

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier: TU2015FL081

Name of Service: Daisy Days Montessori

Address of Service: 42 Whitestown Walk, Blanchardstown, Dublin 15, Co. Dublin

Eircode: D15 AN2K

Name of Registered Provider: Laura Day

Service type: Part Time, Sessional

Date(s) of Inspection: 16/10/2024

No of pre-school children:	AM	12	PM	7

Address of the Early Years Inspectorate: Early Years Inspectorate
2nd Floor, Unit 4/5
The Nexus Building
Blanchardstown Corporate Park
Ballycoolin
Dublin 15 | D15 CF9K

Inspection undertaken by: T. Nelson

Title: Early Years Inspector

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

Daisy Days Montessori is located in a residential area of Dublin 15 and is registered to provide early childhood care and education to a maximum of 14 children aged 2 to 6 years old, Monday to Friday. The service is registered to provide sessional care from 9.30am to 12.30pm and as a registered school aged childcare service in the afternoon.

Daisy Days Montessori operates from a converted residential dwelling and currently has one care room on the ground floor of the premises. There is a kitchen and sanitary facilities located on this floor. A fully enclosed outdoor area is located to rear of the premises.

Staffing

There are currently four staff employed by the service including the registered provider and two staff who have a minimum of Level 5 Qualification, and a relief staff member. There were four adults present on the day of the inspection including the deputy person in charge and a student.

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)(6) Management and Recruitment.
- Regulation 11(1),(4) Staffing Levels.
- Regulation 16(1) Records in relation to the Preschool Service.
- Regulation 21 Equipment and Materials.
- Regulation 23 Safeguarding the Health, Safety and Welfare of the Child.
- Regulation 25 First Aid.

However, on inspection additional non-compliances which posed a risk were identified under Regulation 8, Regulation 19 and Regulation 29. These findings are outlined within the relevant regulations within this report.

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

- Regulation 16(1)(h)(i)(j)(k) – Records in relation to Preschool Service.

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

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

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

Acknowledgments

The inspector wishes to acknowledge the cooperation of the deputy person in charge, staff and children who were present on the day of the inspection and the registered provider who was present for a period of time on the morning 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 service was found to be operating outside of its registration status which detailed the opening hours as 9.30am to 12.30pm. Children were present when the inspector arrived at the premises at 9.30am, and staff reported they had been present since 9.00am. Seven children remained until 1.00pm.

Discussion with staff and a review of the attendance log confirmed the opening hours as 9.00am to 1.00pm.

Corrective & Preventive Action submitted by the Registered Provider

Corrective Action

A Change of circumstance form was completed and returned to Tusla on 19/11/2024. The service returned to original times of 9.30 to 12.30 on Monday 4th Nov 2024.

Preventive Action

The service commit to adhering to opening times in line with planning permission and ensure Tusla are informed of any changes by submitting a change of circumstance form

Supporting documentation submitted

Evidence of submission of change in circumstance form.

Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 8 has been adequately addressed.

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 named person to deputise as required.

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

(c) There was a clear management structure in place, and staff reported being aware of this.

(2) The deputy person in charge reported a total of four adults were employed by the service. These files and the file of a student were reviewed. The registered provider had completed the following checks:

- (a)(b) Four validated written references were available from recent past employers or a source other than a past employer for the five full files reviewed.

(c) Garda vetting disclosures had been obtained for the student and all staff members employed. The service also demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years.

(4) The three 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

The registered provider did not ensure the following was available:

(2)(a)(b)

- Two staff members each had two references available from previous employers however these were not validated.
- One staff member had no written or validated references available.

(2)(d) There was no documentary evidence available to establish whether one staff member had required police vetting.

Corrective & Preventive Action submitted by the Registered Provider

Corrective Action

(2)(a)(b) Two validated written references were obtained for a staff member.

(2)(d) no action submitted.

Preventive Action

(2)(a)(b)(d) Regular checks will be made to ensure all documents are up to date.

Supporting documentation submitted

(2)(a)(b) Two written references with validations attached.

(2)(d) no evidence submitted.

Summary Comment

Following a review of actions and evidence submitted, the following remains outstanding:

- (2)(a)(b) there are two staff members for which references have not been validated.
- (2)(d) no evidence was submitted to establish whether a staff member had lived outside the state and if police vetting was required for that staff member.

Regulation 9(2)(a)(b) and (d) remains outstanding and will be reviewed on the next inspection.

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).

Compliance Information

The registered provider ensured the following:

(1) (4) On the day of inspection there were an adequate number of adults working directly with the children.

There were three adults available to the 12 children aged between 2 to 5 years old when the inspector arrived unannounced to the service at 9.30am.

Part IV – Information and Records

Regulation 16 – Record in relation to pre-school service

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

(a) the name, position, qualifications and experience of the person in charge and of every other employee, unpaid worker and contractor;

(b) details of the class of service and the age profile of children for which the service is registered to provide services;

(c) details of the adult:child ratios in the service;

(d) the type of care or programme provided in the service;

(e) the facilities available;

(f) the opening hours and fees;

(g) the policies, procedures and statements the service is required to maintain in accordance with Regulation 10;

(h) details of attendance by each pre-school child on a daily basis;

(i) details of staff rosters on a daily basis;

(j) details of any medication administered to a pre-school child attending the service with signed parental consent;

(k) details of any accident, injury or incident involving a pre-school child attending the service.

Compliance Information

(1) The registered provider ensured that a record in writing was kept of the following information in relation to the service:

(a) Details of the name, position, qualifications, and experience of every staff member was maintained within the staff files.

(b) The service Tusla certificate was displayed within the service and detailed the class of service and the age profile of children for which the service is registered to provide services.

(c) (d) (e) (f) The parent handbook detailed the adult: child ratios, the type of care or programme provided, the facilities available within the service, the opening hours and the fees of the service.

(g) The registered provider maintained all of the policies required in accordance with Regulation 10.

Non-Compliance Information

The following records were not maintained:

(h) Attendance records detailing the arrival and departure of the children were not maintained on a daily basis. For example:

- There was no departure details recorded for 1, 11 and 15 October 2024.
- There was no arrival and departure details recorded for the 2, 3, 4 and 14 October 2024.

(i) There was no staff roster available.

(j) The registered provider did not ensure a record in writing with signed parental consent for the administration of medication was available. Staff reported that medication had previously been administered in the service, but there was no record of this available.

(k) The registered provider did not ensure a full record in writing for accident and incidents was maintained, as evidenced by the following from a sample of 12 records:

- Two forms did not record the date of the parents' signature.
- Five forms did not record the child's full name.
- One form did not detail the date of completion or the signature of the staff member completing the form.

Corrective & Preventive Action submitted by the Registered Provider

Corrective Action

- (h) The attendance records were updated.
- (i) A staff Roster added to attendance book and filled in day after inspection.
- (j) A medicine book present in service but had not been used yet as no medication had been administered as of date of inspection.
- (k) The accident & Incident book was brought up to date and all forms completed correctly.

Preventive Action

- (h) The service commit to regularly check all documentation, report books etc and ensure all are up to date and completed properly.
- (i) The service commit to fill staff roster in daily, keep it up to date, get each staff member to sign in and out daily.
- (j) The service commits to ensure medication administered is recorded by staff and signed by parent.
- (k) The service will ensure the accident & incident book is completed correctly by staff and parents each time it's used.

Supporting documentation submitted

No evidence submitted.

Summary Comment

The inspector has reviewed the actions submitted. The non-compliances identified under Regulation 16 have been addressed and will be reviewed on the next inspection.

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.

Non-Compliance Information

(1)(a) Not all of the children were given the freedom to move freely throughout the care room and engage in their choice of activity. The children were observed to be required to remain seated for a total of 70 minutes and engage in adult led activities from 9.50am to 11.00am. The following was observed:

- At 9.50am the children were directed to sit on their chairs for an adult-led activity of circle time. The children displayed non-verbal signs of disinterest in the activity by fidgeting and moving around on their chairs and attempting to communicate with each other. Staff repeatedly told the children turn around and listen.
- At 10.18am the children were directed to sit at their table where they were requested to turn their listening ears on for an adult led activity of animal bingo. One of the children wanted to sit beside their friend but was told there was no room.
- At 10.36am the children were reminded to remain seated while the transition for snack time commenced.
- At 10.58am the children were directed to be seated on the floor in the home corner while the room was prepared for an adult led activity facilitated by an external company.
- It is acknowledged that two children who had additional care needs were given the opportunity to freely move around the room however no alternative activities were provided.

Children require the opportunity to move freely through their care space and engage in child-led activities of their choice in order to develop independent decision-making skills.

Corrective & Preventive Action submitted by the Registered Provider

Corrective Action

Due the arrival of an external activity, children were out of routine. The service will ensure to have a change in activities and more child led. Children usually have more free play and freedom to choose their own work and play.

Preventive Action

Daily activities will be child led and based on children emergent interest. The service have a timetable and themes they will follow which will change according to emergent interests of the children.

Supporting documentation submitted

Evidence of daily routine incorporating free and child led play.

Summary Comment

The inspector has reviewed the actions taken and evidence submitted. The non-compliance identified under Regulation 19 has 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 registered provider ensured the following:

- The furniture in the room was observed to be adequate for the number of children in the room and was appropriate for the age range and stage of development of the children.
- Equipment was stored on low level shelving and was visible to the children.
- The range of play materials and equipment available included arts and crafts materials, home areas with associated props; range of jigsaws; range of construction toys; sorting and stacking toys; range of toys for transporting such as cars and trains with tracks, small world play toys.
- There was a low couch providing a comfortable rest area beside a display of books.

Non-Compliance Information

The registered provider did not ensure the following adequate or suitable play equipment for the children:

1. The adult led game of animal bingo was not suitable for the age range of children in the room. Staff were observed to comment that the game was 'so hard for children'. The children were observed to not successfully master the game as they did not recognise the sounds of some of the animals. A review of the instructions of the game showed the recommended age range for the game was age 4 and up. The age range of the children in the room was from 2 years and 9 months to 3 years and 10 months.

In the outdoor play area the following was observed:

2. The sand pit was inaccessible to the children, and staff reported that this is not available for outdoor play during the winter months.
3. The large plastic game was broken, with not all of the pieces available.

Corrective & Preventive Action submitted by the Registered Provider

Corrective Action

1. The service ensures game won't be used with children until they are ready to understand the game.
2. The outdoor sand pit has been fitted with a secure lid to ensure access to clean sand throughout the year.
3. The game was removed from the garden and disposed of.

Preventive Action

1. The service will review all activities and check that they are all age suitable.
2. The service ensure sand will be accessible throughout the year.
3. The service will ensure to check all materials and dispose of them when broken or damaged.

Supporting documentation submitted

1. No evidence submitted.
2. Photographic evidence of sandpit cover.
3. No evidence submitted.

Summary Comment

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

Part VI - Safety

Regulation 23 - Safeguarding health, safety and welfare of child

A registered provider shall ensure that all reasonable measures are taken to safeguard the health, safety and welfare of a pre-school child attending the service and that the environment of the service is safe.

Compliance Information

General Safety:

- Entry to the service was managed and monitored by staff to restrict unauthorised persons from gaining access to the premises. The door latch was up high out of reach of children preventing children from exiting unsupervised.
- Children's fruit such as grapes were observed to be cut into appropriate bite-sized pieces.
- There was a gate in place leaving the kitchen inaccessible to the children on the day of the inspection.
- The outdoor play area was fully enclosed.

Infection Control:

- Children were observed to be encouraged to wipe their noses and dispose of the tissue in the bin after.
- Children were supported to hand wash before snack-time.
- Parents were contacted to collect a child early after staff had taken the child's temperature and staff reported the child seemed unwell.

Fire Safety:

- The emergency exit was unobstructed.

Non-Compliance Information

General Safety:

The following were accessible to children and posed a potential risk of injury to the children:

- The television was not securely mounted.
- Broken toys and equipment which were stacked in the side of the shelter in the outdoor play area were unstable.
- There was a trailing flex from the radio in the care room.
- Tins of paint were stored in the outdoor play kitchen.

Infection Control:

The following increased the potential risk of infection:

- There was no hand drying facility available in the blue toilet and the blue roll available in the in the yellow toilet was not appropriate as it was not hygienically dispensed.
- Children's lunches which were observed to contain perishable items were not refrigerated. This was identified as a non-compliance on the previous inspection held on the 9 June 2021 and actions put in place failed to prevent a recurrence.

Fire Safety:

- The details of the attendance of the children were not accurately recorded in the attendance book. Only 11 children were marked as present when there were 12 children in attendance. Contemporaneous accurate attendance logs must be maintained to support the safe evacuation of children in an emergency.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

Corrective actions:

1. The TV was secured to the wall.
2. The toys were removed and disposed of safely. Side of the shelter has been secured with a barrier.
3. The radio was moved to safer area.
4. The paint was removed and stored in locked shed at front on services.

Preventive actions:

1. The service will ensure to check the TV is secure.
2. The storage outside to be checked daily to ensure safety.
3. The service will check flexes daily to ensure safety.
4. No paints to be stored outside, and will keep in locked shed.

Infection Control:

Corrective actions:

5. The dispensers were filled with blue roll.
6. A fridge is now available in the care room for lunches.

Preventive actions:

5. The dispensers will be checked daily and documented.
6. The service will ensure perishable lunches are refrigerated daily.

Fire Safety:

7. **Corrective action:** the service updated the attendance book on the day of the inspection.
Preventive action: the service commit to accurately maintaining the attendance book daily.

Supporting documentation submitted

General Safety:

1. Photographic evidence, risk checklist submitted
2. Photographic evidence, outdoor risk checklist submitted.
3. Risk checklist submitted
4. Outdoor risk checklist submitted

Infection Control:

5. Photographic evidence, risk checklist submitted
6. Photographic evidence.

Fire Safety:

7. No evidence submitted.

Summary Comment

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

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

(2)(a)(b) A suitably equipped first aid box was available and safely stored in an easily accessible and conspicuous position on the premises.

Non-Compliance Information

(1) There was no documentary evidence available to demonstrate that a person trained to First Aid Responder level was available to the children attending the service during the operational hours of the service.

It is acknowledged that two members of staff were trained in Paediatric First Aid.

Corrective & Preventive Action submitted by the Registered Provider

Corrective Action

All staff completed First Aid Responder training after the inspection.

Preventive Action

The service will ensure to have up to date first aid and renew when required.

Supporting documentation submitted

Evidence of training certificates submitted.

Summary Comment

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

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*

Non-Compliance Information

The registered provider did not ensure the following:

(c) The care room was not adequately ventilated. The temperature of care room exceeded the recommended ambient temperature of 18-22 °C in a care room. The room was warm and stuffy, and the inspector recorded the temperature of the care room as 23.5°C at 11.03am. (d) The premises was not maintained and repaired as required.

- The toilet in the yellow sanitary accommodation was not appropriately secured to the floor and water was observed to be seeping onto the floor.
- The seal on the flooring of both the yellow and blue sanitary accommodation was damaged, and the flooring was coming away from the wall leaving a surface that was un-wipeable. There was a build-up of dirt and debris accumulating in area where the floor was damaged.

Corrective & Preventive Action submitted by the Registered Provider

Corrective Action

- (c) Staff opened a window, and back door and the air purifier was turned on.
- (d) The toilet was replaced day after inspection, and the flooring was repaired. The service report they had a plumber booked to come before the inspection had taken place.

Preventive Action

- (c) The service will ensure the room is well ventilated and at a comfortable temperature.
- (d) The service will check toilets, sanitary equipment daily.

Supporting documentation submitted

- (c) No evidence submitted.
- (d) Photographic evidence submitted.

Summary Comment

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