

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2015FL120				
<b>Name of Service:</b>	Hope Montessori Autism Care Centre				
<b>Address of Service:</b>	Mountview Youth & Community Centre, Lohunda Downs, Clonsilla, Dublin 15, Co. Dublin				
<b>Eircode:</b>	D15EY81				
<b>Name of Registered Provider:</b>	Sherene Powell				
<b>Service type:</b>	Full Day, Sessional				
<b>Date of Inspection:</b>	27/02/2024				
<b>Date 2 of Inspection:</b>	29/02/2024				
<b>No of pre-school children:</b>	<table border="1"> <tr> <td>AM</td> <td>16</td> <td>PM</td> <td>15</td> </tr> </table>	AM	16	PM	15
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<b>Address of the Early Years Inspectorate:</b>	Early Years Inspectorate 2nd Floor, Unit 4/5 The Nexus Building Blanchardstown Corporate Park Ballycoolin Dublin 15 D15 CF9K				
<b>Inspection undertaken by:</b>	C.Harte				
<b>Title:</b>	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

Hope Montessori Autism Care Centre is the full day care service based in an urban area. The service is in the Mountainview Youth and Community Centre and consists of two care rooms with two separate dedicated sanitary areas for the children's use. The service operates between 8:30am – 6:00pm catering to children between the ages of 2-6 years. The service participates in the Early Childhood Care and Education Scheme (ECCE) between 1:30pm – 4:30pm. The service has access to an enclosed outdoor area with a soft surface located at the side of the community centre.

The service also offers a registered school age childcare in a third care room.

## Staffing

Hope Montessori Autism Care Centre employs eight staff including the person in charge, director of education and six childcare professionals who work directly with the children. The registered provider was not present during the 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, safety, premises and facilities. The inspection may also focus on other areas as required.

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 a non-compliance identified under Regulation 23 in relation to safety. A response which adequately addressed the non-compliance was received on 29<sup>th</sup> February 2024.

### Acknowledgments

The inspector wishes to acknowledge the cooperation of the person in charge, staff and children who were present on the day of the inspection.

### Part III – Management and Staff

#### Regulation 9 – Management and recruitment

(1) A registered provider shall ensure that-

- (a) the service has a designated person in charge and a named person who is able to deputise as required,
- (b) at all times during the period when the pre-school service is being carried on, the designated person in charge or the named person referred to in subparagraph (a) is on the premises, 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)(c) The service had a designated person in charge and a named person to deputise as required throughout the inspection. Staff on the premises were aware of their role and responsibilities.

(b) The designated person in charge was present when the inspector arrived at the service and was present for the duration of the inspection.

(2) The files of eleven adults including the person in charge, director of education, six childcare professionals, and three students were reviewed on the day of the inspection. The following was observed:

- (a) Nine written and validated references were available from previous employers.
- (b) Thirteen written and validated references were available from a source other than a previous employer.
- (c) Garda vetting disclosures were available in relation to all eleven adults. The service also demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years.
- (d) Police vetting disclosures from six countries were available for ten adults who resided outside the jurisdiction for a period of longer than six consecutive months.

(4) Evidence was available to show that eight staff members who work directly with the children held at least a major award in Early Childhood Care and Education level 5 on the National Framework of Qualifications or a qualification deemed to be equivalent.

### Part III – Management and Staff

#### Regulation 11 - Staffing levels

*(1) Subject to this Regulation, a registered provider shall ensure that there is at all times an adequate number of adults working directly with the children attending the pre-school service.*

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

#### Compliance Information

(1) There was an adequate number of adults working directly with children as there were 3 adults working directly with 16 children the morning of day one of the inspection. The person in charge and the director of education were on the premises available to support.

(2) Ratios were maintained on day one of the inspection. Th following was observed:

#### **Marigold Room:**

At 9:40am there was 2 adults caring for 8 children aged between 2-3 years.

At 2:16 there was 2 adults caring for 6 children aged between 2-3 years.

**Jasmine Room:**

At 9:42 there was 2 adults caring for 8 children aged between 3-5 years.

At 2:28pm there was 2 adults caring 9 children aged between 3-5 years.

### 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;*
- (f) the opening hours and fees;*
- (j) details of any medication administered to a pre-school child attending the service with signed parental consent;*
- (k) details of any accident, injury or incident involving a pre-school child attending the service.*

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

#### Compliance Information

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

- (a) Details of the name, position, qualifications, and experience of the person in charge and of every other employee were maintained within the staff files.
- (b) The service Tusla certificate was displayed in the hallway and detailed the class of service and the age profile of children for which the service is registered to provide service to was outlined.
- (f) The opening hours and fees of the service were displayed on the noticeboard in the hallway.

(j) Following a review of a sample of ten records, the registered provider ensured a full record in writing was maintained for the administration of medication.

(3) The records referred to in 16(1) were available to review on the day of the inspection.

## Non-Compliance Information

(1)(k) The registered provider did not ensure a full record in writing was maintained for accidents and incidents. Of the ten records reviewed six records did not include a parent's/guardian's signature acknowledging they were informed of the incident.

## Corrective & Preventive Action submitted by the Registered Provider

### Corrective Action

A full documented record is being maintained for accidents and incidents on our School Management Platform (SMP) online. An automated response has been generated to notify parents as soon as incident and accident reports are done. Parents have free access to these reports once they are submitted online for them to view immediately and approve.

### Preventive Action

Management to ensure that parents are reminded to constantly check their children's individual SMP for any updates that may require their attention or approval.

### Supporting documentation submitted

Photographic evidence of School Management Platform.

## Summary Comment

The inspector has reviewed the actions taken and evidence submitted. The non-compliance identified under Regulation 16 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:

- The care rooms were secured with a magnetic lock and accessed with the use of a key fob or code. This prevented unauthorised persons entering the care rooms.
- The outdoor area was adequately secured with high fencing and a gate.
- First aid supplies were present and available for the children if needed while in the outdoor area.
- An outdoor area checklist was available and completed up to date.
- A monthly record was available and up to date for care room temperatures in the Jasmine room.

##### Infection Control:

- A pedal operated lidded bin was available in the nappy changing area for disposal of soiled nappies, gloves, and aprons.
- Hand soap was hygienically dispensed in the nappy changing area.
- Children were encouraged and supported by staff to wash their hands after playing outdoors.

##### Administration of Medication:

- No medication was observed being administered on the day of the inspection.

##### Safe Sleep:

- Staff were observed to check children regularly while they slept at ten-minute intervals. These checks were adequately recorded and detailed the colour, breathing and position of the children.
- The sleep room had an ambient temperature of 20.1°C while children over two years were sleeping.

##### Fire Safety:

- Fire exits were unobstructed.

#### Non-Compliance Information

##### General Safety:

1. Water was not thermostatically controlled at the sink in the sanitary area containing a toilet and changing bay. The temperature was recorded at 52.6°C at 11:00am. An immediate action notice was issued in relation to the temperature due to the increased risk of scalding.

2. One staff member was observed transitioning a group of eight children between the age of 2 - 3 years to the outdoor area. This transition required the children to walk past the front of the building which leads onto a carpark with no barrier. The proximity and access to the carpark posed a potential risk to the children which would be significantly reduced with the support of additional staff.
3. A large tub of disinfectant wipes was observed open and stored on the floor of the Jasmine room posing a potential risk to the children who could access them.
4. The toilets in the children's large sanitary area were in poor condition and posed a pinch risk to children. The following was observed.
  - Toilet 2 had a damaged toilet seat which was unstable and moved.
  - Toilet 3 had a damaged toilet seat which was broken in the left corner.
5. The radiator cover in the marigold room was damaged and had an exposed screw which posed a potential risk of injury to children.

### **Infection Control:**

6. The placement of toilet roll and disposable blue tissue roll posed an infection control risk as they were not hygienically dispensed. The following was observed:
  - Toilet roll was placed directly on the cistern.
  - Blue roll given to children to dry their hands was stored on the side of the sink.
7. Toilet 1 in the children's large sanitary area had a section of flooring missing exposing the concrete underneath. This created a tripping hazard and prevented effective cleaning.
8. Staff advised bed linen is stored in individual bags. A blanket stored outside of a bag in contact with toys and resources in the cupboard was observed in use by a child at sleep time. This is not in line with service practice as advised and posed a risk of cross contamination.

### **Administration of Medication:**

9. Emergency medication was stored in a child's bag accessible to children in the room. This is not in line with service policy which states any form of medication must never be left in a child's bag, including inhalers.

### Fire Safety:

- Attendance records were incomplete posing a potential risk of hindering safe evacuation of the premises and of incorrect information being provided to the fire services in the event of an emergency. At 11:52am eight children were present in the Jasmine room but only seven children were signed in. The eighth child was signed into room after the inspector brought it to the attention of staff.

### Action submitted by the Registered Provider

#### Corrective Action

#### General Safety:

- Corrective action:** An engineer has regulated water temperature the next day of the inspection. Water temperature is now 38.8 degrees Celsius.

**Preventive action:** To continue to conduct temperature checks at least twice daily to ensure that temperature is at recommended degree. A check list is in place to facilitate this.
- Corrective action:** Two staff members continue to always accompany children when walking out to the outdoor play area to prevent any risk of any child escaping.

**Preventive action:** The Manager will support teachers to always transition the children to and from the outdoor area.
- Corrective action:** The disinfectant wipes are stored in a locked-up cabinet in the classroom, to prevent any potential risk to children who could access them.

**Preventive action:** All disinfectant wipes must be kept in the locked-up cabinet. The manager to support the staff to ensure that this is being implemented daily.
- Corrective action:** The toilet seats have been replaced by the community centre.

**Preventive action:** The manager must check all sanitary areas each morning to ensure that no equipment is damaged. Where there is a damaged equipment, the onsite manager must notify the Community Centre immediately to get it fixed to prevent safety protocol being compromised.
- Corrective action:** Radiator in Marigold class has been fixed. No screw is visible or protruding.

**Preventive action:** A risk assessment must be conducted daily to ensure that radiator is in good condition with no visible screws protruding.

## Infection Control:

6. **Corrective action:** Dispensers have been placed in the classrooms and toilets for blue rolls.  
**Preventive action:** To ensure that dispensers are in good condition and blue rolls are replaced once dispenser is empty.
  
7. **Corrective action:** The floor has been repaired.  
**Preventive action:** The onsite manager to must do a general check in the Community Centre of any hazards and keep toilet out of use until it has been fixed.
  
8. **Corrective action:** Child brings blanket from home daily. It is kept in a bag. Spare bags have been purchased for emergency use where necessary. All other bedlinen and blankets are stored in bags and labelled with the child's name.  
**Preventive action:** Extra bags have been bought and stored for use where necessary.

## Administration of Medication:

9. **Corrective action:** Child's medication is stored in the class cupboard with a big clear visual as a reminder to staff that the medication is stored in a plastic container with the child's name labelled on it and another sign is placed in the cupboard to indicate exactly where the medication is stored.  
**Preventive action:** All children's medications should be stored in the cupboard and not in their school bags to prevent a case of any child accessing such items from children's bag.

## Fire Safety:

10. **Corrective action:** We use the online method – School Management Platform (SMP) to clock children in and out daily. However, where there are any network issues, children are manually clocked in and out.  
**Preventive action:** The manager will constantly check the SMP to ensure that every child is clocked in on arrival and out on departure. Staff will constantly do a head count to ensure that the children clocked in correspond with the number present. This will help to detect any discrepancies immediately.

## Supporting documentation submitted

### General Safety:

- Photographic evidence of temperature check.
- Photographic evidence of new toilet seat fitted.
- Photographic evidence of repaired radiator cover.

## Infection Control:

- Photographic evidence of blue roll dispenser fitted to wall.
- Photographic evidence of the repaired floor.
- Photographic evidence of sign.
- Photographic evidence of blanket in sealed bag.

## Administration of Medication:

- Photographic evidence of medication storage.

## Fire Safety:

- No supporting documentation submitted.

## Summary Comment

The inspector has reviewed the actions 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

(1) A review of the roster and First Aid Responder (FAR) certificates for three staff showed that the registered provider ensured that a person trained in FAR was available to the children during the opening hours of the service.

(2)(a)(b) An adequately stocked first aid box was available in the service. It was stored appropriately out of reach of the children but immediately available to the staff as needed.

### 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) The registered provider ensured that a record of fire drills was maintained in the service. The record showed that fire drills are completely monthly with the last fire drill taking place for both the morning and afternoon session on the 22<sup>nd</sup> February 2024.
- (b) A record of the number, type and maintenance record of firefighting equipment and smoke alarms was reviewed. The record showed that the firefighting equipment was last serviced 19<sup>th</sup> September 2023 while the smoke alarm was last serviced on 25<sup>th</sup> January 2024.
- (4) Notice of the procedure to be followed in the event of a fire emergency was displayed in the care rooms.

### Part VI - Safety

#### Regulation 27 – Supervision

*A registered provider shall ensure that pre-school children attending the service are supervised at all times.*

#### Non-Compliance Information

During the inspection it was observed that a student was not adequately supervised by the staff member in the care room, as a result the student was given the responsibility of bringing a child to the bathroom located outside of the room and down a separate corridor while the staff member remained in the care room.

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

##### Corrective and Preventive Action

**Corrective action:** Staff have been reminded that student placements are not allowed to accompany children to the toilet. The manager is extra body to support where needed.

**Preventive action:** Manager is on ground to support toilet time. No student on placement is allowed to accompany children to toilet, even if the placement is garda vetted.

**Supporting documentation submitted**

No supporting documentation submitted.

**Summary Comment**

The inspector has reviewed the actions submitted. The non-compliance identified under Regulation 27 has been addressed.

**Part VII - Premises and Space Requirements**

**Regulation 29 - Premises**

*A registered provider shall ensure that the premises of the service are-*  
*(d) cleaned, maintained and repaired, as required,*

**Non-Compliance Information**

- (d)
1. The service and materials were not cleaned and maintained as required posing an infection control risk. The following was observed:
    - Toys and shelving were observed to be unclean with accumulated dust and stains present.
    - In the Marigold room cosy corner pillows and the floor mat were stained.
    - The radiator cover in the Marigold room had dried in remnant of spilled food.
    - The children’s foot stool in the large sanitary area had accumulated dust around the edges.

This is not in line with the services infection control policy which states the premises will be maintained in a clean and hygienic state throughout the day and staff are responsible for the materials and equipment used and ensure they are clean, hygienic, and safe always.
  
  2. The radiator in the sanitary area containing a toilet and changing bay was observed in poor condition and badly rusted.

## Corrective & Preventive Action submitted by the Registered Provider

### Corrective and Preventive Action

1. Corrective action: Classrooms are cleaned every day and deep cleaned every Friday. Toys, washable materials, and equipment used are washed and sanitized at the end of each day and ready for use the next day. The community Centre has done a deep cleaning and the radiator.  
Preventative action: Staff have allocated cleaning time each day and checklist is done by the staff member. This is being supervised by the manager daily.
2. Corrective action: The Community Centre has been notified of the rusty radiators. However, this issue once again needs approval and funding from the Fingal County. A radiator cover was also suggested by Hope. This issue will be dealt with as soon as Fingal County gives approval.  
Preventative action: To ensure that any area that requires repairs is brought to the attention of the community centre for urgent attention.

### Supporting documentation submitted

3. Cleaning checklist submitted.

## Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 29 (d) 1 has been addressed.

The non-compliance identified under Regulation 29 (d) 2 remains outstanding.