

Early Years Inspectorate Regulatory Report

Pre School

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| TUSLA Identifier: | TU2015FL097 |
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| Name of Service: | Lámha Beag |
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| Address of Service: | 11 Boroimhe Hazel, Swords, Co. Dublin |
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| Eircode: | K67 XK57 |
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| Name of Registered Provider: | Gabrielle Hand |
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| Service type: | Full Day |
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| Date of Inspection: | 26/10/2023 |
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| No of pre-school children: | AM | 14 | PM | 21 |
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| Address of the Early Years Inspectorate: | Early Years Inspectorate, 181-189 Lakeshore Drive, Airside Business Park, Swords, Co. Dublin K67 Y5C6. |
| Inspection undertaken by: | S. Taaffe |
| 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).

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| Conditions if applicable | Not Applicable |
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Description of service

The registered provider commenced operating a childminding service in 2005 and subsequently established a full day care service at this address in 2010. The service operates from 7.30am to 5.30pm each weekday, catering for a maximum of 22 pre-school children from 1 year of age until the children commence attending primary school. School aged children are no longer accommodated in the service. The service does not participate in the Early Childhood Care and Education (ECCE) scheme; however, transport is provided by the service to drop and collect a number of pre-school children attending this service to ECCE services which are delivered in other early years services in the locality each morning.

Staffing

The registered provider employs 6 staff members, of whom 3 work in a full-time capacity, 2 work in a part-time capacity and 1 who occasionally works in the service in a relief capacity to cover staff absences. One of the staff members who works part-time engages in ancillary duties including administration, cooking and transporting children off-site to avail of ECCE programmes in separate early years services. The registered provider and 5 of the 6 staff members work directly with the pre-school children attending the service. A student who was being facilitated to engage in work experience in a supernumerary capacity was present in the service for the first time on the day of inspection.

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/ premises and facilities. The inspection may also focus on other areas as required.

The inspection focused on an examination of compliance under regulations 9, 11, 15, 16, 19, 20, 23, 25, 26 and 29. However, on inspection an additional non-compliance which posed risk was identified under Regulation 24. These findings are outlined within the relevant regulations within this report.

A sampling process was used to assess compliance under Regulation 16(1)(j) - Record in relation to a 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.

Additional Information

An immediate action notice was issued to the registered provider on the day of inspection in relation to the absence of a Garda vetting disclosure for a third level student who was present on a work placement in the service. Additionally, an immediate action notice was also issued for excessively hot water in sanitary accommodation accessed by pre-school children during the inspection. Within 24 hours of the inspection the registered provider provided written assurances to the Inspectorate that the student would not be present in the service until a Garda vetting disclosure was supplied to the service by the college. A copy of the relevant Garda vetting disclosure was submitted by the registered provider to the Inspectorate on 01/11/2023.

No response was received from the registered provider in respect of the immediate action notice issued regarding excessively hot water at a wash hand basin accessed by pre-school children in the service. A final notice was issued to the registered provider by email on 31/10/2023, requesting an immediate response to the notice. Within a further 24 hours the registered provider provided written assurances that the risk to children had been appropriately addressed.

The inspection report was issued in draft format to the registered provider on 16/11/2023 with a request to submit a Corrective Action and Preventive Action plan (CAPA) to demonstrate how the non-compliances had been rectified and how the registered provider would prevent any non-compliances from re occurring. No response was received from the registered provider within the designated timeframe. A reminder to submit the CAPA was sent to the registered provider on 11/12/2023. The registered provider subsequently submitted an initial CAPA on 13/12/2023.

A regulatory compliance meeting was held on 12/01/2024, during which Deirdre Duffy Inspection and Registration Manager discussed with the registered provider the outstanding regulations that remained non-compliant following the initial CAPA submission on 13/12/2023. Following the regulatory compliance meeting a revised CAPA was submitted on 19/01/2024 which addressed the agreed actions set out at the regulatory compliance meeting. These additional corrective actions were subsequently evidenced in a range of photographs submitted to the Inspectorate on 02/02/2024.

Acknowledgments

The inspector wishes to acknowledge the cooperation of the registered provider, staff and children who were present on the day of the inspection.

Part III – Management and Staff

Regulation 9 – Management and recruitment

(1) A registered provider shall ensure that-

- (a) the service has a designated person in charge and a named person who is able to deputise as required,
- (b) at all times during the period when the pre-school service is being carried on, the designated person in charge or the named person referred to in subparagraph (a) is on the premises, and

(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 registered provider was the designated person in charge of the service and there was a named person available to deputise as required.

(b) The registered provider was present and in charge of the service when the inspector arrived unannounced at 9.20am on the morning of the inspection and remained on the premises for the duration of the inspection.

The staff files for the registered provider, the 6 staff members and the third level student who was present on the day of the inspection were reviewed.

(2)(a)(b) There were 2 written references available for the registered provider and 2 written, validated references available for the 6 staff members.

(a) Of the 14 written references available, 11 were from past employers.

(b) Three of the 14 written references available were from sources other than a previous employer.

(c) Garda vetting disclosures were available for the registered provider and for the 6 staff members.

(4) The registered provider and 5 staff members employed in the service held a major award in Early Childhood Care and Education at Level 5 – 8 on the National Framework of Qualifications. One of the two adults present in the premises from 7.30 – 8.00am each day was employed to engage in ancillary duties and did not hold a childcare qualification. However, the attendance records indicated that generally a maximum of 1 or 2 children were present in the service during this 30-minute timeframe and this second ancillary staff member was not required to provide direct care to the children.

Non-Compliance Information

(2)(a)(b) There were no written, validated references available in respect of a student who was present in the service.

(c) A Garda vetting disclosure was not available for a student who was present in the service on the day of inspection.

(d) Confirmation of appropriate international police vetting from the relevant states were not available in respect of two staff members working in the service for whom information presented at inspection indicated that they had resided outside of Ireland for periods longer than six consecutive months as adults.

Corrective & Preventive Action submitted by the Registered Provider

The registered provider stated the following corrective actions and preventive actions have been undertaken:

Corrective Action:

(2)(a)(b) The references have since been received, validated and forwarded to the inspector.

(c) Garda vetting was received from the college within 24 hours and sent to the inspector.

(d) Translated international police vetting has been received for one staff member and this was reviewed by the inspector at the regulatory compliance meeting held on 12/01/2024. The second staff member is in the process of obtaining overseas vetting since November 2023. Once received this will be forwarded to the inspector.

Preventive Action:

(2)(a)(b)(c) Manager will ensure that any students will not be allowed on the premises until all the required documentation has been received in advance.

(d) Management will request translated or overseas police vetting at interview stage prior to staff recruitment.

Supporting documentation submitted:

- Copies of the two outstanding written, validated references.
- A copy of the relevant Garda vetting disclosure.
- International police vetting translated into English for one relevant staff member.

Summary Comment

An immediate action notice was issued to the registered provider on the day of inspection in relation to the absence of a Garda vetting disclosure for a student who was present in the service on the day of inspection. Within 24 hours of the inspection the registered provider provided written assurances to the Inspectorate that the student would not be present in the service until a Garda vetting disclosure was supplied to the service by the college. A copy of the relevant Garda vetting disclosure was submitted to the Inspectorate on 01/11/2023.

The inspector reviewed the corrective actions and supporting documentation submitted by the registered provider after the inspection. The registered provider demonstrated that the non-compliances identified under Regulation 9(2)(a)(b)(c) have been adequately addressed.

However, international police vetting has yet to be received for one of the two staff members who had resided outside of Ireland for a period longer than six consecutive months as an adult.

Therefore, as of 06/02/2024, the non-compliance identified under Regulation 9(2)(d) remains outstanding.

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

(2) The minimum adult to child ratios were maintained in the service throughout the inspection.

The following adult to child ratios were observed on the morning of the inspection:

The registered provider and 2 staff members were caring directly for 14 pre-school children (of whom 6 children were aged from 12 months to 1 year 11 months, 7 children were aged from 2 years to 2 years 11 months, and 1 child was aged 4 years 4 months).

The following adult to child ratios were observed on the afternoon of the inspection:

The registered provider and 4 staff members were caring directly for 21 pre-school children (of whom 6 children were aged from 12 months to 1 year 11 months, 8 children were aged from 2 years to 2 years 11 months, and 7 children was aged from 3 years 1 month to 4 years 8 months).

Additionally, an ancillary staff member was present throughout the inspection preparing meals and transporting children to and from separate early years services where children attending this service availed of ECCE programmes. The third level student was also present but did not engage in any direct care with the children.

(8)(a) The registered provider ensured that 2 adults were present on the premises at all times. The registered provider and the staff member employed to engage in ancillary duties were present during operational hours from 7.30 to 8.00am each day, at which time 1 staff member employed to work directly with the children commenced their shift.

Non-Compliance Information

(1) Although there were an adequate number of adults working with the children in the service in order to meet the minimum requirement of Regulation 11(2) on the day of the inspection, at times during the morning the number of adults present was inadequate to respond and meet the care needs of all the children in a timely manner. The atmosphere in the Baby Room, especially but not limited to the period of time from 9.25am to 12.00 midday, was observed to be hurried and was not relaxed, most evident during nappy changing, mealtimes and when children were settling to sleep when the registered provider and 1 staff member were caring for the 11 youngest children in attendance who were accommodated in this care room. A child in the Baby Room had recently commenced attending the service and was unsettled and needed extra care and comforting during the day, which the inspector acknowledges was provided by the staff members. However, the registered provider and the staff member were unable or unavailable on at least 10 occasions to prevent behavioural issues including hair pulling from occurring or to support children in finding positive solutions when they experienced challenges when participating in play and interactions.

Therefore, the regulatory requirement was not met for Regulation 11(1).

Furthermore, the attendance records indicated and the registered provider confirmed that, in addition to the children present on the day of inspection, an additional child aged 1 year 2 months (who was absent due to illness on the day of inspection) normally attends from Monday to Friday on a full day care basis. The registered provider confirmed that Tuesdays and Thursdays were 'the busiest days' in the service and run similarly to how the service operated on the day on which the inspection took place (which was on a Thursday).

Corrective & Preventive Action submitted by the Registered Provider

The registered provider stated the following corrective actions and preventive actions have been undertaken:

Corrective Action:

(1) Manager has addressed the busy days (Tuesday and Thursday) by more evenly levelling out the numbers, swapping days where possible from Mondays and Fridays (when much lower numbers of children attend) to throughout the week.

Preventive Action:

(1) Manager will ensure that any future children registered on a 4 day week will take a Tuesday or a Thursday off.

Supporting documentation presented for inspection at the regulatory compliance meeting:

The service's attendance records which showed that a maximum of 17 children have been in attendance on any given day since 3rd January 2024.

Summary Comment

The assurance given by the registered provider that the non-compliance identified under Regulation 11(1) has been adequately addressed has been reviewed and accepted by the Inspectorate. This will be reviewed on the next inspection.

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-

- (a) a parent or guardian of a pre-school child but only in respect of the record relating to that child,*
- (b) an employee who is authorised in that behalf by the registered provider, and*
- (c) an authorised person.*

Compliance Information

(3)(c) The children's records were open to inspection as requested by the inspector as an authorised person.

Non-Compliance Information

(1)(a) to (i) A registration form was not available for 1 pre-school child who was present in the service on the day of inspection. Therefore, the service did not have sufficient documented details available for this child including a record of the person(s) authorised to collect the child from the service, written parental consent for the child to avail of medical treatment in the event of an emergency, or information as to whether the child had allergies or not.

(c) Four registration forms did not contain the date when the children first attended the service.

Corrective & Preventive Action submitted by the Registered Provider

The registered provider stated the following corrective actions and preventive actions have been undertaken:

Corrective Action:

(1)(a) to (i) Manager has since obtained the registration form for the child, this child is a close family member who only attends on occasional days.

(1)(c) The start dates are recorded on the children’s contracts (a separate form) as the actual start date is often unknown when the registration forms are filled out, generally months in advance. The registered provider has entered the start date for each of the 4 children on their registration forms.

Preventive Action:

(1)(a) to (i) In future, regardless of who attends, manager will ensure that all the registration form are obtained in advance and fill out these forms fully.

(1)(c) In future manager will revisit the form before start date and ensure it is filled in correctly.

Summary Comment

The inspector reviewed the corrective actions and preventive actions submitted by the registered provider after the inspection. Assurances given by the registered provider have been accepted in relation to Regulation 15(1) and these will be reviewed at the next inspection.

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;*
- (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

(k) The service-maintained records in writing of details of accidents, injuries and incidents involving pre-school children in the service. A sampling process was used in relation to these records with 10 forms reviewed. The records were clear and legible and included parental signatures confirming they were aware that the incidents reviewed had occurred.

Non-Compliance Information

(1)(a) The staff member employed in a relief capacity did not have a recorded history of past employment and relevant experience available for inspection. Therefore, it was not possible to determine whether the available references had been obtained from the most recent employers or whether police vetting from another jurisdiction was required, in accordance with Regulation 9(2)(a), (b) and (d).

(i) There was no documented staff roster available in the service. The inspector was informed that all staff members worked the same shifts on an on-going basis. This was evidenced in the staff sign in and out records maintained in the attendance registers in the service which were reviewed by the inspector. However, there was no evidence of documented planning in relation to break times or any other situation where additional staff may be needed to ensure the adult to child ratio could be met at all times.

(j) A sampling process was used in relation to medication administration forms maintained in the service with 12 forms reviewed. Not all these forms were complete as evidenced in the following findings:

- Medication had been administered to a child in the service on 02/10/2023 in the absence of written parental consent.
- Forms maintained in relation medication administered in the service on 02/10/2023, 05/12/2022 and 02/12/2022 did not include a second staff member's signature to show that the medication had been appropriately checked and the procedure undertaken by 2 staff members.
- Forms maintained in relation medication administered in the service on 02/10/2023, 20/09/2023, 19/09/2023 and 31/08/2023 were not signed on collection by the child's guardian to document that they had been informed and were aware of what medication had been given to their child during the course of the day and at what time.

Corrective & Preventive Action submitted by the Registered Provider

The registered provider stated the following corrective actions and preventive actions have been undertaken:

Corrective Action:

(1) (a) Manger has since obtained a copy of this person's CV.

(i) All staff are rostered the same set hours every day, the rules regarding breaks are informal and taken daily at the same time; however, on the two busiest days this can sometimes be a challenge, the staff will either eat with the children or alternate the break times according to the ratio and day.

(j) The staff have all been advised that this needs more attention to detail.

Preventive Action:

(1) (a) Manager will ensure that a CV is obtained and kept on file for all staff members.

(i) Manager has created a more robust roster for breaks now that staff has managed to even out the daily numbers.

(j) This will be audited now once a week and staff have been informed.

Supporting documentation presented for inspection at the regulatory compliance meeting:

- A CV for the staff member employed in a relief capacity.
- A copy of the service's up-dated staff roster with break times included.

Summary Comment

The non-compliances identified under Regulation 16(1)(a)(i)(j) have been adequately addressed.

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,

Compliance Information

The following examples demonstrate how each child's learning, development and well-being was observed being facilitated during the inspection:

Basic needs:

- The staff members were respectful in their interactions with the children in their care.
- Breakfast cereal was provided for children if required, from 7.30 to 9.30am daily. The service supplied dinner and tea which were sourced in bulk from a specialist catering company and stored frozen on the premises, in advance of use. Minced beef, mashed potato, green beans, carrots and gravy was served for dinner at 12.00 midday. The children were encouraged to feed themselves and were assisted as required. Drinking water was freely available to the children at all times and was served with snacks and meals in both care rooms. Healthy snacks and drinks were provided by the parents for the children to have during the afternoon. These included sandwiches, yogurts, fruit, rice cakes, cheese, crackers and drinks. Chicken curry and rice was provided by the service and served for tea from 2.55pm on the day of inspection.
- Nappy changing was carried out regularly and in a timely manner throughout the day.

Supporting relationships around children:

- One child in the Baby Room who was relatively new to the service and required additional comforting was observed on a number of occasions being held, sung to and spoken to, with the staff members naming items that the child showed an interest in.
- The staff members in both rooms were observed initiating conversations using the children's names, listening to and responding to the children in a positive manner. One child in the Baby Room was heard telling a staff member that she loved her and displayed close attachment to this staff member throughout the day, calling her by name and snuggling in to the staff member on numerous occasions. The staff member consistently responded using a warm and gentle tone of voice.

- The children in both rooms were praised for their involvement in activities and on completion of tasks. The children were generally supported in their choice of activities, apart from in the lead up to transitions.
- Parents and staff members exchanged information regarding the children verbally at drop-off and collection.

Physical and material environment:

- The children in both the Baby Room and the Pre-school Room were provided with suitable low-level tables and chairs. A highchair was available in the Baby Room for a child who was not yet developmentally ready to sit unsupported in a standard chair during mealtimes.
- An adult's armchair was provided in the Baby room to allow adults working with the children to sit and feed, cradle or comfort the children.
- In each of the two care rooms there was an adequate variety of play materials and equipment. The equipment was suited to the ages and stages of development of the children present and these were laid out to provide specific interest areas. A library area, a construction area and a home area with some supportive equipment were defined interest areas noted in each room. Push-along toys were available to support the younger children's gross motor skills. Art supplies including a range of paint and brushes were provided in the Pre-school Room. The library area in both rooms contained a range of books to enhance the children's language skills and support their interest in storytelling. Staff members read stories for the children in both rooms during the inspection.
- The surface of the outdoor play area was paved and the space was enclosed by the walls and fencing. A plastic playhouse, two low-level portable slides, ride-on toys, rocking toys and three child-sized picnic benches were provided to support play experiences and activity outdoors. The children were facilitated to play outdoors on the day of the inspection.

Non-Compliance Information

(1)(a)

Basic needs:

1. The children's sleep needs were not managed at all times in a timely and appropriate manner during the inspection. Two children in the Baby Room showed signs of tiredness throughout the day, rubbing their eyes and crying, but they remained distressed and struggled to fall asleep when placed into the cots.

The inspector was informed by the registered provider that these children may possibly sleep or nap in buggies at home and that these children were usually held and cuddled by a staff member until they fell asleep fully in the service, before being immediately transferred into a cot as they had not learned to independently settle to sleep. This practice was observed on the day of inspection but at times the children remained awake and distressed whilst continuing to show signs of tiredness. One child aged 13 months did not sleep at all during their attendance from 8.10am to 3.30pm on the day of inspection and the inspector was informed that this child never slept in the service.

Supporting relationships around children:

2. The atmosphere in the Baby Room was unnecessarily hurried at times and transitions were not always managed appropriately. For example, on a number of occasions children were displaying high levels of involvement while playing with equipment including blocks, cars and trains but were repeatedly interrupted by an adult requesting the children to finish up and tidy up in preparation for snack, meals and nappy changing. This was evidenced at 11.30am when the registered provider used verbal signposting to signal that dinner was coming and the children were encouraged to quickly tidy away the toys they were playing with, with the assistance of the registered provider, the staff member and the student. Dinner was not served until 12.00 midday which resulted in some children displaying signs of boredom when waiting whilst not engaged in meaningful play activity, and a number of minor conflicts were observed taking place between the children at that time. It is acknowledged that the registered provider sang songs to the children when waiting, in an effort to engage the children to some effect, but a number of children wandered aimlessly around the room and rolled on the floor appearing disinterested until dinner was served.
3. The children needed greater support and more consistent approaches from the staff members to manage behaviours that hurt other children and to build the skills of positive interaction. On occasions when a child engaged in hairpulling an adult was frequently heard saying to the child “look at me, look at me, look at me, gentle hands, gentle hands” but failed to re-direct and support the child to engage in an alternative meaningful play activity or pre-empt further occasions when similar behaviours occurred.

Physical and material environment:

4. In both rooms opportunities for sensorial play was not readily facilitated as sensorial materials such as sand, water, compost, dried rice or dried pasta were not provided indoors.

Corrective & Preventive Action submitted by the Registered Provider

The registered provider stated the following corrective actions and preventive actions have been undertaken:

Corrective Action:

Basic needs:

1. As previously mentioned the common corrective action for the majority of the non-compliances have been addressed by reducing numbers of children attending on the overly busy days. The numbers attending on Thursdays have been reduced by 4 children due to a more even distribution across the other days. This allows the staff to spend more time sitting and nursing the child who displays signs of tiredness and to focus more time on sleep needs.
2. By reducing the numbers of children attending on the two busiest days, Tuesdays and Thursdays, this has corrected this issue and will create a less hurried atmosphere in the rooms; staff can already see a much-improved environment since they reduced the Tuesday and Thursday numbers.

Supporting Relationships Around Children:

3. The reduced numbers facilitate staff to address behavioural issues. Additionally, all staff have been asked to refresh on the service's behavioural management policy.

Physical and material environment:

4. Staff have on many occasions introduced sensory play using basic material like rice and pasta. The registered provider has since purchased a sensory table which will be freely available to the children at all times.

Preventive Action:

Basic needs:

1. Parents have been strongly advised before their child's start date that good practice sleep routine must be in place. As the service only accommodates children from 12 months of age, this a realistic requirement. The manager will also endeavour to maintain the Tuesday and Thursday attendance at a manageable number.

Supporting Relationships Around Children:

2. There was a delay in the dinner being served on day of inspection, this is not typical as generally the dinners arrive at the rooms before the children are even seated, this has been noted and staff spoken too to reduce this transition time and reduce any boredom with the children.
3. As above managing behavioural issues have been refreshed in parallel with reduced numbers, to support all children going forward.

Physical and material environment:

4. Always ensure sensory play is introduced as part of the daily play schedule.

Supporting documentation presented for inspection at the regulatory compliance meeting:

- The service's attendance records which showed that a maximum of 17 children have been in attendance on any given day since 03/01/2024.
- Photographs showing additional play materials in the service including dry rice and pasta in tray-top activity table in the service.

Summary Comment

The inspector reviewed the corrective actions and supporting documentation submitted by the registered provider after the inspection. The registered provider demonstrated that the non-compliances identified under Regulation 19(1)(a) have been adequately addressed. Furthermore, during the regulatory compliance meeting the registered provider agreed to engage with an external quality development service to obtain mentoring and support in relation to meeting all the children's needs in the service.

Part V - Care of Child in Pre-school Service

Regulation 20 – Facilities for rest and play

(1) Subject to this regulation, a registered provider shall ensure that-

(b) there are adequate and suitable facilities for a pre-school child to rest during the day, and in the case of an overnight pre-school service, during the day and the night.

Compliance Information

(1)(b) Floor mats and cushions were available in a designated area in the Baby Room should a child wish to take a break from activities and rest.

Non-Compliance Information

(1)(b)

1. Adequate facilities for rest and sleep were not provided for the number and age range of children attending the service. Three standard cots and 1 stackable bed was provided in the family sitting room, designated as the service's sleep room, which adjoined the Pre-school Room. However, 4 standard cots were required to meet the sleep needs of the 4 children aged between 12 months and 1 years 5 months and the 2 children aged 1 year 8 months and 1 years 11 months who were present on the day of inspection. In addition, in the event that all these children were present plus the child aged 1 year 2 months who was absent through illness on the day of inspection, 5 standard cots would be required to meet all the children's sleep needs.
2. A small cloth-covered battery-operated rocking cot with 3-position recline function was observed in the Pre-school Room during the inspection. A staff member informed the inspector that a named child had been facilitated to sleep in this cot up until "a couple of months ago... when the child got too big for it". This item, not observed in use on the day of inspection, is prohibited for use in an early years service.
3. At 4.30pm a child aged 3 years 7 months was observed sleeping on 3 small rigid vinyl-covered cushions on the floor of the Pre-school Room. When the inspector informed the staff member that this was not a suitable base upon which to facilitate a child to sleep, the inspector was informed that this child normally slept on the child-sized couch instead. However, a couch is also not a safe or suitable surface for a sleeping child and is prohibited for use for this purpose. Apart from the child-sized couch there was no suitable comfortable rest area equipped with floor matting and soft furnishings in this room should a child wish to rest or relax.

Corrective & Preventive Action submitted by the Registered Provider

The registered provider stated the following corrective actions and preventive actions have been undertaken:

Corrective Action:

(1)(b)

1. The registered provider will look to add an additional cot to the sleep room, although with evenly balancing out the numbers this has become less of an issue as sleep times can be staggered. As outlined by the inspector following the regulatory compliance meeting on 12/01/2024 an additional cot is required based on the numbers and ages of children in the service. This will be purchased at the end of January 2024.
2. The child was rocked in this cot to settle, then once nearly at sleeping stage was transferred into the standard cot.
3. The registered provider will provide floor matting in the corner of this room and soft furnishings. It is generally requested by the parents that the children in this age group do not sleep, however staff sees the necessity for a relaxing area to rest. A new rest area has been put in place.

Preventive Action:

(1)(b)

1. The registered provider will always insure adequate sleeping accommodations in accordance with the children's ages and numbers.
2. & 3. All staff have been refreshed on safe sleep practice.

Supporting documentation presented for inspection during or following the regulatory compliance meeting:

- Photographs showing a 4th cot in place in the service's sleep room.
- Photograph of a cosy area with soft matting and suitable cushions established in the Pre-school Room.

Summary Comment

The inspector reviewed the corrective actions and preventive actions submitted by the registered provider after the inspection. Assurances given by the registered provider have been accepted in relation to Regulation 20(1)(b) and these will be reviewed at the next inspection. The registered provider confirmed at the regulatory compliance meeting that the cloth-covered rocking reclining cot has been removed from the premises and will not be used in future.

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 gate leading into the outdoor play area and the entrance doors leading into the premises were appropriately secured to prevent the children from exiting unsupervised and to restrict unauthorised persons from gaining access to the premises. A bell was provided at the entrance gate to allow parents or visitors notify staff members of their arrival to the service and a CCTV monitor in the Baby Room allowed staff members view visitors in advance of facilitating their entry.
- Cleaning agents were stored safely on high shelving out of the reach of children.
- The kitchen was inaccessible to the children during the inspection.
- Blind cords were appropriately secured.

Infection Control:

- Soothers were stored in personalised containers when not in use.
- A refrigerator was available to store perishable items provided by the parents for the children's snacks. This reduced the risk of bacteria growth in these food items.
- Staff members wore disposable aprons and suitable disposable gloves for each individual nappy change.
- The children were facilitated to wash their hands before eating, after using the toilet, after nappy changing and following messy play and outdoor play

Administration of Medication:

- Medications were stored out of the reach of children. No children were observed having medication administered on the day of inspection.

Safe Sleep:

- Adequate space of at least 50cm was left between the 3 cots in the sleep room.

Non-Compliance Information

General Safety:

1. The hot water supply provided at the wash hand basin in the sanitary accommodation containing the nappy changing unit exceeded the maximum safe water temperature of 43°C. The water was recorded at a temperature 70.1°C at 10.55am, 65.2°C at 2.50pm and 60.7°C at 5.00pm which presented as a scalding risk for children when washing their hands. The inspector informed the registered provider of this significant scalding risk and the children were denied access to hot water from this tap for the remainder of the inspection, with cold water and baby wipes used instead for hand hygiene after nappy changing as a temporary measure.

Infection Control:

2. A number of unlabelled water bottles were observed in the Baby Room. Staff members stated they recognised which bottle belonged to each individual child. However, this posed a risk of cross-infection for the children in attendance as some of the bottles were of a similar appearance.
3. Staff members demonstrated a lack of clarity in relation to the preparation of the sterilising solution provided in the service, particularly in relation to the correct dilution when preparing the solution. The inspector was informed that 1 capful of the sterilising fluid provided would be added to a full basin of water which would be inadequate for sterilisation purposes as this solution would be too dilute.

Safe Sleep:

4. There was evidence in the service that 10-minute sleep check observations were not always performed and documented on all sleeping children, based on an examination of the service's completed sleep logs. The following examples demonstrated that practice in the service was at variance with the national best practice safe sleep guidelines:
 - There were no sleep checks recorded for a child who was documented as having been asleep from 12.40 to 2.55pm on 23/10/2023.
 - A review of the records also indicated that 20 minutes had elapsed between sleep checks being conducted when a child was sleeping from 1.50 to 2.10pm on 14/08/2023.
 - Staff members in the Pre-school Room informed the inspector that sleep checks were conducted but not documented when children fell asleep in the care room. No sleep checks were

documented in respect of a child who slept on cushions on the floor of this room during the inspection, as referenced in Regulation 20.

Action submitted by the Registered Provider

The registered provider stated the following corrective actions and preventive actions have been undertaken:

Corrective Action:

General Safety:

1. This wash basin is not at a height where children can turn on the taps themselves or reach the water basin, it also has a mixer tap of hot and cold water and generally the staff member controls the water temperature for hand washing. However, manager has since added a thermostat to control the water temperature and picture proof sent to inspector.

Infection Control:

2. All bottles are now newly re-labelled. All children start out in this service with labelled bottles at the beginning of every new term, however over time the labels fade or fall off due to washing.
3. Staff now have an updated sterilisation policy in place, and they have a microwave steam steriliser.

Safe Sleep:

4. All staff have been made of aware of the importance of safe sleep practice. It is noted that the check were done on a 10-minute basis but the book didn't get updated in a timely manner.

Preventive Action:

General Safety:

1. Maintain control over the water temperatures in all the wash facilities and add to risk assessment policy as a daily check.

Infection Control:

2. Although the staff do recognise who owns which bottle, staff members will always ensure clear labelling is visible on the water bottles and replace when they start to fade.
3. Ensure all staff are refreshed on the sterilising policy and practiced.

Safe Sleep:

- Add the sleep log book to a daily check list and auditing. A staff member has been assigned responsibility for this action.

Supporting documentation submitted or presented for inspection at the regulatory compliance meeting::

- Photograph of a thermostatic mixing valve in place on pipework beneath the wash hand basin in the sanitary accommodation containing the nappy changing unit.
- A receipt from a plumber in relation to the installation of a thermostatic mixing valve on the hot water supply to the downstairs wash hand basin.
- A copy of the service's sterilisation policy.
- Evidence of a new microwave steam steriliser.

Summary Comment

An immediate action notice was issued to the registered provider on the day of inspection for the excessively hot water in sanitary accommodation accessed by pre-school children during the inspection. Documentary evidence was submitted to the Inspectorate on 03/11/2023 confirming that the warm water supply had been thermostatically controlled not to exceed the safe water temperature of 43°C.

The inspector reviewed the corrective actions and preventive actions submitted by the registered provider after the inspection. Assurances given by the registered provider have been accepted in relation to Regulation 23 and these will be reviewed at the next inspection.

Part VI - Safety

Regulation 24 - Checking in and out and record of attendance

(1) A registered provider shall ensure that each pre-school child attending the service is checked in and out of the service by an employee or an unpaid worker.

Non-Compliance Information

(1) The service did not maintain accurate details of all children in attendance during the inspection as evidenced in the following:

- Seven children who returned to the service after 12.00 midday following their attendance in ECCE programmes elsewhere were not entered as present in the service's attendance registers upon their return to Lámha Beag. These children's arrival time to the service, between 7.30 and 8.55am had been recorded in the attendance registers prior to their departure earlier on the morning of the inspection, as were separate details recorded of their time spent travelling to the ECCE programmes off-site, from 9.00 to 9.05am and from 9.10 to 9.15am. However, their time of return to the service was not recorded.
- Another child who returned to the service after 12.00 midday following their attendance in an ECCE programme elsewhere was not entered as present in the service's attendance register at any point during the day.
- At 10.05am it was observed that one child who was present was not signed in to the attendance register. The registered provider confirmed that this child had been present in the service since 8.30am.
- At 5.05pm, it was observed that 7 children who had been collected by their parents or guardians between 3.30pm and 4.50pm had not been signed out in the attendance register. At this time only one child had been accurately signed out in the attendance register, having been collected by their parent or guardian at 3.30pm.

The incomplete attendance records did not accurately reflect the number of children present in the service which posed a risk of the children not being counted under the daily supervision routines or in the event of an evacuation emergency.

Corrective & Preventive Action submitted by the Registered Provider

The registered provider stated the following corrective actions and preventive actions have been undertaken:

Corrective Action:

(1) This is not a regular occurrence. As the inspector noted on the day the attendance book is extremely tricky and not user friendly. Manager has since changed to a completely different attendance record book which makes this a lot easier to follow, all staff have been spoken to in relation to the importance of signing in and out at the precise moment a child enters and exits the building.

Preventive Action:

(1) Manager has assigned a designated staff member to supervise the attendance, this will be audited each morning, afternoon and evening on a daily basis.

Supporting documentation presented for inspection at the regulatory compliance meeting:

- Attendance records from 03/01/2024 showing a new more user-friendly and clear format in place to record children's attendance in the service.

Summary Comment

The inspector reviewed the corrective actions and preventive actions submitted by the registered provider after the inspection. Assurances given by the registered provider have been accepted in relation to Regulation 24 and these will be reviewed at 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 registered provider and 1 part-time staff member held in-date First Aid Response (FAR) training. The registered provider was aware of the requirement to have a person with in-date FAR training available to the children at all times when the service was in operation. The inspector was informed that in the unusual event the registered provider was not present in the service, then the part-time FAR-trained staff member would be present for the full day.

Non-Compliance Information

(2)(a)(b) The first aid box provided in the service was not suitably equipped. All 9 plastic ampoules of saline, all 10 wound dressings, all 9 alcohol-free cleansing pads and both burn dressings were out-of-date since at least October 2021.

Corrective & Preventive Action submitted by the Registered Provider

The registered provider stated the following corrective actions and preventive actions have been undertaken:

Corrective Action:

(2)(a)(b) New first aid box purchased.

Preventive Action:

(2)(a)(b) the first aid box will be checked monthly along with a monthly fire drill.

Supporting evidence presented for inspection at the regulatory compliance meeting:

- The service's appropriately restocked first aid box was reviewed by the inspector.

Summary Comment

The non-compliance identified under Regulation 25(2)(a)(b) has been addressed.

Part VI - Safety

Regulation 26 - Fire safety measures

- (1) A registered provider shall ensure that a record in writing is kept of-
- (a) any fire drill that takes place in the premises, and
 - (b) the number, type and maintenance record of fire fighting equipment and smoke alarms in the premises.
- (4) A notice of the procedures to be followed in the event of fire shall be displayed in a conspicuous position in the premises.

Compliance Information

- (1)(a) A record was maintained of fire drills which had been completed in the service. Based on the records maintained and as reported by staff members, fire drills were carried out monthly. The last recorded fire drill took place on 06/09/2023.
- (4) Notices of the procedures to be followed in the event of a fire were conspicuously displayed in the premises.

Non-Compliance Information

- (1)(b) There was no up-to-date maintenance record of firefighting equipment and smoke alarms in the premises. A certificate of commissioning for the service's fire detection system, dated 16/12/2021, was available.

Corrective & Preventive Action submitted by the Registered Provider

The registered provider stated the following corrective actions and preventive actions have been undertaken:

Corrective Action:

- (1)(b) The alarms have been re-certified and new certificates sent to inspector.

Preventive Action:

- (1)(b) Staff have now asked their provider to send them automated renewal notices for all the equipment servicing, this will always maintain up to date systems checks.

Supporting documentation submitted:

- A maintenance certificate dated November 2023 for the fire extinguishers in the service was submitted with the first CAPA on 13/12/2023.
- A maintenance record dated January 2024 for the fire alarm on the premises was submitted to the Inspectorate on 02/02/2024.

Summary Comment

The non-compliance identified under Regulation 26(1)(b) has been addressed.

Part VII - Premises and Space Requirements

Regulation 29 - Premises

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

- (a) of sound and stable structure,*
- (e) equipped with adequate and suitable sanitary facilities.*

Compliance Information

- (a) The premises appeared to be in good condition throughout.
- (e) Two toilets and 1 wash hand basin were provided in the sanitary facilities located off the entrance hallway to the service, between the Baby Room and the Pre-school Room. These hand washing facilities were adequate for a maximum of 11 children. The inspector observed children having their pull-ups changed standing up in this space, if the nappies were only wet, and the registered provider informed the inspector that this happened routinely.

Non-Compliance Information

- (e) Nappy changing for the younger children was insufficient. Children in standard nappies and children whose pull-ups were soiled had their nappies changed on a nappy changing unit located in separate sanitary accommodation located off the front hall of the registered provider's family home, which also contained a toilet and a wash hand basin (where the water was excessively hot, as detailed in Regulation 23). The children were observed being taken from the Baby Room, through the service's entrance hallway, through the Pre-school Room, through the sleep room, through the front hall of the registered provider's family home to reach these nappy changing facilities. This practice was detailed as a temporary measure by the registered provider, and accepted by the Inspectorate as a temporary measure, following an inspection of the service in September 2018 until a foldaway wall-mounted nappy changing unit and an additional wash hand basin would be installed by the registered provider in the service's designated sanitary facilities located off the entrance hallway. To date, this work has not been completed.

Corrective & Preventive Action submitted by the Registered Provider

The registered provider stated the following corrective actions and preventive actions have been undertaken:

Corrective Action:

- (e) Staff have tried on occasions to fit a fold down changing unit and this was not an option as it was not a solid wall, the water in this toilet area was corrected and a thermostat was installed. The registered provider will try to look at this again in the new year.

The registered provider agreed at the regulatory compliance meeting to designate the sanitary accommodation located off the front hall of the registered provider's family home for the toilet-trained children in the service. It was also agreed that one of the cubicles in the toilet facilities beside the Baby Room will be converted to a changing unit and this will be in place at the end of January 2024.

Preventive Action:

(e) There are three toilets and two hand wash basins available for the children, the above corrective action has now been implemented and will address this concern going forward.

Supporting documentation presented for inspection at the regulatory compliance meeting:

- Photographs of a nappy changing unit in place in one of the two toilet cubicles in the sanitary facilities located off the entrance hallway which adjoins the Baby Room.

Summary Comment

The non-compliance identified under Regulation 29(e) has been addressed.