

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015FL269
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Name of Service:	Small Steps
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Address of Service:	Phibblestown Community Centre, Phibblestown, Dublin 15, Co. Dublin
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Eircode:	D15 XT85
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Name of Registered Provider:	Hayley Devlin
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Service type:	Part Time
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Date of Inspection:	18/11/2024
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No of pre-school children:	AM	47	PM	18
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Address of the Early Years Inspectorate:	Early Years Inspectorate 2 nd Floor, Unit 4/5 The Nexus Building Blanchardstown Corporate Park Ballycoolin Dublin 15 D15 CF9K
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Inspection undertaken by:	T Nelson
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Title:	Early Years Inspector
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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.
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Description of service

Small Steps is a part-time day care service located in a residential area of Dublin 15 and is registered to provide part-time early childhood care and education to a maximum of 62 children aged 2 to 6 years old, Monday to Friday from 8.45am to 1.45pm during term time. The service participates in the Early Childhood Care and Education (ECCE) programme, which is delivered on a sessional basis from 8.45am to 11.45am and 12.30pm to 3.30pm. The service also provides for school age childcare in the afternoon.

The premises is located within a community centre and comprises of four care rooms to include Rooms 3 and 4 on the ground floor. There is sanitary accommodation available off the main corridor on this floor. Rooms 1 and 2 are located on the first floor. There is sanitary accommodation located directly off Room 1 and there is further sanitary accommodation on this floor located off the main corridor.

The outdoor play area is situated to the rear of the premises.

Staffing

Small Steps employs a total of eleven staff who work directly with the children. The registered provider works in the service and is the person in charge. There were nine staff members present on the day of the inspection including the registered provider.

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:

- Regulation 9(1),(2)(a)(b)(c)(d),(3) (4) 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 29 Premises.

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

- Regulation 16(1)(h)(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 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.

(3) The procedures specified in paragraph (2) shall be carried out prior to any person being appointed, assigned or allowed access to or contact with a child attending the pre-school service.

(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.

(2) The registered providers reported that eleven staff were employed to work in the service, and the files of these eleven staff were reviewed.

The registered provider had completed the following checks:

(a) Twelve validated written references were available from recent past employers.

(b) Nine validated written references were available from a source other than a past employer.

(c) Garda vetting disclosures had been obtained for 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.

(d) Documentary evidence showed that four adults had lived outside of the state for six months or more as adults and international police vetting from that state was available for inspection.

(3) Documentary evidence available showed that all of the checks outlined in (2) had been carried out prior to any of the adults having contact with the children in the service.

(4) There was evidence that the eleven 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

(2)(a)(b) One staff member had only one written validated reference available.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

Corrective action: a second validated reference for the staff member was sourced.

Preventive action: a delegated staff member will check files on a regular basis to ensure all paperwork is present.

Supporting documentation submitted

Copy of validated reference.

Notes from staff meeting.

Summary Comment

The inspector has reviewed the corrective and preventive actions taken and evidence submitted. The non-compliance identified under Regulation 9(2) has been addressed.

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) On the day of inspection there were an adequate number of adults working directly with the children attending the service to meet their basic care needs. There were nine staff available to the 47 children when the inspector arrived unannounced to the service.

(4) The adult to child ratios were correct throughout the inspection. Eight staff were allocated to work directly with the 47 children who were present on the morning of the inspection with a breakdown as follows:

- Room 1 - 3 adults to 14 children aged between 2 to 5 years old.
- Room 2 - 2 adults to 14 children aged between 2 to 5 years old.
- Room 3 - 2 adults to 9 children aged between 2 to 5 years old.
- Room 4 - 1 adults to 10 children aged between 2 to 5 years old.

There were four staff available to 18 children in Room 1 on the afternoon of the 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;*
- (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 the person in charge and of every other employee were maintained within the staff files.
- (b) The service Tusla certificate detailed the class of service and the age profile of children for which the service is registered to provide services.
- (c) Details of the adult to child ratios were displayed in the care rooms.
- (d) (e) The statement of purpose and function outlined the type of care or programme provided and the facilities available within the service.
- (f) The opening hours and fees of the service were detailed in the policy document.
- (g) The registered provider maintained all of the policies required in accordance with Regulation 10.

(h) Attendance records detailing the arrival and departure of the children on a daily basis were maintained.

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

(k) Following a review of a sample of ten records, the registered provider ensured a full record in writing was maintained for accident and incidents.

Non-Compliance Information

(1)(i) The registered provider did not ensure the staff roster was reflective of the adults who were working in the service as evidenced by the following:

- Two staff members who worked in the service were not included in the roster.

This was identified as a non-compliance on the last inspection held on the 15 November 2022 and actions put in place failed to prevent a recurrence.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

Corrective Action: a new staff roster has been updated.

Preventive action: the service has designated a staff member with the task of updating the staff roster on a weekly basis and this will be distributed to staff and displayed in the rooms.

Supporting documentation submitted

Copy of staff roster.

Copy of staff meeting.

Summary Comment

The inspector has reviewed the corrective and preventive actions taken and evidence submitted. The non-compliance identified under Regulation 16(1)(i) has been addressed.

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 service ensured there was adequate and suitable furniture and equipment available, for example:

- The furniture and equipment in the rooms was observed to be adequate for the number of children in the rooms, it was appropriate for the age range and stage of development of the children in the rooms, and was well maintained, durable and easy to clean.
- Equipment available to the children included kitchens for role-play, transporting, blocks for construction, small world play, stacking, matching, sorting and table top activities.
- There were rest areas available in each of the care rooms, where children were observed to take a break and engage in more restful activities.
- The outdoor play area had a green house where the children planted seeds and grew plants. There were props available such as watering cans and gardening tools. Plants which the children had grown were displayed in the Room 1.
- Products of children’s artwork were displayed throughout the rooms, and children had individual coats hooks and cubbies for their belongings.

Non-Compliance Information

1. Two shelving units in one of the care rooms were turned to the wall, limiting children’s access to the play materials. This was identified as a non-compliance on the last inspection held on the 15 November 2022 and actions put in place failed to prevent a recurrence.
2. The layout of the rooms were disorganised and lacked planning, which can limit a child’s ability to engage and focus on their play experiences in a meaningful way. For example:
 - Equipment and materials were not consistently grouped in defined play spaces which can distract children from engaging in focused play experiences.
 - Equipment was not consistently stored in easily identifiable sorted play boxes. This can restrict access to play resources and limit comfort in knowing where things belong.
 - Equipment was not displayed in a pleasing manner which can limit the possibility for the child to engage with the materials.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

Corrective actions:

1. The service report that all the points from the inspection have been discussed with staff at a meeting and staff have been advised that all shelving units must be open and accessible for all sessions.
2. The service ensure they have reviewed all care rooms and made more defined areas of interest. Areas have been replenished with art supplies and a home corner added with new materials for all rooms. A commitment was made to have some shelving built in Room 3 which will help with storage.

Preventive actions:

1. The shelves will remain accessible to the children.
2. Areas have been defined and the service commit to continuing to enhance all areas.

Supporting documentation submitted

1. Record of staff meeting. Photographic evidence.
2. Photographic evidence.

Summary Comment

The inspector has reviewed the corrective and preventive actions taken and evidence submitted. The non-compliances identified under Regulation 21 have been addressed and will be reviewed on the next inspection.

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

The registered provider ensures the following measures were in place:

General Safety:

- All internal doors were locked with the latch up high out of reach of children. This restricted the movement of children into the main community centre building.
- The main entrance to the building was managed and monitored by staff.
- Blind cords throughout the rooms were observed to be secured and out of reach of children.
- Windows were fitted with window restrictors.

- Cleaning products were stored out of reach of children.

Infection Control:

- Children's lunches were observed to be refrigerated.
- Appropriate waste disposal units were observed to be in use throughout the rooms and sanitary facilities.
- Handwashing was observed to be completed after outdoor play and before snack time.
- A child was observed to be tended to immediately after a toileting incident.

Non-Compliance Information

Infection Control:

Effective handwashing was not supported which can increase the risk of cross contamination. The following was identified:

- There was no liquid soap available in one of the care rooms on the morning of the inspection. It is acknowledged this was addressed during the inspection.
- The hand towel dispenser was empty in one of the care rooms on the morning of the inspection and there was no means to dry hands after handwashing.

Action submitted by the Registered Provider

Corrective & Preventive Action

Infection Control:

Corrective action: The service advised all staff at staff meeting to complete a risk assessment each morning which includes ensuring everything is ready for the day for handwashing. This has been addressed and all staff must check every morning that the soap dispensers have been filled.

Preventive action: the service ensure they will carry out the risk assessment and ensure everything is ready for handwashing for the children.

Supporting documentation submitted

Infection Control:

Record of staff meeting.

Summary Comment

The inspector has reviewed the corrective and preventive actions taken and evidence submitted. The non-compliance identified under Regulation 23 has been addressed.

Part VII - Premises and Space Requirements

Regulation 29 - Premises

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

- (b) safe and secure,*
- (d) cleaned, maintained and repaired, as required, and*
- (e) equipped with adequate and suitable sanitary facilities.*

Compliance Information

- (b) The outdoor area was fully enclosed.
- (e) The service had assigned sanitary facilities for the exclusive use of the children during the operational hours of the service.

Non-Compliance Information

The registered provider did not ensure the following:

- (d) The flooring in Room 3 was not sealed to the wall and there was a build up of dirt and debris in behind it as a result. This was identified as a non-compliance on the last inspection held on the 15 November 2022 and actions put in place failed to prevent a recurrence.
- (e) The following issues were identified in the sanitary facilities:
 - In the sanitary accommodation used by Rooms 2, 3 and 4; the pressure of the water when the mixer tap was turned to warm water was too high, causing the water to splash out of the sink onto the floor. As a result, there was a risk the children would use only cold water to hand wash.
 - The sink in the cubicle in Room 1 was blocked on the morning of the inspection. It is acknowledged this was addressed during the inspection.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

Corrective actions:

- (d) New skirting boards were fitted, sealing the wall to the floor.
- (e) A plumber was engaged on the 7 January 2025 to address the water pressure issues.

Preventive actions:

- (d) Skirting boards have been fitted and all areas around the skirting are sealed.
- (e) The sinks will be checked on a regular basis to ensure they are not blocked.

Supporting documentation submitted

(d) Photographic evidence.

(e) Video evidence.

Summary Comment

The inspector has reviewed the corrective and preventive actions taken and evidence submitted. The non-compliances identified under Regulation 29 has been addressed and will be reviewed on the next inspection.