

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2015DY350
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<b>Name of Service:</b>	Ringsend Creche Ltd
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<b>Address of Service:</b>	Thorncastle Street, Ringsend, Dublin 4, Co. Dublin
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<b>Eircode:</b>	D04 P4F3
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<b>Name of Registered Provider:</b>	Karen Talbot
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<b>Service type:</b>	Full Day, Part Time, Sessional
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<b>Date of Inspection:</b>	12/11/2024
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<b>No of pre-school children:</b>	AM	62	PM	48
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<b>Address of the Early Years Inspectorate:</b>	Early Years Inspectorate, Floor 7 Brunel Building, Heuston South Quarter, St John's Road West, Kilmainham, Dublin 8 D08 X01F
<b>Inspection undertaken by:</b>	E. Griffin and C. Harte
<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).

<b>Conditions if applicable</b>	Not applicable.
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### Description of service

Ringsend Crèche is located on a community centre campus in Dublin city centre. The children attend on a full day care, part time or sessional basis from Monday to Friday between 8.15am to 5.30pm. The service participates in the Early Childhood Care and Education Scheme (ECCE) and operates this service from 9am to 12pm Monday to Friday. There are five care rooms in operation for the preschool children; all the care rooms are located on the ground floor. There is an onsite kitchen, a designated cot sleep room and a secure outdoor play area at the rear of the property.

### Staffing

The registered provider does not work in the service and employs twenty-two adults to work in the service. This includes a designated manager who works in a supernumerary capacity, a deputy manager, eighteen childcare staff and two ancillary staff to include a cook and a kitchen assistant. On the day of the inspection the manager, deputy manager, seventeen childcare staff and the two ancillary staff were present.

### 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 areas of governance, health, welfare and development of child and safety. The inspection may also focus on other areas as required. The following regulations were reviewed:

Regulation 9 (1)(2) and (4) Management and Recruitment.

Regulation 11(1)(2) Staffing Levels.

Regulation 15 Record of a Pre-School Child.

Regulation 16 Record in Relation to Pre-School Service.

Regulation 19 (1)(a) Health, Welfare and Development of Child.

Regulation 23 Safeguarding the Health, Safety, and Welfare of Child.

Regulation 25 First Aid

Regulation 26 Fire Safety Measures.

Regulation 28 Insurance.

Regulation 29 Premises.

As a result, the scope of the inspection included the Wobbler Room, Toddler Room and Playgroup Room. A sampling process was used to assess compliance under: Regulation 15, Regulation 16, Regulation 19, Regulation 23 and Regulation 29. However, on inspection additional non-compliances were identified under Regulation 8 Notification of Change in Circumstances and Regulation 30 Minimum Space Requirements. 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.

### Additional Information

An Immediate Action Notice was issued under Regulation 23 to the registered provider on the day of inspection in relation to a safety concern identified.

A response was received on 13 November 2024 from the registered provider which mitigated the risk identified.

Please see details in the body of the report.

### Acknowledgments

The inspectors wish to acknowledge the cooperation of the designated manager, deputy manager, 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 failed to notify the agency of changes made in relation to its registration status. On the day of the inspection there was evidence to show that service was found to be operating outside of its current registration status in relation to the number of children registered and the age profile of the children registered to attend. Evidence by the following observations.

- On the morning of the inspection there were 62 children present at 11.45am. The service is registered to cater for a maximum of 55 children aged 1 to 6 years of age at any one time.
- On review of attendance records, the inspector noted that there were five children who had begun in the service before the children turned 1 years of age since January 2024. The service is registered to cater for children between the ages of 1 to 6 years of age.

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

#### Corrective Action

Management have had meetings with the parents of the children to discuss rotation of the children's hours. The service has since reverted back to the original 55 children on the premises at any one time. Going forward we will start this only when they turn 1 years of age.

### **Preventive Action**

Going forward management will be mindful that the number of children must remain at 55 at any one time until our porta cabins have arrived and been through inspection. The children that had started before they were 1 years old are now over 1 years old in the room and management have held a meeting about starting the settling in period only and once, they have turned 1 going forward to prevent this from happening again.

### **Supporting documentation submitted**

Documentary evidence of the attendance book including the age and number of children.

### **Summary Comment**

The registered provider has addressed the non-compliances identified under Regulation 8.

## 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.*

*(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 as needed.
- (b) The designated person in charge was present when the inspectors arrived unannounced to the service.
- (c) The service had a clear management structure and staff were aware of their own role and responsibilities.
- (2) A conversation with management showed that there are twenty-two adults employed to work in the service. The files of all staff employed were reviewed.
- (a) Twenty-two written and verified references were available from past employers.
- (b) Twenty-two written and verified references were available from a reputable source other than a past employer.
- (c) Garda vetting disclosures were available for all twenty-two adults employed. The service also demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years.
- (d) International Police vetting was not required as there was evidence to show that no staff member had resided outside of the jurisdiction for six months or more as an adult.
- (4) Evidence was available to show that the person in charge and nineteen adults 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.

### Part III – Management and Staff

#### Regulation 11 - Staffing levels

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

### Compliance Information

- (1) There was an adequate number of adults working directly with the children. There were fourteen adults working with sixty-two children in the morning and thirteen adults working with forty-eight children in the afternoon.

(2) The correct adult/child ratio was maintained in the service throughout the inspection at all times. The adult child ratios during the morning session were maintained as follows:

Room 1 – Wobbler Room: There were 2 adults caring for 9 children aged between 1 -2 years.

Room 2 – Playgroup: There were 3 adults caring for 13 children aged between 2 -3 years.

Room 3 – Toddler Room: There were 5 adults caring for 18 children aged between 2 -3 years.

Room 4 – Preschool 1: There were 2 adults caring for 12 children aged between 2 -4 years.

Room 5 – Preschool 2: There were 2 adults caring for 10 children aged between 3-4 years.

The adult child ratios during the afternoon session were maintained as follows:

Room 1 – Wobbler Room: There were 2 adults caring for 9 children aged between 1 -2 years.

Room 2 – Playgroup: There were 3 adults caring for 8 children aged between 2 -3 years.

Room 3 – Toddler Room: There were 5 adults caring for 13 children aged between 2 -3 years.

Room 4 – Preschool 1: There were 2 adults caring for 11 children aged between 2-4 years.

Room 5 – Preschool 2: There was 1 adult caring for 7 children aged between 3-4 years.

In addition, the person in charge was available to provide support to the care rooms as necessary.

### Part IV – Information and Records

#### Regulation 15 – Record of pre-school child

*(1) A registered provider of a pre-school service other than a pre-school service in a drop-in centre or a temporary pre-school service shall ensure that a record in writing is kept in respect of each pre-school child attending the service containing the following particulars:*

- (a) the name and date of birth of the child;*
- (b) the date on which the child first attended the service;*
- (c) the date on which the child ceased to attend the service;*
- (d) the name and address of a parent or guardian of the child and a telephone number where that parent or guardian or a relative or friend of the child can be contacted during the hours of operation of the service;*
- (e) authorisation for the collection of the child;*
- (f) details of any illness, disability, allergy or special need of the child, together with all the information relevant to the provision of special care or attention;*

- (g) the name and telephone number of the child's registered medical practitioner;*
- (h) record of immunisations, if any, received by the child;*
- (i) written parental consent for appropriate medical treatment of the child in the event of an emergency.*

*(3) A record in writing referred to in paragraph (1) or (2) shall be open to inspection on the premises by-*  
*(c) an authorised person.*

### Compliance Information

(1) A sample of ten children's registration records were reviewed as part of the inspection. The registered provider ensured that the information required under (a)-(i) was maintained for each child.

(3) Records were open to inspection by an authorised person. All records requested by the inspection team were available for review.

## Part IV – Information and Records

### Regulation 16 – Record in relation to pre-school service

*(1) A registered provider shall ensure that a record in writing is kept of the following information in relation to the service:*

- (i) details of staff rosters on a daily basis;*
- (j) details of any medication administered to a pre-school child attending the service with signed parental consent;*
- (k) details of any accident, injury or incident involving a pre-school child attending the service.*

*(3) A record referred to in paragraph (1) shall be open to inspection on the premises, and the documents and records referred to in paragraph (2)(a) shall be open to inspection whether on the premises or elsewhere, by an authorised person.*

### Compliance Information

(1)(k) A book which details any accident, injury or incident involving a pre-school child attending the service was inspected on the day. Ten accident/incident records were reviewed, and all the required details were included.

(3) Records were open to inspection by an authorised person. All records requested by the inspector were available for review.

### Non-Compliance Information

(1)(i) The registered provider did not ensure that the full details of a staff roster were available for inspection. The staff roster presented for review on the morning of inspection was incomplete. Information of staff cover for two out of the five rooms was not available.

(J) A sample of seven administration of medication records were reviewed as part of the inspection. There was no parent signature on four of the seven records reviewed. This is at variance to the service policy which states that parents/guardians will be required to sign to say they were informed of the medication administered upon collection of the child. Failure to provide parents/guardians with this information on collection could result in a child receiving an overdose.

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

#### Corrective Actions

(i) Management have been filling in the staff rosters on a daily basis in case there were any changes to staff on any particular day. Management have now reverted back to filling in the staff rosters on a weekly basis and at the beginning of each week. If any staff changes occur, management will make a note of it at the bottom.

(j) Management held a staff meeting and during this meeting management covered the importance of making sure administration of medicines records were filled in correctly to avoid any accidents.

#### Preventive Actions

(i) Filling in staff rosters on a weekly basis going forward to prevent this from occurring again.

(j) Going forward all staff will make sure they are familiar with procedures and make sure the forms are filled out correctly and parents sign them upon collection of their child.

#### Supporting documentation submitted

- Documentary evidence of the new weekly roster.
- Documentary evidence of the correctly filled out administration of medication form.

### Summary Comment

The registered provider has addressed the non-compliances identified under Regulation 16.

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

### Regulation 19 - Health, welfare and development of child

(1) A registered provider shall, in providing a pre-school service, ensure that-

(a) each child's learning, development and well-being is facilitated within the daily life of the pre-school service through the provision of the appropriate activities, interaction, materials and equipment, having regard to the age and stage of development of the child, and

#### Compliance Information

##### (1)(a) Basic Needs:

- The service provided meals and snacks, one of which included a hot meal for the children. All food was prepared on site. At dinner time a chicken casserole with mashed potatoes and carrots was served to the children. Staff discussed how extra portions, and a vegetarian option were available if required. Water was available in each care room for the children to drink.
- There were cosy areas with a soft mat, cushions and books for rest and relaxation present in each care room.
- Identity and belonging were promoted in the Playgroup room. For example, there was a 'Family Wall' display and the children's artwork was displayed throughout the care room.
- Staff in the Playgroup room were observed to support children to resolve conflict over a toy both children wanted. Staff were responsive to both children and encouraged the children to share with their friends.
- Children were encouraged to put on their own coats and hats and scarfs to go outside and staff offered support where required.
- The outdoor play area contained a soft surface and provided opportunities for children to play a range of games and activities. Equipment included a slide, seesaw, ride on toys, pram and dolls. Children were observed to enjoy outdoor play activities including riding on ride-on toys and running which supported gross motor development.

### Non-Compliance Information

1. A child in the wobbler room was observed with nasal discharge on their face between 10.22am and 10.32am. A Staff member was observed to give the child a bottle of milk to drink however the staff member failed to attend to the nasal discharge during this time which was required for the child's comfort and infection control purposes.
2. Children were not supported to engage in mealtimes in a structured and timely manner evidenced by the following.
  - Children were observed to eat snack at 11.30am. Staff advised snack is normally served at 10am but was delayed on the day of inspection and advised that the children had eaten breakfast on arrival at the service at 8.15am. Meals and snacks should be served no more than 3 hours apart.
  - The snack provided at 11.30am consisted of raisins which was observed being placed directly into the children's hands. Children were not provided with plates or an opportunity to sit and enjoy the snack.
  - Seven children were placed in low level feeding chairs and two children were placed in child sized chairs at 12.14am for dinner time. At 12.25pm the children appeared restless as the dinner had not been served. Staff gave each child a sensory toy to play with. One child fell asleep in the chair at 12.26pm, two children were observed crying and children were observed trying to get out of their chairs. At 12.30pm the staff member took the children out of their chairs and gave a child who was crying a bottle of milk. Dinner was served to two of the children at 12.41pm and a child who was last to be served their dinner was observed to take a spoonful of food off another child. An additional staff member was required in order to support the two staff members present who were assisting the children with feeding.
3. There was a lack of emphasis on the importance of promoting a sense of belonging and connectedness in the Wobbler room. Materials to reflect the children's important relationships were absent such as pictures or references to family and home life or a birthday wall display. This did not support a sense of belonging for the children or the unique transition for the children from home into the service.

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

#### Corrective Actions

1. At the service staff meeting management covered the importance of maintaining general hygiene at all times. It was made very clear that it is unacceptable to leave any child with nasal discharge and it should be cleaned appropriately as soon as it is noticed.
2. At the service meeting management and staff discussed that although there are times that meals can be delayed a little, it is up to the staff to make sure children do not go longer than 3 hours without having something to eat. Management and staff discussed how important it is to assist children during mealtimes so that they can enjoy their meals. This includes being offered plates and an opportunity to enjoy their snack and it was much more sanitary for the child. All staff have been advised that no children should be left sitting in highchairs except when they are eating or taking part in an activity such as painting using their tabletop.
3. All staff were reminded of the importance of identity and belonging. How helping a child feel a sense of belonging encourages their transition from home to our service. Management and staff discussed different ideas for family walls, so the children see familiar faces daily. Staff in the wobbler room are in the process of creating a fabulous new family wall for them to enjoy with the help of their parents.

#### Preventive Action

1. All staff have read over the service infection control policy as a refresher and going forward will be better prepared for all children's hygiene.
2. Going forward all staff have discussed at the service meeting ways in which we they can prevent these issues occurring again. Staff will take responsibility for children not going over 3 hours without something to eat, children will be provided with plates during these times and highchairs only will be used when necessary. Management will also look at the ratios in the room daily during feeding to see if an additional member of staff is needed to assist.
3. Going forward all staff in all rooms have been reminded of the importance of bringing home life and family into their rooms to support a sense of belonging for the children.

#### Supporting documentation submitted

No supporting documentation submitted.

## Summary Comment

The registered provider has addressed the non-compliances identified under Regulation 19.

## 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 entrance to the service was secure on arrival to the service. There was a reception area available, and a second door provided a containment area and prevented visitors leaving the reception area and accessing the care rooms without the knowledge of staff. Staff were observed to attend the door to allow access to visitors.
- The garden area was securely gated to prevent children leaving the area unsupervised.
- Windows were open to allow fresh air to circulate.

### Infection Control:

- Warm water and dispensed soap and paper handtowels were available to facilitate adequate hand washing.
- Cot mattresses were waterproof which provided an easy to clean surface.

### Safe Sleep:

- An ambient temperature of 18-22°C was maintained in rooms where children were sleeping.
- Adequate space of 50 cm was provided between cots and sleep mats so that staff can safely access a child if required,

### Fire Safety:

- On the day of inspection, it was observed that all emergency exit doors were clear from obstruction. This helped ensure the safe evacuation of children and staff in the event of an emergency evacuation

### Non-Compliance Information

#### General Safety:

1. Cleaning agents were observed to be accessible to children in both the sanitary accommodation and in one of the care rooms. A cleaning agent was observed to be stored in an unlocked press in an area of the care room where the staff member did not have direct vision of, and which was easily accessible to the children aged 1 to 2 years present. An Immediate Action Notice was issued to the registered provider on the day of the inspection. A response was received from the person in charge on 12 November 2024 which mitigated the risks identified.
2. The kitchen area was accessible to children as the door remained open between 9.40am to 10.30am. In addition, the care room opposite the kitchen did not have the door closed. This posed a risk of injury to children if they left the care room unsupervised and accessed the kitchen.
3. A small mirror on the wall in the Wobbler room was observed to be broken. This posed a risk of injury.
4. Chairs were observed to be stacked in groups of seven both in the toddler room and the outdoor play area while children were playing. This posed a risk of injury.
5. There was a circular piece of flooring which was observed to have lifted which caused the flooring in the outdoor play area to be uneven. This posed a tripping hazard.

#### Infection Control:

6. Three bins that were not foot pedal operated were observed in the sanitary area. Foot pedal operated bins are required for the hygienic disposal of contaminated materials.
7. The practices observed in Wobbler room and the Playgroup room did not ensure that effective handwashing measures were in place to reduce the spread of inspection. Evidenced by the following observations.
  - In the Wobbler room the children did not have their hands washed before or after nappy changing, before snack time, before and after dinner time.
  - In the Playgroup room children did not have their hands washed before snack time.

This practice is at variance with the service infection control policy which states children's hands will be washed after nappy changing and before eating.

8. Nappy changing was not observed to be in line with best practice. A sample of four nappy changes were reviewed and the following was observed:
  - The four children did not have their hands washed following nappy changing.
  - The staff member did not wash their hands following the four nappy changes.

- The staff member disposed three of the used nappies in the same nappy sack which was hung on the wall just above the nappy changing area.
- Following one of the nappy changes the staff member was observed to put on the clean gloves and disinfected the nappy changing mat. The staff member then completed the next nappy change without washing her hands and changing the gloves for a fresh pair after cleaning the nappy changing mat.
- A staff member in another room returned to the care room wearing the same apron after completing a nappy changing and took the next child to the changing bay without changing her apron in between nappy changes.

All of the above observed practices posed a risk of cross infection.

### Safe Sleep:

The following unsafe sleep practices were observed:

9. The registered provider did not follow Tusla's "Guidance for the Early Learning and Care sector on sleep provision for children under 24 months". Two children under 2 years of age in the Toddler room were not provided with a mattress with a minimum depth of 6cm to sleep on but was observed to sleep on a low-level stackable bed at nap time. An individual sleep plan was not available for the two children. Sleep plans should include an assessment of the individual child's sleep routines and sleep requirements, to be determined and agreed in collaboration with parents/guardians and consideration of the child's developmental readiness to move from a cot to a floor bed.
10. A child aged between 1 to 2 years who was observed to fall asleep in the cosy area of the Wobbler room during dinner time at 12.38pm. The staff members were observed to have their backs to the child and not to carry out any physical sleep checks on the child. The cosy area was surrounded with pillows and this area was not suitable for safe sleeping. The child was only moved to a cot when disturbed by another child at 1.01pm.
11. Sleep checks were not recorded contemporaneously in the wobbler cot room. A staff member who was not present in the room was observed entering the room and filling in the sleep records. Sleep records which include the children's colour, breathing and position should be carried out every 10 minutes and recorded contemporaneously as per safe sleep guidelines.
12. Two cots were observed with bottles present while the children were sleeping. This practice is at variance with the service safe sleep policy states bottles are not permitted in the cots. This posed a safely sleep hazard.

### Fire Safety:

13. Children attendance books were not monitored to ensure staff knew how many children were present in the care rooms. As evidenced as follows:

- A child who was observed to be present in the Toddler room at 10.49am was not marked in the children's attendance records as present.
- A child who was observed to be present in the Playgroup room at 10.15am was not marked in the children's attendance records as present.
- There was evidence that one child who was present in the afternoon at 1.33pm was not marked in the children's attendance recorded as present in the Preschool room.
- There was evidence that one child who began their settling in period on the 24 October 2024 did not have their name recorded in the children's attendance records in the Wobbler room. Staff discussed how this child attended the service two times a week between the hours of 8.15am to 1.30pm.

Staff confirmed these attendance books are used in the event of an emergency. This reduced the effective evacuation in the event of an emergency.

### Action submitted by the Registered Provider

#### General Safety:

#### Corrective Actions

1. All staff have been reminded of the dangers of cleaning agents being accessible to children and were remind of the importance of storing them in a safe, secure environment.
2. All staff were reminded to be vigilant to the kitchen/care room door being left open. All staff were advised to close the kitchen door should they see it is open or ajar.
3. The broken mirror on the wall in the Wobbler room has been removed and disposed of.
4. Staff were advised of the dangers and risks of stacking chairs too high and have been advised not to stack any of the chairs in the rooms and in the outdoor play area.
5. Management had a meeting with the manager of the community centre who is responsible for structural work on the creche and was assured that the uneven surface in the outdoor play area will be assessed and repaired as needed.

## Preventive Actions

1. Locks have been placed on the lower level of cupboards to assist with this issue going forward.
2. All staff have been told during the staff meeting about the importance of keeping these doors closed going forward.
3. Going forward all rooms will do risk assessments where needed to prevent anything broken remaining in the room.
4. No chairs will be stacked in any of the rooms or outdoor areas going forward.
5. Management and staff will do risk assessments of our outdoor play area when needed to prevent situations occurring.

## **Infection Control:**

### Corrective Actions

6. Any bins that were damaged or not foot pedal bins have been replaced with new foot pedal bins.
7. All staff were advised of the importance of efficient hand washing before and after nappy changes, before and after snack times and before and after dinner time to control and minimise the risk of infection.
8. During the most recent staff meeting all staff were advised on the correct change, clean gloves for each nappy, clean apron for each nappy, disposing the soiled nappy in a nappy sack and into the nappy changing bin. The changing area should be cleaned and disinfected after each nappy change. It was explained to staff that these procedures minimise the risk of cross contamination. Staff were advised to read through the infection control policy.

### Preventive Actions

6. Going forward to prevent this from occurring management and staff will complete risk assessments in rooms and corridors were needed.
7. All staff were encouraged to refresh themselves with our infection control policy and to prevent this from occurring again.
8. All staff have been advised on the correct measures for best practice for nappy changing and to prevent the risk of cross infection.

**Safe Sleep:**

**Corrective Actions**

9. If children under 2 years old are not sleeping in a cot we will carry out a risk assessment and then if it is deemed that the child under two is suitable to sleep on a floor mat, we will develop an individual sleep plan in collaboration with parents and we will provide the child with a mattress with a minimum depth of 6cms to sleep on as per Tusla’s “Guidance for the Early Learning and Care sector on sleep provision for children under 24 month”.
10. All staff have been reminded that should a child fall asleep they are to be safely carried to sleep in a suitable sleep area cot/bed depending on their age and whether an individual sleep plan has been put into place.
11. Staff were reminded of the absolute necessity of physical sleep checks on all sleeping children. Staff were reminded of the importance of carrying out sleep checks and filling in safe sleep charts every 10 minutes on sleeping children to minimise any risk factors.
12. Staff were advised that it is against policy and safe sleep to give children bottles in cots. They were advised that it poses a risk to the children and were advised to reread the safe sleep policy.

**Preventive Action**

As a preventive action for 9,10,11 and 12 staff were advised to reread the safe sleep policy.

**Fire Safety:**

**Corrective Action**

13. At a staff meeting after the service had its inspection staff were reminded that roll books are not only used to simply record who is in attendance that day but also in the event of a fire this is the document we use for a head count, they were advised to reread the fire safety policy and procedures.

**Preventive Action**

13. Staff have been advised to reread the fire safety policy and procedures.

**Supporting documentation submitted**

**General Safety:**

- Photographic evidence of the lock on press and cleaning agents removed and stored up high inaccessible to children.

**Infection Control:**

- Photographic evidence of new pedal bins.

**Safe Sleep:**

- No supporting evidence submitted.

**Fire Safety:**

- No supporting evidence submitted.

**Summary Comment**

The registered provider has addressed the non-compliances identified under Regulation (23) for points 1,2,3,4,6,7,8,9,10,11,12 and 13. The non-compliance for point 5 remains outstanding but it is acknowledged that there is a plan in place to rectify this issue. This will be reviewed on the next inspection.

**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**

(1) The service provided evidence that an adult trained in First Aid Response was available at all times to the children attending the pre-school. Five adults trained in first aid response were present and working with the children on the day of inspection.

(2)(a) and (b) A suitably equipped first aid box was available and were safely stored in an easily accessible and conspicuous positions in the two care rooms of the service.

### 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.
- (2) The record referred to in paragraph (1) shall be open to inspection by-
- (c) an authorised person.
- (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) Documentation was available to demonstrate that fire drills were practiced monthly. The last fire drill took place on 22 October 2024.
- (b) A record of servicing and maintenance for the firefighting equipment and smoke alarms showed that the fire extinguishers were serviced on 12 November 2024 while the smoke alarms were last serviced on 10 September 2024.
- (2) Records were open to inspection by an authorised person. All records requested by the inspector were available for review.
- (4) Procedures detailing the steps to take in the event of a fire were displayed throughout the service, in communal areas and care rooms.

### Part VI - Safety

#### Regulation 28 - Insurance

*A registered provider shall ensure that the pre-school service is adequately insured.*

#### Compliance Information

The registered provider ensured the service was insured. The insurance certificate provided for review showed cover for a full day service with up to 65 children insured and an expiry date of 27 March 2025.

### Part VII - Premises and Space Requirements

#### Regulation 29 - Premises

*A registered provider shall ensure that the premises of the service are-*

- (c) kept adequately lit, heated and ventilated*
- (d) cleaned, maintained and repaired, as required, and*
- (e) equipped with adequate and suitable sanitary facilities.*

#### Non-Compliance Information

(c) The fan extractor on the wall above the sink in the Playgroup room was observed full of dust and required cleaning in order for the fan to work effectively.

(d) The inspection team observed that the premises was not cleaned or maintained to provide a clean and safe environment for children. Evidenced by the following:

1. The wall in the Playgroup wall was observed to be unclean and unkept. There were dirt marks on the wall and part of the plaster was cracked with paint and the plaster observed to be peeling off.
2. The seal around the sink in the playschool room was damaged and did not provide a waterproof seal and effective cleaning could not be maintained.
3. The counter by the sink area in the Wobbler room and Toddler room was worn with the paint peeling away. Similar non-compliances were observed on the previous inspection in March 2022 and the preventive action had not been sustained.
4. The shelf under the sink area in the Playgroup room, the paint was observed to be peeling the chipboard was exposed.
5. The door under the sink area in the Toddler room was observed to be broken and hanging off its hinges.
6. In the sanitary area, the paint on the radiator cover was peeling off and the radiator was observed to be rusty.

(e) There were insufficient nappy changing facilities provided for the number of children attending the service on the day of the inspection. There were 9 children in the wobbler room, 18 children in the toddler room and 5 children in the Playgroup room, a total of 32 children, who required the use of nappy changing facilities. One nappy-changing unit, including a wash-hand basin and changing mat is required for every 11 children in nappies. On the day of the inspection. This non-compliance was observed on the previous inspection in March 2022 and the preventive action had not been sustained.

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

#### Corrective Action

(c) The fan extractor in the playgroup room has been cleaned and cleared of all dust ensuring it works efficiently.

(d) Management have had a meeting with the manager of the community centre which is responsible for all structural work in the creche. She has advised the service that the areas noted below (1-6) as being non-compliant will be repaired by the maintenance department of the community centre as soon as possible.

1. Including the wall in the playgroup room.
2. Including the seal around the sink in the playschool room.
3. Including the counter by the sink area in the Wobbler room and Toddler room.
4. Including the shelf under the sink area in the playgroup room.
5. Including the door under the sink area in the Toddler room.
6. Including the the radiator cover in the sanitary area.

(e) Management have ordered a wall mount nappy changer to be installed which will mean we will then have sufficient nappy changer for the number of children we have in attendance requiring nappy changing facilities.

#### Preventive Action

(c) Staff in the room will observe this fan into their cleaning procedures going forward.

(d) (1-6) Risk assessments of all rooms will be included going forward to prevent this from occurring again.

(e) Management will make sure that when a child is starting with us and requires nappy changing facilities that we are not already over our ratios when it comes to our nappy changing facilities in the building.

#### Supporting documentation submitted

- Photographic evidence of the fan cleaned.
- Documentary evidence of new wall mount nappy changer purchased.

### Summary Comment

The registered provider has addressed the non-compliances identified under Regulation (29)(c) and 29(e). The non-compliance for points 29(d) 1 to 6 remains outstanding but it is acknowledged that there is a plan in place to rectify these issues. They will be reviewed on the next inspection.

### Part VII - Premises and Space Requirements

#### Regulation 30 - Minimum space requirements

*(1) Subject to paragraphs (2) to (6), a registered provider shall ensure that adequate clear floor space is available in the premises for the work, play and movement of children attending the pre-school service.*

### Non-Compliance Information

(1) There was insufficient space available in the wobbler room to accommodate the number of children allocated to this room.

- The number of children recorded in the Wobbler care room exceeded the minimum floor space requirements. There were nine children aged between 1 to 2 years present in the Wobbler care room on the day of the inspection. On review of the children's attendance records there were ten children aged between 1 to 2 years registered to attend this room on a fulltime basis from the week of the 2 September 2024.

Room Name	Floor space required per child	Floor space available as measured by inspectors
Wobbler Room	2.8 sqm per child (aged 1 to 2 years)	16.093 sqm which allows for a maximum of 6 children aged 1 to 2 years old

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

#### Corrective Action

After the service had its inspection management had a meeting with the parents of the children to discuss rotation of the children's hours. This means the wobbler room is now within the correct number of children for this area's floor space.

#### Preventive Action

Management will pay better attention to the room floor space required per child going forward to make sure that there are no more than 6 children in the wobbler room at any one time.

## **Supporting documentation submitted**

Documentary evidence of the attendance book.

## **Summary Comment**

The registered provider has addressed the non-compliance identified under Regulation 30.