

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015FL286		
Name of Service:	Tir na Nog Hartstown		
Address of Service:	6 Oakview Lawn, Dublin 15, Co. Dublin		
Eircode:	D15 C590		
Name of Registered Provider:	Veronica Baker		
Service type:	Full Day, Part Time		
Date of Inspection:	13/09/2023		
No of pre-school children:	AM	29	PM 15
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		
Inspection undertaken by:	T. Nelson and C. Harte		
Title:	Early Years Inspectors		

Authority to Inspect

The Tusla Early Years Inspectorate carries out inspections of Early Years Services under Section 58(J) of the Child Care Act 1991 (as inserted by Section 92 of the Child and Family Agency Act 2013).

Conditions if applicable Not applicable.

Description of service

Tir na Nog, Hartstown is one of two services operated by the registered provider and is registered to provide full and part-time care to a maximum of 30 children aged 2 to 6 years Monday to Friday from 7.30am to 6.00pm. The service also provides for school age childcare in the afternoon.

Tir na Nog is located in a residential area of Dublin 15 and operates from a converted two storey residential premises. There are two care rooms; Little Inventors (2-5 years old) on the ground floor providing full time care and the Rainbow Room (2-4 years old) on the first floor providing part time care up to 1.00pm. Other facilities include sanitary accommodation on both floors, a kitchen, and an outdoor play area to the rear of the premises.

Staffing

There are currently nine staff employed by the service including the person in charge, the deputy person in charge and seven childcare staff who work directly with the children. The registered provider does not work in the service. Present on the day of the inspection was the registered provider, the person in charge, five childcare staff and a staff member from the other service operated by 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),(2) Staffing Levels
- Regulation 19(1)(a) Health, Welfare and Development of child
- Regulation 23 Safeguarding the Health, Safety and Welfare of the Child
- Regulation 25 First Aid

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

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 13 September 2023 in relation to Regulation 23 as a general safety issue was identified during the inspection. A response which adequately addressed the issue was received to the inspectorate on the 14 September 2023.

Acknowledgments

The inspectors wish to acknowledge the cooperation of the registered provider, person in charge, staff and children who were present on the day of the inspection.

Part II - Registration and Register

Regulation 8 - Notification of change in circumstances

(3) Where a registered provider has been unable for good and proper reason to notify the Agency within the time specified in paragraph (1) or (2), as the case may be, of a change in the details in relation to the pre-school service contained in the register pursuant to section 58C(2) of the Act or Regulation 7(2), the registered provider shall notify the Agency in writing of the change as soon as possible thereafter.

Non-Compliance Information

(3) The registered provider did not notify the agency of the change of the person in charge in the service.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

Corrective Action: The service has submitted the Change in Circumstances form and have received notification from Tusla that the Change of person in charge has been approved.

Preventive Action: The service has created a Change in Circumstances policy and procedure.

Supporting documentation submitted

Application for Change in circumstance.

Change in circumstance approval.

Updated policy on Change in Circumstances.

Summary Comment

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

Part III – Management and Staff

Regulation 9 – Management and recruitment

(1) A registered provider shall ensure that-

- (a) the service has a designated person in charge and a named person who is able to deputise as required,
- (b) at all times during the period when the pre-school service is being carried on, the designated person in charge or the named person referred to in subparagraph (a) is on the premises, and
- (c) there is a clear management structure in the service that identifies the lines of authority and accountability in the service and the specific roles and responsibilities of each employee and unpaid worker.

(2) A registered provider shall ensure that each employee, unpaid worker and contractor is suitable and competent taking into consideration the nature of the needs of children, including by-

- (a) consideration of references from the person's past employers, if any, and in particular the most recent employer, if any,
- (b) consideration of references from reputable sources in the case of a person who has no past employers,
- (c) consideration of the vetting disclosure received from the National Vetting Bureau of the Garda Síochána in accordance with the Act of 2012 in respect of the person, and
- (d) ensuring, insofar as is practicable, that where a person has lived in a state other than the State for a period of longer than 6 consecutive months, he or she provides police vetting from the police authorities in that state.

(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.

The files of the nine staff were reviewed and the registered provider had completed the following checks.

(2)

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

- (b) Six validated written references were available from a source other than a past employer.
 - (c) Completed Garda vetting disclosures were available in respect of the nine staff members.
 - (d) One staff member who had lived outside of the state for six months or more as an adult had international police vetting from that state available for inspection.
- (3) Documentary evidence was available that checks had been carried out for three new staff members who were new to the service since the last inspection on the 10 August 2021 prior to them being appointed.
- (4) The nine 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.

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 were an adequate number of adults working directly with the children as there were four adults working with 29 children in the morning, and 2 adults working with 15 children in the afternoon. The person in charge was available to provide cover where needed across the rooms.
- (2) The correct adult/child ratio was maintained in the service throughout the inspection at all times. The person in charge was available to cover, and the adult child ratios during the morning session were maintained as follows;
- Little Inventors room - 2 adults to 14 children aged between 2 and a half years to four and a half years old.
- Rainbow room - 2 adults to 15 children aged between 2 and a half years to four and a half years old.

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, and

Compliance Information

(1) (a) The following observations are examples on how children's learning, development and well-being was observed being facilitated during the inspection:

Basic needs:

- A small step was provided to the children in the Little Inventor's room for handwashing after time in the outdoor play area. This encouraged independence for the children while educating them about hand hygiene.
- Staff responded immediately to a child's request for water by bringing drinks to the outdoor play area. Children were observed being encouraged to pour the drinks. This supported the development of self-esteem and confidence.
- During nappy changing staff engaged with the children talking softly and responding to the child throughout the care practice. Conversation and interaction support language development for children.
- Children with dietary requirements are supported with alternative diets. Information was clearly displayed to support these requirements.
- Sleep for children in the Little Inventor's room was needs led. This allowed the children to rest if they felt it was needed and to leave the rest area if not sleeping. Needs led sleep helps children to self-regulate.

The Physical and material Learning Environment:

- Areas were defined with toys and activities grouped together facilitating play experiences.
- Low shelving was present in the care rooms allowing access for children aiding choice in play.
- A variety of arts and crafts materials were available within the care rooms supporting the children to express themselves creatively.
- Real props and resources from home were available in the imagination area providing for real life, meaningful experiences encouraging exploration.
- Ride on toys, a slide and climbing frame were present in the outdoor area creating opportunity for gross motor movements.

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 took the following reasonable measures to safeguard the health, safety and welfare of children attending the service:

General Safety:

- Window restrictors were fitted on all windows.
- The outdoor area was fully enclosed.
- The kitchen was observed to be inaccessible to the children on the day of the inspection.
- Available toys and equipment were clean and in a good state of repair.

Infection Control:

- The premises were in a clean and hygienic condition and documented up to date cleaning records were available.
- Liquid soap and single use hand towels were available at all wash hand basins used by the children and the staff members.
- Staff were observed supporting children to hand wash before mealtime and after outdoor play.
- Staff were observed cleaning the table in preparation for mealtime.

Safe Sleep:

- A log was maintained for any sleeping children, where their colour, breathing and sleep position was checked every 10 minutes.
- Lighting in sleep area was at a subdued level.

Fire Safety:

- Procedures to be followed in the event of a fire were displayed in the care rooms.

Non-Compliance Information

General Safety:

1. The water temperature in the wash hand basins used by the children in the care rooms exceeded the recommended temperature of 43°C.

The following temperatures were recorded:

Room	Time	Temperature in °C	Required Temperature °C
Ground floor sanitary accommodation	11.25am	63.9°C	≤43°C
Rainbow Room Sink 1 – art area.	10.16am	55.8°C	
Sink 2 – rest area.	10.25am	60°C	

This posed a scald risk to the children.

An Immediate Action Notice was issued during the inspection to the registered provider with regards to this risk, and steps were immediately taken to reduce the water temperature.

- In the little inventor's room cleaning supplies were stored on an open shelf within reach of children. This posed a potential risk of poisoning.
- In the outdoor play area, a plastic toy with a broken door had a sharp jagged edge posing a potential risk of injury to children.

Infection Control:

- The practice observed regarding bed linen was not in line with service policy or effective for infection prevention and control. For example:
 - Bed linen used for sleep was not stored individually and was stored in one communal basket.
 - There was no record available for the cleaning and changing of bed linen.

Service policy states that linens will be stored hygienically, labelled for each child and will be laundered weekly.
- Pools of stagnant water was observed in the outdoor play space in two plastic toys which were accessible to children. This increased the risk of infection.
- Appropriate hygiene procedures were not observed to be carried out during nappy changing practices. For example:
 - A staff member was observed carrying a nappy to the outside bin for disposal and returning to a care room without hand washing.

- During a nappy change staff did not change gloves after removing a soiled nappy before putting on a fresh nappy and redressing the child.

This was not in line with best practice hygiene measures and increased the risk of contamination.

Administration of Medication:

7. The administration of medication was not sufficient to support effective safe practice.
 - There was no care plan available for children who required a specific type of medication.
 - Staff were not aware of the practice around the administration of the medication.
 - Expired medication remained in a room for a child who had previously left the service. This was not in line with service policy that stated unused medication would be returned to the parent and expired medication would be returned to the pharmacists.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1. Corrective Action: The plumber was called immediately and attended on Friday 15th of September. He checked and adjusted the thermostats on each handwashing basin.
Preventive Action: The service has introduced a checklist for the water temperature of hand washing basins, which is completed morning and afternoon, daily.
2. Corrective Action: The cleaning product was removed immediately and stored out of children's reach.
Preventive action: All staff were reminded to carry out risk assessments in their classrooms and in the gardens. All staff received training on the safe storage of cleaning products and garden risk assessment and cleaning.
3. Corrective action: The toy was disposed of immediately and a new kitchen was ordered to replace it.
Preventive action: All staff were reminded to carry out risk assessments in their classrooms and in the gardens. All staff received training on the safe storage of cleaning products and garden risk assessment and cleaning.

Infection Control:

4. Corrective Action: Bedlinen is now stored individually. Washing and changing records are kept on the service software application.
Preventive Action: Record keeping and cleaning checks by management.
5. Corrective action: The toys with the stagnant water have been removed as they were also broken.
Preventive action: Regular staff retraining and discussions during staff meetings on infection control, and nappy changing hand hygiene, and risk assessments for both outdoor and indoor areas.
6. Corrective action: All staff have undergone training on hand hygiene and infection control.
Preventive action: Regular staff retraining and discussions during staff meetings on infection control, and nappy changing hand hygiene, and risk assessments for both outdoor and indoor areas. The Infection Control policy has been updated and a copy provided to each staff member, who have replied to say they have read, understood and will apply the policy and procedure.

Administration of Medication:

7. Corrective Action: the service has created a care plan for children requiring them. Every staff member has received a copy of the care plan. Staff who have children requiring a care plan in their care have completed a copy of the care plan, for each child. The out-of-date medication was disposed of immediately. All staff have received training on medication administration and care plans for children with additional requirements. All staff have received and replied to say they read and understood the updated Medication Administration policy and the Care Plan for Children with a diagnosis.
Preventive Action: The care plans will be reviewed and updated every term. The manager will randomly check the expiry dates on medications and the medication administration records. Ongoing staff training and discussions during staff meetings.

Supporting documentation submitted

General Safety:

1. Evidence of engagement of plumbing services.
Evidence of water temperature checks on service software application.
2. Evidence of the safe storage of the cleaning product.
Evidence of staff training on the safe storage of cleaning products.
3. Evidence of training on garden cleanliness and risk.
Evidence of purchase of new equipment.

Infection Control:

4. Evidence of storage of bed linen.
Evidence of updated checklist.
5. Evidence of training on garden cleanliness and risk.
Evidence of purchase of new equipment.
6. Evidence of training on nappy changing and hand washing.
Evidence of updated policy on information control.

Administration of Medication:

7. Evidence of care plan template.

Summary Comment

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

Part VI - Safety

Regulation 25 - First aid

(1) A registered provider shall ensure that a person trained in first aid for children is, at all times, immediately available to the children attending the pre-school service.

(2) A registered provider shall ensure that a suitably equipped first aid box for children-

(a) is safely stored in an easily accessible and conspicuous position on the premises, and

(b) is available to the children attending the pre-school service at all times.

Compliance Information

(2)(a) and (b) Suitably equipped first aid boxes were available and were safely stored in an easily accessible and conspicuous position on the premises.

Non-Compliance Information

(1) A review of the staff roster showed that the registered provider did not ensure that a person trained to First Aid Responder level was available to the children at all times during the operational hours of the service.

It is acknowledged that two staff members trained in paediatric first aid were available at all times.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(1) Corrective action: the person in charge has reviewed the staff roster and was able to make one simple change to ensure that there is a FAR trained member of staff on duty at all times.

There are currently 4 staff members trained.

Preventive action: the service intends to have all full-time staff trained in FAR to ensure that even when staff are on holidays, there is always a member with FAR training present.

Supporting documentation submitted

Evidence of the service roster.

Summary Comment

The inspector has reviewed the actions taken and evidence submitted. The non-compliance identified under Regulation 25 has been adequately addressed.

Part VII - Premises and Space Requirements

Regulation 29 - Premises

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

- (b) safe and secure,*
- (d) cleaned, maintained and repaired, as required, and*

Compliance Information

(b) The premises appeared to be safe and secure, for example:

- The entrance to the service was securely locked on arrival to the service which prevented unauthorised persons gaining access and prevented children leaving unsupervised. Entry and exit to and from the premises was managed by staff.

Non-Compliance Information

(d) The service was not maintained and repaired as required.

1. A section of the floor in the Rainbow room was incomplete, exposing a surface that was unsealed which prevented adequate cleaning.
2. There was a hole cut out in the wall beside the nappy changing unit in the upstairs sanitary accommodation, exposing piping. This prevented adequate cleaning of the area.

Corrective & Preventive Action submitted by the Registered Provider

(d) Corrective and Preventive Action

Corrective action: A maintenance person fitted wood flooring to fill in the gap in the Rainbow room. He also fitted a washable box around the exposed pipes.

Preventive Action: the person in charge will inspect areas after work has been carried out, and record any risks which will be dealt with in a timely manner.

Supporting documentation submitted

Photographic evidence of the works completed.

Summary Comment

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