

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015FL038
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Name of Service:	Tigers Childcare
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Address of Service:	College Business & Technology Park, Blanchardstown, Dublin 15, Co. Dublin
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Name of Registered Provider:	Karen Clince
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Service type:	Full Day, Part Time, Sessional
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Date of Inspection:	28/08/2023
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Date 2 of Inspection:	29/08/2023
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No of pre-school children Day 1:	AM	80	PM	69
No of pre-school children Day 2:	AM	87	PM	79

Address of the Early Years Inspectorate:	Early Years Inspectorate, Child and Family Agency, Unit 4&5 Nexus Building Block 6A, Blanchardstown Corporate Park, Dublin 15.
Inspection undertaken by:	E Hosford, Á Dunne and C Harte
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

Tigers Childcare is one of 13 services operated by the registered provider. The service operates from a two-storey purpose-built building located in a business and technology park in Blanchardstown, Dublin 15. The childcare services available include a sessional Early Education and Childhood Care (ECCE) service for children aged between 2 years 8 months to 5 years from 9am to 12pm during school term time and a full day care service for children aged from birth to 6 years from 7:30am to 6:30pm Monday to Friday. A school age service is also provided for children of school going age.

There are 8 care rooms in the service, a reception area, five sleep rooms, a kitchen for the preparation of meals for the children and an outdoor area to the side and rear of the building.

The 8 care rooms in use on the day of inspection were:

Junior Discoverers 1 (1 -2 years)

Junior Discoverers 2 (0- 2 years)

Senior Discoverers (1-2 years)

Explorers (1-2 years)

Senior Explorers (2-3 years)

Active Cubs (2-3 years)

Senior Active Cubs (3-5 years)

ECCE and School Age Care (5-10 years)

Staffing

The registered provider employs 33 staff to include the designated person in charge, the deputy person in charge, a Quality Development Manager, 2 cleaning assistants, a chef and 27 childcare staff. The designated person in charge, deputy person in charge and the Quality Development Manager facilitated the 2 day inspection.

On the first day of the inspection there were 19 adults working with 80 children aged from birth to 5 years and 2 adults working with 15 school age children aged from 5-10 years.

On day 2 of the inspection there were 23 adults working with 87 children aged from birth to 5 years and 1 adult working with 8 school age children aged from 5-10 years.

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

The unannounced inspection focused on an examination of compliance under The Child Care Act 1991 (Early Years Services) Regulations 2016.

Regulation 9 Management and recruitment (1)(a)(b)(c), (2)(a)(b)(c)(d),(3), (4), (6)(b).

Regulation 11 Staffing Levels (1)(2)(8)(a),

Regulation 23 Safeguarding Health, Safety and Welfare of child.

A sampling process was used to assess compliance under regulation:

23 Safeguarding Health, Safety and Welfare of Child.

Regulation 9 Management and Recruitment and regulation 11 Staffing Levels were assessed across all the rooms.

Inspection findings are documented in the inspection report which is first issued in draft format to the service with an opportunity to respond to any findings. Where statutory requirements are identified as not being met, the registered provider must demonstrate how they have rectified the non-compliance and will prevent any non-compliance from re occurring. The Corrective Action and Preventive Action plan (CAPA) will be used to inform decisions about compliance with regulatory requirements. Where the registered provider fails to meet the statutory requirements an escalation process may be commenced.

The inspectorate reserves the right to edit responses received for reasons including clarity, completeness, and compliance with administrative and legal processes.

The contents of the report are compiled by the inspectorate body.

Acknowledgments

The inspectors wish to acknowledge the cooperation of the designated person in charge, the deputy person in charge, the Quality Development Manager, staff, and children who were present during the two days of 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.*

(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.

(6) Paragraph (4) shall not apply before 1 September 2021 to a person who-

(b) is in possession of a letter from the Minister confirming that paragraph (4) shall not apply to him or her before that date.

Compliance Information

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

(b) The designated person in charge was on the premises when the inspectors arrived unannounced and was present for the duration of the two days of inspection.

(2) The staff files of 33 employees working within the service were reviewed.

(a) The following references were available from a past employer.

- Two validated written references were available for 13 staff members.
- One validated written reference was available for 15 staff members.

(b) The following references were from a source other than a past employer.

- Two validated written references were available for 4 staff members.
- One validated written reference was available for 16 staff members.
- One written reference was available for one staff member.

(c) Garda Vetting disclosures were available for 33 staff members.

(d) International police vetting was available from 14 counties in respect of 13 staff members who had resided outside of the jurisdiction for more than 6 months as an adult.

(4) On review of documentation available 29 staff members working with the children had evidence to demonstrate that they held a major award in Early Childhood Care and Education at Level 5 or above on the National Framework of Qualifications.

(6)(b) One staff member held documentary evidence to demonstrate that they had been granted a temporary exemption from the requirement under regulation 9 (4) which would expire on the 31 August 2023.

Non-Compliance Information

(2)(b) One written reference from a source other than a past employer did not have evidence available to demonstrate that it had been validated by the service.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(2)(b) The service has stated that the reference was verified by the Deputy Manager over the phone on the 7th September 2023 and followed up via email on the 19th September 2023. All references will be verified prior to any new colleagues starting as outlined in our recruitment policy.

Supporting documentation submitted

(2)(b) Photographic evidence Reg 9; Reference Verification.

Summary Comment

The registered provider has addressed the non-compliance as identified.

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.

(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,

Compliance Information

(1) The minimum ratio of adults to children was maintained as the table below demonstrates.

Room Name	Age profile	Day 1	Day 2
Junior Discoverers 1	1-2 years	2 adults with 3 children	2 adults with 4 children
Junior Discoverers 2	0-2 years	3 adults with 8 children	2 adults with 11 children
Senior Discoverers	1-2 years	2 adults with 5 children	3 adults with 7 children
Explorers	1-2 years	3 adults with 14 children	4 adults with 12 children
Senior Explorers	2-3 years	3 adults with 15 children	3 adults with 14 children
Active Cubs	2-3 years	3 adults with 17 children	4 adults with 19 children
Senior Active Cubs	3-5 years	2 adults with 18 children	4 adults with 15 children
ECCE and School Age Care	5-10 years	3 adults with 15 children	1 adult with 5 children (4-5 years) 1 adult with 8 (5-10 years).

(2) The registered provider ensured that there were an adequate number of adults working directly with the children attending the service.

On the day 1 there were 19 adults working with 80 children aged from 0-5 years and 2 adults working with 15 children aged from 5-10 years.

On day 2 of the inspection there were 23 adults working with 87 children aged from 0-5 years and 1 adult working with 8 children aged from 5-10 years.

(8)(a) On review of the service roster it was observed that two adults were on the premises during the operation of the service.

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:

- Entry to the service was monitored by staff and controlled by an electronic system. Children were supervised while in the reception area and exit from the service was restricted by a lock which was positioned out of children's reach. The outdoor area was secured with a locked gate and fence.

Infection Control:

- Children were observed being encouraged and assisted to wash their hands before meals and snacks.
- Children's cots and low beds were placed with the recommended 50cm apart to reduce the potential risk of cross infection.

Safe Sleep:

- Children were facilitated to sleep in standard cots and low beds with staff completing ten minutes sleep checks on each child to include their colour, breathing, position and room temperature. The temperature of the sleep rooms while children slept was maintained within the recommended temperature of 16-20 °C. For example. In the Junior Discoverers 1 cot room the temperature was recorded as 20°C at 12:27pm, and in the Junior Discoverers 2 the temperature was 20 °C at 1:42pm.

Fire Safety:

- Emergency fire exits and routes were observed to be clear of furniture and equipment, this increased the ease of exit in the event of an emergency.

Non-Compliance Information

General Safety:

1. On day 1 of the inspection, it was observed that while children from three care rooms transitioned to their new care rooms from 9:30am to 3:30pm their attendance in the new care room was not recorded or documented. This reduced the effective and safe evacuation of the children in the event of an emergency.
For example:

- At 11:50am there were 16 children present in the Active Cubs room with 2 staff members. Ten of the children had moved from the Senior Explorers room at 9:30am that morning, however they were not recorded in the Active Cubs electronic application. Staff did have a printed list of all the children that were moving, however, some of the children were not present that day.
 - At 12:29pm there were 3 children in the Junior Discoverers room, however, on review of the electronic application 6 children were recorded as being present in the room.
 - At 2:10pm there were 8 children in the Junior Discoverers 2 care room, however, there were 12 children signed in as being present in the electronic application.
2. The ability of staff to care for a child with a food intolerance was limited due to poor communication within the service as evidenced by the following:
- The child enrolment form for one child stated that they had a food intolerance but when the inspectors spoke to the staff caring for the child, they were unaware of the severity of the intolerance and informed the inspector that there was a care plan and medication in place for the child in another care room within the service. Management of the service later informed the inspector that there was no care plan or medication due to the mildness of the food intolerance. However, this was not known by the staff caring directly for the child.
3. It was observed that children accessed the sanitary facilities of the Active Cubs room unsupervised. The children had access to an unlocked cupboard which contained two hazardous cleaning products and an unlocked drawer that contained an open bottle of hygiene liquid. This increased the potential risk of poisoning and injury to the children.
4. Areas within the outdoor areas were observed to potentially cause an injury to a child. For example.
- At 11:58am four children from the Active Cubs room removed a loose panel from a low fence and exited the area without the knowledge and supervision of the staff member. The children spent two minutes in the unsupervised outdoor space before the staff member saw them and asked them to return.
 - Loose and exposed ground mesh used under tree bark in the Active Cubs outdoor area increased the potential risk of a child tripping.
 - Three accessible wooden slats in a low fence were observed to be unstable and contained exposed nails.
 - A bike was observed to have exposed cables and wires which could cause injury to a child. It is acknowledged that once the inspector observed the damaged bike staff removed the item from the outdoor area.

- A plastic seat used by the children was observed to be cracked and broken, this increased the potential risk of injury to a child.

Infection Control:

5. During the two days of the inspection it was observed that children aged between 2 to 3 years of age played in an outdoor area that contained animal excrement. Excrement was observed in the grass, on the concrete pathways and in rubber matting at the entrance door from the outdoor area into the care room. This increased the potential risk of cross infection and safety for the children. On review of documentation available it was demonstrated that staff had completed a safety check of the outdoor area on both days of the inspection, however, the presence of excrement was only recorded on the second day. No actions or evidence of staff removing the excrement were observed or documented following the identification on the second day. On verbal discussion with the person in charge at the feedback meeting they outlined the current measures in place to eliminate the excrement, these included animal proof fencing and regular grass cutting.
6. The sanitary facility used by the Active Cubs was not maintained as per the service policy on infection control as the following was identified.
 - A brush used to clean the children's toilets was stored on a handwashing sink which was used by staff and children.
 - A cupboard door ledge was observed to have dust and debris present.
7. Three nappy changes were observed, staff did not carry out the procedure as per the service policy and best practice guidelines. This increased the potential risk of cross infection.
 - Three staff members retained their aprons for the duration of the procedure.
 - Two staff members retained their gloves for the duration of the procedure.
 - Two children did not have their hands washed after their nappy change and before returning to the care room.
8. Four hand touch nappy disposal systems were in use within the service nappy changing areas. This equipment is at variance with the recommendations issued by the Office of the National Clinical Director Health Protection, HSE Health Protection Surveillance Centre due to the increased risk of cross infection.
9. The temperature of the water available to the children at the wash hand basins in three care rooms was cold, this reduced effective hand washing technique.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1. In response the service has stated that when the inspector brought the matter to management's attention, the Deputy Manager immediately amended the electronic application to add each child to their new room and mark the child as arrived in their new room at 9.30. Our arrivals and departures policy outlines the correct procedure for recording children's attendance on our electronic application when transitioning between rooms. Management will ensure that children are assigned to their new room before being physically moved going forward.
2. Colleagues caring for the child were aware of the child's food intolerance. To ensure further clarity, the child's existing allergy notice on display was further updated to include possible signs and symptoms in the event that the child has a mild food reaction while in our care. Additionally, all colleagues were informed again of these signs and symptoms by the centre manager. The Food, nutrition and health promotion policy was updated to include a provision to ensure that possible signs, symptoms of food allergies and intolerances are displayed in children's rooms and that all colleagues are updated accordingly.
3. The registered provider has stated that the cleaning products were removed from the press. Child protective safety locks are securely in place on all low-level cupboards not for children's use. All staff have been briefed on safety measures and the importance of using the locks provided. Photographic submitted. All team members were briefed on the importance of ongoing vigilance in respect of daily safety protocols to include keeping cleaning agents out of children's reach, at our team meeting held 07/09/23. The management team will carry out regular checks in person to ensure that the children's environment is safe.
4. To address the non-compliances the service has stated that;
 - The fence has since been replaced to ensure children cannot exit the area unsupervised. Photographic evidence submitted.
 - The mesh on the ground was in the children's outdoor play area was covered with bark. Photographic evidence submitted.
 - The fence in the children's outdoor play area has been replaced since the inspection Photographic evidence submitted.
 - Once brought to our attention, the bike was removed on the day of inspection.

- The plastic seat was discarded on the day of inspection.

All team members were briefed on the importance of completing daily safety checklists and ongoing vigilance in respect of daily safety protocols to include broken fixtures and equipment, at the team meeting held 7th September 2023 and the management team will continue to support and oversee the completion of this task.

Infection Control:

5. In response to the non-compliances the service has stated that to eliminate any potential risk of cross infection the following corrective actions were taken.
 - Extra animal proofing fencing was installed.
 - Grass cuts are carried out more frequently to eliminate the presence of excrement.

Colleagues were briefed and reminded of their responsibilities to:

- Pick up excessive excrement daily in accordance with our daily safety checks.
- Supervise children vigilantly when outside so that children do not handle any excrement.
- Continually keep up awareness among children of the dangers of touching the excrement and to embed a practice of thorough handwashing by children and adults on re-entry indoors.

The centre manager briefed all our colleagues on their responsibility in eliminating any potential risk of infection the team meeting held on September 7th, 2023. The management team will continue to support and supervise the daily checks and that team members carry out their responsibility in relation to any potential risk posed by rabbit population.

6. Following the inspection the service stated that;
 - The toilet brush was discarded immediately.
 - The cupboard door ledge was cleaned, and cleaning protocols were revisited at the team meeting held on September 7th 2023, along with the infection control policy and colleagues were reminded to take note of the daily cleaning lists to ensure all areas were covered, the management team will support and supervise the completion of these.
7. In response to the non-compliance the service has stated that the nappy changing policy was revisited with all team members during our team meeting. A skills demonstration was presented by a member of the management team using the aid of a doll. The following two weeks staff were observed facilitating a nappy change to ensure the step-by-step procedure was being followed. A task analysis visual aid is being drafted to assist colleagues with the nappy changing procedure. The management team will continue to support and oversee the correct nappy changing procedure is being adhered to.

8. The service has stated that the existing nappy disposal bins have been replaced with foot pedal operated bins in the changing areas as per the nappy changing policy, the existing nappy disposal bins have been replaced with foot pedal operated bins in the changing areas.
9. Following the inspection the boiler in the centre has been replaced providing all hand basins with warm water. Water temperatures are monitored and recorded daily.

Supporting documentation submitted

General Safety:

1. Photos of application (app) in use, service Arrivals and-Departures policy, staff meeting 7 September 2023.
2. Photographic and documentary evidence.
3. Photographic Evidence
4. Photographic evidence submitted of;
 - Replaced fence.
 - Photographic evidence of mesh ground covered.
 - Risk assessment / outdoor daily checks.
 - Staff Meeting sign in sheet.

Infection Control:

5. Photographs of repaired fence and staff meeting.
6. Team meeting sign in sheet.
7. Staff training sign in sheet.
8. Photographic evidence submitted.
9. Delivery docket for new boiler and email from the plumber. Photo of water temperature records.

Summary Comment

The registered provider has addressed the non-compliances as identified.