

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015DY305
--------------------------	-------------

Name of Service:	Bowers Childcare Ltd
-------------------------	----------------------

Address of Service:	Block C, Brabazon Hall, Ardee Street, Dublin 8, Co. Dublin
----------------------------	--

Eircode:	D08 A093
-----------------	----------

Name of Registered Provider:	Yvonne Bowers , Colm Bowers
-------------------------------------	-----------------------------

Service type:	Full Day, Part Time, Sessional
----------------------	--------------------------------

Date(s) of Inspection:	22/01/2024
-------------------------------	------------

No of pre-school children:	AM	32	PM	33
-----------------------------------	----	----	----	----

Address of the Early Years Inspectorate:	Early Years Inspectorate 2 nd Floor, Unit 4/5 The Nexus Building Blanchardstown Corporate Park Ballycoolin Dublin 15 D15 CF9K
Inspection undertaken by:	T. Nelson and E. Finnegan Hayes
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

Bowers Childcare Ltd was established in 2009 and is one of five services operated by the registered provider. The service offers full day, part-time and sessional childcare to children aged from birth to 6 years old. The service is registered to operate from 7.15am to 6.15pm and participates in the Early Childhood Care and Education (ECCE) programme which operates from 9.15am to 12.15pm. Located on the ground floor of a commercial building in Dublin 8, the service consists of three childcare rooms, a kitchen, reception area and an office. The rooms include the Baby room (0 to 20 months old), Toddler room (2 to 3 years old) and the Montessori Ecce room (2 years 8 months to school age). There is an enclosed outdoor play area at the side of the building.

Staffing

There are currently 13 staff employed by the service including a cleaner and a chef. The registered provider does not work in the service. There were 13 adults present on the day of the inspection, including the person in charge and deputy person in charge who manage the oversight of the service and provide cover where needed, the chef, a student, and nine staff working with the children.

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), (4) Management and Recruitment
- Regulation 11(1), (2), (8)(9) Staffing Levels
- Regulation 19(1)(b) Health, Welfare and Development of child
- Regulation 21 Equipment and Materials
- Regulation 23 Safeguarding the Health, Safety and Welfare of the Child
- Regulation 26 Fire Safety Measures
- Regulation 32 Complaints

However, on inspection additional non-compliance was identified under Regulation 29, Premises. These findings are outlined within the relevant regulations 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.

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

(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.

(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 deputy person in charge was present when the inspectors arrived at the service, and the person in charge arrived during the inspection, and both were present throughout the day.

The files of 13 adults were reviewed, including a student. The registered provider had completed the following checks:

(2)

- (a) Eighteen validated written references were available from recent past employers.
- (b) Eight validated written references were available from a source other than a past employer.
- (c) Completed Garda vetting disclosures were available in respect of the 13 adults, which had been dated

within the previous 36 months.

(d) Documentary evidence showed that 11 adults had lived outside of the state for six months or more as an adult and international police vetting from that state was available for inspection.

(4) Ten staff 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

(4) There was no documentary evidence available that the qualification of one of the staff members who worked directly with the children was equivalent to at least a major award in Early childhood Care and Education at Level 5 on the National Qualifications Framework.

Corrective & Preventive Action submitted by the Registered Provider

Corrective Action

The service contacted the Quality and Qualifications Ireland and provided a record of staff's relevant qualification.

Preventive action

The service will ensure all staff qualifications are in line with the National Qualifications Framework in early years education.

Supporting documentation submitted

Evidence of relevant qualification submitted.

Summary Comment

The inspector has reviewed the action taken and evidence submitted. The non-compliance identified under Regulation 9(4) has 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.

(4) Subject to paragraph (5), where a registered provider contemporaneously provides-
(a) a sessional pre-school service, and

(b) a full day care service or a part-time day care service, or both, the minimum ratio of adults to children applicable for the duration of the sessional pre-school service in respect of the children attending that service shall be the ratio specified in paragraph (3).

(8) Without prejudice to paragraphs (2) to (7)-

(a) a registered provider of a pre-school service other than a child-minding service or a sessional pre-school service shall ensure that there are at least 2 adults on the premises at all times,

(9) In assessing compliance with the adult: child ratios specified in Schedule 6, unpaid workers and, where applicable, the person referred to in Regulation 24(2), shall not be taken into account.

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 eleven staff available to the 32 children.

(4) The adult to child ratios were correct when the inspectors arrived unannounced to the service and throughout the inspection. Seven staff were allocated to work directly with the 32 children who were present on the day of the inspection with a breakdown as follows:

- Baby room - 2 adults to 8 children aged between 11 months old-2 years old.
- Toddler room - 2 adults to 10 children aged between 23 months old-3 years old.
- Montessori room - 3 adults to 14 children aged between 2 years 8 months -5 years old.

(8)(a) The review of the staff roster provided for a minimum of two adults to be on the premises during the service's operational hours.

(9) A student who was present on the day of the inspection was not included in the adult: child ratios of the room.

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) The following appropriate and suitable care practices were observed:

- Practices such as mealtimes, nappy changing and toileting were observed to be timely and pleasant experiences for the children. Documentary evidence showed meals provided were regular and varied, with a three-week menu plan available.
- All children were observed to have access to outdoor play on the day of the inspection.
- Staff were observed to engage with the children in a warm sensitive manner and responded immediately to children who needed comfort or to tend to their care needs.
- The transition to mealtimes and sleep were managed at a pace to suit the children. Children had named place mats which indicated an individual space for meals and were given the time to eat their meal at their own pace. The room was darkened for sleep time and staff were observed to gently support children to sleep.

Non-Compliance Information

(1)(b) The following were observed not to be appropriate or suitable care practices:

Supportive strategies such as reading the child's cue, following the child's interest, careful timing of activities, the provision of age-appropriate and alternative activities was not observed, limiting the child's choice and movement through their care environment. This could potentially hamper the child's independent decision-making skills.

The following care practices were observed:

- Children in the Toddler room ranging in age from 1 year and 11 months to 2 years and 10 months were seated at the table for two activities: pegs and peg boards and chalkboards. Children were required to remain seated for these activities for a 30-minute period, from 10.20am to 10.50pm, with staff observed to repeatedly remind children to sit down and do their work. Staff were observed to continually direct the play during the peg-board activity by repeatedly telling the children not to mess with the pegs, to keep the pegs on the peg boards, and not to drop pegs on the floor. The children did not have access to free play, which was not reflective of the daily routine which was displayed in the room.

- Children in the Montessori were not provided with an alternative activity to circle time and were not supported in their social interaction with their peers. Staff were observed to tell children who were not interested in the circle time conversation and were engaged in their own conversation to be quiet. A child who was engaged in a meaningful conversation with their friend was physically lifted away from their friend and placed on another chair in order to limit the interaction.

These care practices were not in line with the service policy on behaviour management and curriculum which stated there would be developmentally appropriate expectations, and that freedom of movement and choice is supported.

Corrective & Preventive Action submitted by the Registered Provider

Corrective Action

Staff were updated on management of behaviours and free movement of children in the rooms. Different activity stations and free play introduced. Children activities to last no more than 10 mins in duration. Routines to be based on a daily observation. Staff updated on policies and procedures regarding Managing Behaviour.

Preventive Action

The service commits that training for staff will be carried out annually (for new staff on induction week) or more often if needed, on dealing with behaviour management and interacting with children.

Manager/Assistant manager will carry out daily, weekly checks in the rooms to ensure staff are following companies Behaviour management policy, Interaction policy, implementing best practice.

Supporting documentation submitted

Minutes of staff meeting, including topics and policies covered.

Summary Comment

The inspector has reviewed the corrective and preventive actions taken and evidence submitted. The non-compliances identified under Regulation 19 have been addressed and will be reviewed on the next inspection.

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 following were examples of the adequate and suitable equipment and materials available:

- There was a sufficient number of tables and chairs available, at a height suitable for the age and stage of the children in the rooms.
- Toys and equipment were displayed on open shelves which were visible to the children.
- There was a range of equipment and play materials available to the children according to their age and stage of development including role play, creative play and constructive play experiences and equipment to support their fine and gross motor skills and physical development.

Non-Compliance Information

The registered provider did not ensure the following:

1. There was not an adequate and suitable range of books in good condition accessible to the children in the Toddler and Montessori rooms. This could potentially impact engagement of children in early language and literacy experiences. For example
 - In the Montessori room, there were only ten books observed to be available to the 14 children on the day of the inspection, and of these two were observed to be maintained in poor condition, for example torn or missing pages.
 - There were 16 books observed to be available to the 10 children on the day of the inspection, and of these six were observed to be maintained in poor condition, for example torn or missing pages and seven were not suitable to the age and stage of the children in the room.
2. There was not a suitable cosy area in the Montessori room for the children to take a break from activities and rest. The small bean bag available was not adequate.
3. There was no adult seating in the Montessori room, as a result a staff member was observed sitting on a table comforting a child in need of support.
4. The outdoor kitchen did not have props or accessories available which limited the play experiences of the children.
5. There was no nappy changing mat available in the nappy changing room used by the Baby room resulting in the children having to lie on a hard surface for nappy changes. This did not support a comfortable experience during nappy changes.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

1. Corrective action: the damaged books were replaced additional books were added to the books available. Books suitable to the age and stage of the children in the room were provided for the Toddler room.
Preventive action: the service ensure books will always be available for children and will substitute them if they are in poor condition. The service commits to replace all books on a monthly based.

2. Corrective action: A new sofa was purchased.
3. Corrective action: chairs have been added in the room.
Preventive action: no action submitted.
4. Corrective action: the service have added the accessories for the outdoor kitchen.
Preventive action: Manager and assistant manager will ensure all the materials will be available in the outdoor area all the time.
5. Corrective action: New Changing mat was added in the changing units in the baby room.

Supporting documentation submitted

1. Photographic evidence of new books.
2. Invoice for new sofa.
3. No evidence submitted.
4. Photographic evidence of props for outdoor kitchen.
5. Photographic evidence nappy changing mat.

Summary Comment

The inspector has reviewed the corrective and preventive actions taken and evidence submitted. The non-compliances identified under Regulation 21 have been addressed and will be reviewed 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

The following measures were observed to safeguard the health, safety and welfare of the children:

General Safety:

- The service had an electronic intercom system to signal entry which was managed by staff to restrict unauthorised persons from gaining access to the premises. Exit was managed by staff, which was an electronic door release system to prevent children from exiting the service unsupervised.
- There were risk assessments in place where the rooms were checked for hazards.
- All cleaning agents and sharp equipment were stored out of reach of the children in locked presses or on high shelves.

Infection Control:

- Thermostatically controlled warm water, liquid soap and single use hand towels were available at all wash hand basins used by the children and the staff members.
- Childrens had individual bed linen was stored appropriately.
- Suitable mattress protectors were available on all of the cots.

Safe Sleep:

- A log was maintained where the colour, breathing and position of sleeping children was checked every 10 minutes.
- Suitable bed linen in line with national guidance on safe sleep was observed to be in use.

Fire Safety:

- Emergency exits were observed to be unobstructed.
- The details of the children on the premises were accurately recorded, which support the safe evacuation of children in an emergency.

Non-Compliance Information

General Safety:

1. An adult's bike was observed to be stored in the entrance hall to the service, which was accessible to children. This posed a potential risk of falling and injuring a child.

Infection Control:

The following increased the potential risk of infection:

2. The nappy changing procedure was not carried out according to the service nappy changing policy and poses a risk of cross-contamination. The following practices were observed:
 - Staff member did not remove and dispose of their gloves immediately after the nappy change and was observed to re-dress children wearing the gloves.
 - A child's hands were not washed after nappy change.
3. The disposal systems in use in the Baby room nappy changing area, and the Montessori room sanitary accommodation were not suitable and increased the risk of cross contamination:
 - The bin in the Baby room nappy changing facility, which also operates as the staff toilet did not have a pedal operated lidded bin for the disposal of waste material. It is acknowledged that nappies were not disposed of in this bin.
 - The pedal on the lidded bin in the Montessori room sanitary accommodation was broke and required hand touch to operate.

4. The sink in the Baby room nappy changing facility, which also operates as the staff toilet was observed to be dirty, with debris visible on the edge of the sink. This increased the risk of cross contamination.
5. Hand washing was not observed to be consistent throughout the service, the children in the Toddler room did not have their hands washed before snack time.

Points 2 and 5 were identified as non-compliance on the last inspection held on the 26 January 2023 and actions put in place failed to prevent a recurrence.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1. Corrective action: the service have provided an outdoor area for parking bikes for staff.
Preventive action: no action submitted.

Infection Control:

2. Corrective action: the service has informed staff about nappy changing practice and ensure staff have read the policies and procedures regarding changing nappies/ infection control.
Preventive action: Manager/Assistant manager will carry out daily, weekly checks in the rooms and premises to ensure staff are following the company Infection control policy and nappy changing best practice.
3. Corrective action: the bins have been replaced with a new one in baby room (changing unit) and Montessori room.
Preventive action: Manager/Assistant manager will carry out daily, weekly checks in the rooms and premises to ensure all equipment is in good condition.
4. Corrective action: the service will ensure to clean the sink area immediately after use to avoid cross contamination.
Preventive action: A staff meeting was held in December where there was a discussion on infection control and nappies changes procedures. Another staff meeting will be held in February 2024.
5. Corrective action: the service will ensure all the rooms follow the infection control policy on hand washing.
Preventive action: Manager/Assistant manager will carry out daily, weekly checks in the rooms and premises: to ensure staff are following company Infection control policy.

Supporting documentation submitted

General Safety:

1. No evidence submitted.

Infection Control:

2. Minutes of staff meeting, including topics and policies covered.
3. Photographic evidence of new bins.
4. Minutes of staff meeting, including topics and policies covered.
5. Minutes of staff meeting, including topics and policies covered.

Summary Comment

The inspector has reviewed the corrective and preventive actions taken and evidence submitted. The non-compliances identified under Regulation 23 have been addressed and will be reviewed on the next inspection.

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 with the last drill dated as having been carried out on the 15 January 2024
 - (b) A record was available for the fire extinguishers and smoke alarms in the premises, and both had been maintained within the previous 12 months. The fire extinguishers were serviced on 4 October 2023 and the smoke alarms were maintained on 1 December 2023.
- (4) A procedure to be followed in the event of a fire was on display in each of the care rooms

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 premises were cleaned, repaired and maintained as required:

1. In the Montessori room, the fridge and the microwave were visibly dirty.
2. In the sanitary accommodation of the Toddler and Montessori rooms the following was observed:
 - The surface of the step used by the children in the Toddler room to use the toilet was worn and did not have a wipeable surface.
 - The surface of the chair in Montessori sanitary accommodation was worn and did not have a wipeable surface.
3. The flooring was not flush to the wall in the Toddler room, with the gaps visible. This limited effective cleaning.
4. The walls in the Toddler room were in poor condition with chipped flaking paint, they were visibly dirty with stains and debris.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(d)

Corrective Action

1. The fridge has been removed from the Montessori room as it is not in use. The microwave was cleaned.
2. The steps in the Toddler room were washed and a new chair was provided for the Montessori toilet.
3. The floor has been repaired.
4. The walls in the room have been cleaned and will be maintained.

Preventive Action

1-4 Manager/Assistant manager will carry out daily checks in the rooms and premises, to ensure the rooms and equipment are in good condition and cleaning procedures are correctly followed.

Supporting documentation submitted

1. No evidence submitted.
2. Photographic evidence of step and chair submitted.

3. Photographic evidence of repaired flooring submitted.
4. Photographic evidence of wall submitted.

Summary Comment

The inspector has reviewed the actions taken and evidence submitted. The non-compliances identified under Regulation 29 have been addressed.

Part VIII - Notifications and Complaints

Regulation 32 – Complaints

- (1) A registered provider shall ensure that the complaints policy of the service specifies-
- (a) the procedure to be followed by a person for the purposes of making a complaint in relation to the service,
 - (b) the manner in which such a complaint shall be dealt with, and
 - (c) the procedures for keeping a person who makes such a complaint informed of the manner in which it is being dealt with.
- (2) A registered provider shall ensure that-
- (a) a record in writing is kept of a complaint made to the provider in respect of the pre-school service, and
 - (b) the complaint is duly dealt with in accordance with the provider's complaints policy.
- (3) A record in writing referred to in paragraph (2)(a) shall-
- (a) include the nature of the complaint and the manner in which the complaint was dealt with, and
 - (b) be open to inspection on the premises by an authorised person.

Compliance Information

(1)(a)(b)(c) There was a complaints policy available detailing the procedures to be followed for making a complaint, the manner in how the service deals with a complaint, and the procedures for keeping the complainant informed of this process.

Non-Compliance Information

The registered provider did not ensure the following:

(2)(b) Although it is acknowledged that there was a record maintained of a complaint that was made, there was no final review with a response given from the registered provider. Following discussion with staff and a review of

documentation the inspectors found that a complaint was not dealt with in accordance with the service complaints policy.

(3)(a) Although it is acknowledged that all records were made available to the inspectors, a complete record in writing was not maintained of the way the complaint was dealt with. The record reviewed did not demonstrate that complaint made had been closed out.

Corrective & Preventive Action submitted by the Registered Provider

Corrective Action

(2)(a)(3)(a)

The registered provider will ensure the complaint policies are followed and each of the customer cases is dealt with in line with the policy.

Preventive Action

The service is responsible for ensuring that all complaints are handled in accordance with policy and procedures. To ensure that everything followed the service policies, the service will monitor complaints on a regular basis and conduct follow-ups. Additionally, customers will be responded within a timely manner in accordance with service protocols. The service will ascertain that the complaints have been closed and that a final examination and maintenance of records will occur.

Supporting documentation submitted

Evidence that management staff have completed training on the complaints policy.

Summary Comment

The inspector has reviewed the evidence submitted. The non-compliance identified under Regulation 32 has been addressed and will be reviewed on the next inspection.