are located off the hallway. There is a fully enclosed outdoor area located to front of the premises.

### Staffing

There are currently ten staff employed by the service including the registered provider, eight childcare staff who work directly with the children and a kitchen staff member. Present on the day of the inspection was the registered provider, eight childcare staff, a kitchen staff member and an adult who is contracted to provide security on the premises on a daily basis. The registered provider works in the service, providing support where needed together with managing oversight of 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 the area of governance/ health, welfare and development of child/ safety. 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) Records in relation to the Preschool Service
- Regulation 21 Equipment and Materials
- Regulation 23 Safeguarding the Health, Safety and Welfare of the Child
- Regulation 26 Fire Safety Measures

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

- Regulation 9(1),(2)(a)(b)(c)(d),(3) (4) Management and Recruitment
- Regulation 16(1)(h)(i)(j)(k) – Records in relation to Preschool Service.

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 registered provider, staff and children who were present on the day of the inspection.

### Part III – Management and Staff

#### Regulation 9 – Management and recruitment

(1) A registered provider shall ensure that-

- (a) the service has a designated person in charge and a named person who is able to deputise as required,
- (b) at all times during the period when the pre-school service is being carried on, the designated person in charge or the named person referred to in subparagraph (a) is on the premises, and
- (c) there is a clear management structure in the service that identifies the lines of authority and accountability in the service and the specific roles and responsibilities of each employee and unpaid worker.

(2) A registered provider shall ensure that each employee, unpaid worker and contractor is suitable and competent taking into consideration the nature of the needs of children, including by-

- (a) consideration of references from the person's past employers, if any, and in particular the most recent employer, if any,
- (b) consideration of references from reputable sources in the case of a person who has no past employers,
- (c) consideration of the vetting disclosure received from the National Vetting Bureau of the Garda Síochána in accordance with the Act of 2012 in respect of the person, and
- (d) ensuring, insofar as is practicable, that where a person has lived in a state other than the State for a period of longer than 6 consecutive months, he or she provides police vetting from the police authorities in that state.

(3) The procedures specified in paragraph (2) shall be carried out prior to any person being appointed, assigned or allowed access to or contact with a child attending the pre-school service.

(4) A registered provider shall ensure that, without prejudice to the generality of paragraph (2) and subject to paragraphs (5) and (6), each employee working directly with children attending the service holds at least a major award in Early childhood Care and Education at Level 5 on the National Qualifications Framework or a qualification deemed by the Minister to be equivalent.

#### Compliance Information

(1)(a) The service had a designated person in charge and named person to deputise as required.

(b) The person in charge was present during the inspection.

(c) There was a clear management structure in place, which was displayed in the hallway.

(2) The following was reviewed:

- Three full files were reviewed, including two staff who were new to the service since the last inspection held on the 22 November 2023 and an external contract worker.
- Three Garda Vetting disclosures for staff members, where information available to Tusla showed these had required renewal since that last inspection held on the 22 November 2023.

The registered provider had completed the following checks:

- (a)(b) Six validated written references were available from recent past employers or a source other than a past employer for the three full files reviewed.
- (c) Garda vetting disclosures had been obtained for all six disclosures reviewed. The service also demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years.
- (d) One adult who had lived outside of the state for six months or more as an adult had international police vetting from that state available for inspection
- (3) Documentary evidence available showed that all of the checks outlined in (2) had been carried out prior to any of the adults having contact with the children in the service.
- (4) The staff member who worked directly with children attending the service held at least a major award in Early Childhood Care and Education at Level 5 or above on the National Framework of Qualifications or a qualification deemed eligible by the Department of Children, Equality, Disability, Integration and Youth Affairs.

### Non-Compliance Information

- (2)(d) There was no documentary evidence available to show that a staff member who had lived outside of this State for a period of longer than 6 consecutive months had police vetting from the police authorities in that state.

### Corrective & Preventive Action submitted by the Registered Provider

#### Corrective Action

A request has been submitted to the required authority to commence the process for police vetting from that state.

#### Preventive Action

The service will continue to endeavour to provide a Police check for all residencies of potential staff

#### Supporting documentation submitted

Evidence of contact with relevant authority.

### Summary Comment

The inspector has reviewed the actions taken and evidence submitted. Regulatory compliance remains outstanding for (9)(2)(d) until the police vetting is processed and maintained on the staff member's personnel file.

## 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) On the day of inspection there were an adequate number of adults working directly with the children attending the service to meet their basic care needs. There were nine adults available to the 34 children attending on the morning of the inspection.

(2) The adult to child ratios were correct when the inspectors arrived unannounced at 9.51am to the service and throughout the inspection. Seven staff were allocated to work directly with the 34 children who were present on the day of the inspection with a breakdown as follows:

- Baby room - 2 adults to 8 children aged between 15 -22 months old.
- Toddler room - 2 adults to 8 children aged between 22 months -3 years old.
- Montessori room - 3 adults to 18 children aged between 3 – 5 years old.

### 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:

- (a) the name, position, qualifications and experience of the person in charge and of every other employee, unpaid worker and contractor;
- (b) details of the class of service and the age profile of children for which the service is registered to provide services;
- (c) details of the adult:child ratios in the service;
- (d) the type of care or programme provided in the service;
- (e) the facilities available;
- (f) the opening hours and fees;
- (g) the policies, procedures and statements the service is required to maintain in accordance with Regulation 10;
- (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) The registered provider ensured that a record in writing was kept of the following information in relation to the service:

- (a) Details of the name, position, qualifications, and experience of the person in charge and of every other employee were maintained within the staff files.
- (b) The service Tusla certificate was displayed within the service and detailed the class of service and the age profile of children for which the service is registered to provide.
- (c) (d) (e) (f) Details of the adult: child ratios, the type of care or programme provided, the facilities available within the service and the opening hours and fees of the service were detailed in the policy document.
- (g) The registered provider maintained all of the policies required in accordance with Regulation 10.
- (h) Attendance records detailing the arrival and departure of the children on a daily basis were maintained.
- (i) A record was maintained of the staff roster which was reflective of the staff present on the day.

- (j) Following a review of a sample of ten records, the registered provider ensured a full record in writing was maintained for the administration of medication.
- (k) Following a review of a sample of ten records, the registered provider ensured a full record in writing was maintained for accident and incidents

## Part V - Care of Child in Pre-school Service

### Regulation 21 – Equipment and materials

*A registered provider shall ensure that there is adequate and suitable furniture, play and work equipment and materials available on the premises of the pre-school service.*

#### Compliance Information

The service ensured there was adequate and suitable furniture and equipment available, for example:

- The furniture in the rooms was observed to be adequate for the number of children in the rooms, it was appropriate for the age range and stage of development of the children in the rooms, and was well maintained, durable and easy to clean.
- The toys and equipment were laid out on low level shelving, visible to the children, and were grouped and organised in themed areas of interest such as home, art, construction, sensory, and library areas. Themed areas of interest facilitate children to have a more focused engagement in their play experiences.
- There was a range of play materials and equipment available to the children according to their age and stage of development, which facilitated a range of play experiences including creative, imaginative and language play.
- Images of the children and their families were displayed throughout the rooms, and children had labelled coats hooks and cubbies for their belongings. Storage boxes for toys were labelled using text and imagery. This can support a sense of comfort in knowing where things go.

#### Non-Compliance Information

The following equipment was not maintained and was unsuitable for the children:

1. In the outdoor play area, the following toys were broken:
  - The blue ride-in car had no steering wheel, making it unsuitable for use.

- The wheels were broken on the covered in ride-in car making it unsuitable for use.
  - The wheels were broken on a red push along plastic walker, making it unsuitable for use.
2. The selection of books which were accessible to the children in the Toddler room were observed to be maintained in poor condition, for example twelve of the books had torn or missing pages. This could potentially impact positive engagement of children in early language and literacy experiences.
  3. The wooden bench by the cosy area in the Toddler room had no cushion in place, exposing a surface which had a build-up of sticky residue and dirt which was accessible to the children. This posed a potential risk of infection and an uncomfortable seating area.
  4. The play kitchen in the toddler room was unstable and posed a potential risk of injury to the children.

## Corrective & Preventive Action submitted by the Registered Provider

### Corrective Action

1. The cars and push along from the outdoor play area were disposed of.
2. The particular books observed to be damaged in the seating were removed and disposed of.
3. The wooden bench in the cosy area has been removed.
4. The play Kitchen was disposed of.

### Preventive Action

1. Staff have been notified if a toy is unfit for purpose, it is to be removed. An outdoor safe equipment record must be signed off by staff from each care room, before entry to the play area.
2. The service commit to daily checks by staff to ensure all the books on display are in good condition.
3. The wooden bench has been removed and replaced with soft cushions & a book shelf.
4. Another play kitchen was installed and secured to the wall.

### Supporting documentation submitted

1. Photographic evidence.  
Evidence of outdoor checklist.
2. Photographic evidence.  
Evidence of indoor checklist.
3. Photographic evidence.
4. Photographic evidence.

## Summary Comment

The inspector has reviewed the actions taken and evidence submitted. The non-compliances identified under Regulation 21 have been adequately 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

The following measures were taken to safeguard children:

##### General Safety:

- There was an electronic keypad entry system in place. The entrance was managed and monitored by an adult engaged for the purpose of restricting unauthorised access to the premises. The exit button was up high out of reach of children preventing children from exiting unsupervised.
- The outdoor play area was fully enclosed.
- There were up to date risk assessments in place where the rooms and outdoor area were checked for hazards.
- Tall furniture was observed to be secured.
- All cleaning agents and hazardous equipment were observed to be stored up high out of reach or in locked presses.

##### Infection Control:

- The premises were in a clean and hygienic condition and documented up to date cleaning records were available and displayed in the premises. This included a record for the cleaning of mouthed toys.
- Liquid soap and single use hand towels were available at all wash hand basins used by the children and the staff members.
- Staff were observed supporting children to hand wash before and after mealtime.
- Soothers were stored in individual lidded containers.

##### Administration of Medication:

- Detailed administration of medication forms were maintained.
- Staff were aware of the practice to administer medicine for children who require it, and there were individual care plans available for these children.

##### Safe Sleep:

- A log was maintained where the temperature of the room and the colour, breathing and position of sleeping children was checked every 10 minutes.

##### Fire Safety:

- Fire exits were unobstructed throughout the premises.

### Non-Compliance Information

#### General Safety:

1. The corner of one of the cushions on the couch in the Baby Room was torn leaving the foam exposed, this was accessible to the children. This posed a potential choking risk should a child ingest any of the foam.

#### Infection Control:

The following increased the potential risk of infection:

2. The water in the sinks which staff reported as used for handwashing in the three care rooms was cold and did not have a supply of thermostatically controlled warm water. This reduced effective handwashing. This was identified as a noncompliance on the last inspection on the 22 November 2023 and the preventive actions put in place failed to prevent a recurrence.
3. Sleep mattresses were stored with linen in place; with the bed sheets observed having direct contact with other children's bed sheets. This potentially increased the risk of cross contamination.

### Action submitted by the Registered Provider

#### Corrective & Preventive Action

#### General Safety:

1. **Corrective action:** The couch was disposed of & replaced with a nursing chair.  
**Preventive action:** the service commits to a weekly record check to ensure all equipment and materials are fit for purpose.

#### Infection Control:

#### Corrective actions:

2. This sink is now only used as a source for drinking water. Each of the children will now go to the bathrooms to wash their hands as the taps are thermostatically controlled with warm water.
3. Sleep mattress storage procedure has now been amended by the service so each sheet must be taken off the mattress when the children are finished sleeping so there is no chance of potential infection.

#### Preventive actions:

2. The children go to the bathrooms to wash their hands as the taps are thermostatically controlled with warm water in the children's bathrooms.
3. Staff have been notified & the mattress storage procedure been amended so each sheet must be taken off the mattress when the children are finished sleeping so there is no chance potential infection.

## Supporting documentation submitted

### General Safety:

1. Photographic evidence.

### Infection Control:

2. Photographic evidence.
3. Evidence of procedure update to staff.  
Photographic evidence.

## Summary Comment

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

## Part VI - Safety

### Regulation 26 - Fire safety measures

*(1) A registered provider shall ensure that a record in writing is kept of-*

- (a) any fire drill that takes place in the premises, and*
- (b) the number, type and maintenance record of fire fighting equipment and smoke alarms in the premises.*

*(4) A notice of the procedures to be followed in the event of fire shall be displayed in a conspicuous position in the premises.*

### Compliance Information

(1)(a) A record of fire drills was available on the premises. Drills were carried out on a monthly basis with the last drill dated as having been carried out on the 20 May 2024.

(b) An up-to-date maintenance record was available for the fire extinguishers and smoke alarms in the premises. The fire extinguishers were serviced on 3 July 2023 and the smoke alarms were maintained on the 23 March 2024.

(4) The procedures to be followed in the event of a fire were on display in each of the care rooms.