

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015FL312
--------------------------	-------------

Name of Service:	The Stables Montessori
-------------------------	------------------------

Address of Service:	8 The Stables, Strand Road, Portmarnock, Co. Dublin
----------------------------	---

Eircode:	D13 CP78
-----------------	----------

Name of Registered Provider:	Claire Doughan
-------------------------------------	----------------

Service type:	Sessional
----------------------	-----------

Date of Inspection:	05/09/2024
----------------------------	------------

No of pre-school children:	AM	17	PM	0
-----------------------------------	----	----	----	---

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 and S McKenna
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

The Stables Montessori was established by the registered provider and her business partner in 2012 and operates as a privately-owned sessional early years service which is registered to operate from 9.00am to 12.30pm and from 12.45 to 4.15pm daily, although the afternoon service is currently not in operation. Eligible children are facilitated to avail of the state-funded Early Childhood Care and Education (ECCE) scheme each morning with the option provided for children to attend for a further 30 minutes daily for an additional fee. The Stables Montessori caters for a maximum of 21 pre-school children from 2 years 8 months to 6 years of age. Additionally, the service has recently been registered to accommodate school aged children and began the provision of this service at the commencement of the new school year in the week preceding the inspection.

Staffing

The registered provider and 1 staff member currently work in the service on a daily basis, in addition to a second staff member who works in the service on a part-time basis for 2 - 3 days each week. The registered provider's business partner is currently on extended statutory leave but ordinarily also works in the service.

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, 10, 11, 15, 16, 19, 23, 24, 25, 26, 27, 28 and 32.

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

This unannounced inspection was carried out in response to a concern received by the Early Years Inspectorate.

The registered provider sought an extension from the Inspectorate to submit the CAPA following the inspection due to unexpected leave. An extension was granted and the registered provider subsequently submitted the CAPA within the revised timeframe.

Acknowledgments

The inspectors wish to acknowledge the cooperation of the registered provider, staff member 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.

(7) A registered provider shall ensure that all employees, unpaid workers and contractors are appropriately supervised and provided with appropriate information, and where necessary training, including in relation to the following:

- (a) the policies, procedures and statements of the service specified in Schedule 5;

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 when required.

(b) The registered provider and the designated deputy person in charge were present in the service when the inspectors arrived, and both remained present for the duration of the inspection.

A total of 4 staff files were reviewed, maintained in respect of the registered provider and the 3 staff members employed in the service.

(2)(a)(b) The following references were available for the 4 adults who work in the service:

- Two adults had 2 written references.
- One adult had 1 written reference.

(c) Garda vetting disclosures had been obtained for the 4 adults employed in the service. However, in relation to 1 of these employees the service did not adhere to the re-vetting timeframes as outlined in the Early Years Inspectorate Regulatory Notice, requiring services to renew Garda vetting every three years. Please refer to the information outlined under regulation 23 of this report.

(4) The 4 adults employed in the service each held a major award in Early Childhood Care and Education at Level 5 - 7 on the National Framework of Qualifications.

Non-Compliance Information

(2)(a)(b) The following was not in place in relation to staff references.

- There were no written and validated references available for inspection for 1 adult employed in the service.
- A second written and validated reference was not available for inspection for 1 adult employed in the service.
- There was no evidence available in the service to show that the 5 references presented for inspection had been validated.

(d) Three adults employed in the service did not have a curriculum vitae or recorded history of past employment available for inspection. Therefore, it was not possible to determine whether police vetting from other jurisdictions were required for these adults.

(7)(a)

1. There was no documentation available to show that the registered provider had ensured that staff members were provided with relevant information and training when commencing employment in the service in relation to the service's policies and procedures. The registered provider confirmed that records of new staff members' induction into the service were not maintained.
2. The registered provider confirmed that staff members were not provided with ongoing formal supervision in order to support them in their work practices.

Corrective & Preventive Action submitted by the Registered Provider

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

Corrective Action

(2)(a)(b) Registered provider is in the process of validating all references by phone or email.

(d) CVs have been obtained, none of these staff members have worked abroad and therefore they do not require vetting from outside Ireland.

(7)(a)

1. Registered provider will ensure all staff are provided with more training before employment commences, as it stands it is informal and ongoing by observation and working alongside current employees.
2. All staff will be provided with ongoing supervision and training to support practices and their wellbeing.

Preventive Action

(2)(a)(b) From now on if any new staff member joins the service the reference will be validated before that staff member commences their employment.

(d) All CVs to be kept on file as they are now; unfortunately they were saved on computer and the broadband was acting up on the day of inspection.

(7) (a)

1. The service is developing a training method and induction programme for all new staff to be completed before they commence. Ongoing training also to be conducted.
2. Always keeping an eye on courses and discussing what areas staff feel they would like to learn more about and develop.

Supporting documentation submitted

The registered provider submitted the following documentary evidence:

- Copies of outstanding written references and confirmation of validation.
- Copies of relevant CVs.
- Copies of the service's staff training policy and staff supervision policy.

Summary Comment

The inspectors reviewed the corrective actions and evidence submitted by the registered provider following the inspection. The registered provider demonstrated that the non-compliances identified under Regulation 9 have been adequately addressed.

Part III – Management and Staff

Regulation 10 - Policies, procedures etc. of pre-school service

A registered provider of a pre-school service shall ensure that the written policies, procedures and statements specified in Schedule 5 are in place for the service.

Non-Compliance Information

The following policies were unavailable for inspection:

- Staff training policy
- Staff supervision policy
- Risk management policy incorporating drop-off and collection procedures for children attending the service
- Complaints policy

Corrective & Preventive Action submitted by the Registered Provider

The registered provider stated the following corrective action and preventive action has been carried out:

Corrective Action

All policies have been developed by staff and management.

Preventive Action

Registered provider will be checking all policies are up to date and marked off a checklist monthly or bi-monthly.

Supporting documentation submitted

The registered provider submitted the following documentary evidence:

- Copies of the relevant policies.

Summary Comment

The inspectors reviewed the corrective action and policies submitted by the registered provider following the inspection. The registered provider demonstrated that the non-compliance identified under Regulation 10 has been adequately 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.*
- (3) Subject to paragraph (5), a registered provider of a sessional pre-school service shall ensure that at all times the minimum ratio of adults to children specified in column (3) of Part 2 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) therefore at that reference number is satisfied.*

Compliance Information

(1) On the day of inspection there were an adequate number of adults working directly with the children attending the early years service.

(3) The minimum adult/child ratio was maintained throughout the inspection.

- In the Downstairs Room there were 7 children aged 3 years – 3 years 9 months being cared for by 1 staff member.
- In the Upstairs Room there were 10 children aged 3 years – 4 years 6 months being cared for by 1 staff member.

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.*

Compliance Information

(1)(a) – (i) As 21 children were enrolled an assessment of compliance of children's records was carried out. Of the 21 records that were required, 11 were available for review and were appropriately completed.

Non-Compliance Information

(1)(a) – (i) Of the 21 children's forms required to be maintained in the service, the forms for 10 children who were present in the service on the day of inspection were unavailable. Therefore, the service did not have sufficient documented details available for these children including a record of the person(s) authorised to collect the children from the service, information as to whether the children had allergies or not or written parental consent for the children to avail of medical treatment in the event of an emergency.

Corrective & Preventive Action submitted by the Registered Provider

The registered provider stated the following corrective action and preventive action has been carried out:

Corrective Action

(1)(a) – (i) All registration forms have now been provided.

Preventive Action

(1)(a) – (i) Ensure that all registration forms are sent via email prior to the start of the first term.

Supporting documentation submitted

The registered provider submitted the following documentary evidence:

- Copies of the relevant registration forms.

Summary Comment

The inspectors reviewed the corrective action and evidence submitted by the registered provider following the inspection. The registered provider demonstrated that the non-compliance identified under Regulation 15 has been adequately addressed.

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:

- (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)(i) An up-to-date weekly staff roster was available in the premises.

(k) The service had a record in writing of accidents, injuries and incidents involving pre-school children. The records were found to be clear and legible, and included parental signatures to document that they had been informed and were aware of the relevant incidents that had occurred. The last recorded incident was documented to have occurred on 25/04/2022 and the registered provider stated no further accidents or incidents had occurred in the service since then.

Non-Compliance Information

(1)(i) Staff sign in records were not maintained for the day of the inspection or for the 3 days during the previous week when the service had resumed operating following the summer holidays.

(j) Medication administration forms were not maintained in respect of medication administered to a child in the service on a daily basis. Instead, a small, coloured mark was recorded in the attendance record to denote that the medication had been administered. This practice was inadequate as written records were not available to show the date, time and dosage of the medication administered and that the procedure had been checked and undertaken by 2 staff members. Furthermore, written confirmation was not available to show that the child's parent or guardian had been informed and were aware that the medication had been given to their child as prescribed. This is at variance with the service's medication administration policy which stated *"Administration of medication will be done in the presence of a witness, who will co-sign the medication administration record... an individual record will be kept for each child with on-going medication requirements."*

Corrective & Preventive Action submitted by the Registered Provider

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

Corrective Action

(1)(i) Staff sign in records are now filled in daily and signed off.

(j) Medication administration forms for said child now filled in daily and witnessed by manager herself.

Preventive Action

(1)(i) Make sure all staff are aware of this policy and check every morning and afternoon.

(j) Any child who requires the administration of medicine will always have a record completed and the staff will be trained and informed of this on a continuous basis.

Supporting documentation submitted

The registered provider submitted the following documentary evidence:

- Copy of staff sign in records.

- Copy of medication administration forms maintained since the inspection in respect of medication administered to a child on a daily basis in the service.

Summary Comment

The inspectors reviewed the corrective actions and evidence submitted by the registered provider following the inspection. The registered provider demonstrated that the non-compliances identified under Regulation 16 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, and

Compliance Information

(1)(a) The following examples demonstrate how each child's learning, development and well-being was facilitated within the daily life of the service:

Basic needs:

- The registered provider and staff member were observed to be appropriately responsive in their interactions and with meeting the needs of the children in their care.
- Snacks and drinks were provided by the parents for the children's morning snack. These included sandwiches, rice cakes, crackers, cheese, yogurts, fruit, vegetables and water. The registered provider and staff member sat with the children in their respective rooms at snack time, encouraging conversation and extending interactions with their group of children in a relaxed manner.
- The proximity of the sanitary accommodation to the care rooms facilitated children who were able to use the toilet independently, to do so. Discrete supervision and assistance were provided by the registered provider and staff member when required. The service's policy requires children to be toilet trained prior to commencement at the service, or for parents or guardians to be available to collect their child in the event that a nappy change is required during their attendance in the service. Nappy changing facilities are not provided in the premises.

- The registered provider and staff member supported and encouraged the children to become independent and self-caring, suitable to their age and stage of development, including when eating, using the toilet, dressing for home, caring for their belongings and tidying away after play.

Supporting Relationships around Children

- The registered provider and staff member were observed to interact with the children in an engaged manner during the inspection. The children were observed asking the registered provider and staff member for help at times which was promptly provided.
- Child-led play was facilitated during the inspection as evidenced by children playing in different interest areas in their care rooms and by being involved in a range of tabletop activities, including when the inspectors arrived unannounced to the service.
- The registered provider and staff member shared relevant information verbally with parents when they were collecting their children at the end of the day.

Physical & Material Environment:

- The play materials and equipment provided in both rooms were positioned at a level that was accessible to the pre-school children.
- The two care rooms were adequately equipped with play equipment and materials to meet the needs of the children present on the day of inspection. The care rooms were out in designated interest areas including home corners, construction areas and library areas.
- Play dough was provided to facilitate sensorial play in the Upstairs Room during the inspection.
- The library area in both rooms contained an adequate number of books to support the children's language development and provide choice for storytelling. The registered provider and staff member were observed reading and singing to the children in each room during the inspection.
- Children's artwork was on display.

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 following are examples of measures undertaken by the registered provider to safeguard the health, safety and welfare of the pre-school children attending the service:

General Safety:

- The entrance door leading into the premises was appropriately secured to prevent the children from exiting unsupervised and to restrict unauthorised persons from gaining access to the early years service. A doorbell was provided at the entrance door to allow parents or visitors notify staff members of their arrival to the service.
- The warm water temperature in the sanitary accommodation did not exceed the recommended maximum water temperature of 43°C which reduced the risk of scalding for the children.
- Cleaning agents and kettles were stored safely on high shelving out of reach of children.
- A suitable handrail was fitted on the carpeted stairs which reduced the risk of children falling when making their way to and from the Upstairs Room.

Infection Control:

- In the Upstairs Room the children's tables were observed to be appropriately cleaned prior to and following the morning snack.
- The children in the Upstairs Room were encouraged by the registered provider to wash their hands before eating, after using the toilet and after messy play.

Outings:

- The registered provider stated that pre-school children do not go on outings from the service.

Non-Compliance Information

The following risks were identified that could impact on the health, safety and welfare of a pre-school child attending the service:

General Safety:

1. Garda vetting was available for the registered provider and all 3 staff members. However, 1 of these vetting disclosures was not dated within the previous three years and therefore did not comply with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years.
2. A child in the Downstairs Room was observed to eat popcorn as part of their snack and a staff member and child were heard discussing a plan to have more popcorn in the service later in the week. Popcorn for children under the age of 5 years old is deemed a choking hazard
3. Medication was observed to be stored in a low-level unlocked fridge in the Downstairs Room posing a risk that a child could access this prescribed medication.

Infection Control:

4. Adequate facilities for hand drying, for example paper towels, were not provided in the service including in the sanitary accommodation provided for the children or in the separate staff toilet area. A communal cloth hand towel was provided in the sanitary accommodation off the Upstairs Room, and this was observed being used by children when drying their hands after hand washing. Communal hand towels may harbour bacteria and therefore pose an infection control hazard when used by children in an early years setting.
5. Thermostatically controlled warm water was not available for hand washing at the wash hand basin in the sanitary accommodation adjoining the Downstairs Room. The water in both the hot tap and the cold tap felt cold to touch. Furthermore, the hand washing practices in the Downstairs Room was inadequate with sanitiser or wipes used to wipe clean the children's hands before lunch instead of warm running water and liquid soap.
6. The tables in the Downstairs Room were not cleaned prior to children being served their snacks.
7. Children's snacks provided by the parents, some of which contained meat and dairy produce, were stored in the children's school bags at room temperature on the day of inspection, rather than in the fridges provided in both care rooms. This increased the risk of bacteria multiplying in the perishable food items.

Administration of Medication:

8. A care plan was not available for a child with an on-going medical condition, outlining the specific action to be undertaken by staff members in the event that the child became unwell in the service, authorisation for the administration of emergency medication if required in the service, and guidance on when to seek medical attention for the child.

Action submitted by the Registered Provider

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

Corrective Action

General Safety:

1. Registered provider has contacted the relevant organisation in relation to Garda vetting and will be following up on this daily until it is resolved.
2. Popcorn is now not allowed in the pre-school service.
3. Fridge locks purchased and in use.

Infection Control:

4. Paper towels are now given out by the teacher once a child has washed their hands.
5. Making sure the thermostat is at the correct temperature daily.
6. Staff have been informed that tables are to be cleaned and disinfected prior to and after snack time.
7. All food that needs to be stored in the fridge will be removed and stored there daily.

Administration of Medication:

8. A care plan has now been devised and discussed with the child's parent.

Preventive Action

General Safety:

1. Making sure that Garda vetting is applied for before the expiration date.
2. All parents have been informed and staff will inform incoming parents of said rule.
3. Always ensure medicine is out of reach and locked in fridge.

Infection Control:

4. Make sure all staff are aware of hygiene regulations and discuss with all the children.
5. Thermostats will be checked by checking the tap temperature before open of business every morning and they will be adjusted if necessary.
6. Signs and checklists to be checked off by staff daily.

7. Asking parents to separate all food that needs to be refrigerated and putting the children's names on it so that it can be directly transferred each morning.

Administration of Medication:

8. Make sure if this happens with another child that the care plan is discussed and signed off on prior to the child commencing in the service.

Supporting documentation submitted

The registered provider submitted the following documentary evidence:

- Copy of the updated Garda vetting.
- A photograph showing a child-proof latch in place on the fridge.
- Copy of a detailed care plan for the child who has an on-going medical condition.

Summary Comment

The inspectors reviewed the corrective actions and evidence submitted by the registered provider following the inspection. The registered provider demonstrated that the non-compliances identified under Regulation 23 have been adequately addressed.

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.

(3) A registered provider shall ensure that-

(a) no person other than-

(i) pre-school child attending the service,

(ii) a person dropping or collecting such a child,

(iii) an employee, or

(iv) an unpaid worker, can enter the premises without his or her entry being approved by an employee, and

(b) a daily record in writing is kept of the entry on the premises of any such person.

Compliance Information

(1) The service maintained accurate details of all children in attendance during the inspection. The children were entered as present in attendance records, noting each child's arrival and departure times.

Non-Compliance Information

(3)(a)(b) A system was not in place to record a visitor's attendance on the premises and the purpose of their visit. The inspectors were not requested to record their attendance in the premises and the registered provider confirmed that records were not maintained of authorised visitors facilitated to enter the service.

Corrective & Preventive Action submitted by the Registered Provider

The registered provider stated the following corrective action and preventive action has been carried out:

Corrective Action

(3)(a)(b)

A visitor's sign in sheet has been enforced and in use since the inspection and is filled in and signed any time there is a visitor on the premises.

Preventive Action

Visitor sign in sheet will be readily available and all staff have been informed of the new policy.

Supporting documentation submitted

The registered provider submitted the following documentary evidence:

- Copy of a visitor's sign in sheet.

Summary Comment

The inspectors reviewed the corrective action and evidence submitted by the registered provider following the inspection. The registered provider demonstrated that the non-compliance identified under Regulation 24 has 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

- (1) One staff member currently working in the service held in-date First Aid Response (FAR) training. Based on a review of the staff roster, this staff member was scheduled to be present in the service each morning and was therefore immediately available to the pre-school children who attend the early years service on a sessional basis.
- (2)(a) and (b) There was an adequate stock of first aid supplies available in the service which were due to be added to the first aid boxes which were stored in conspicuous locations on the premises and which were available for the children in attendance, in the event of an emergency.

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 firefighting 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

- (b) The maintenance certificate for the fire extinguishers was dated within the recommended annual servicing frequency, due for renewal in September 2024 at the latest.
- (4) The fire evacuation procedures were displayed in the service which contained details in relation to the procedure to be conducted in the event of a fire.

Non-Compliance Information

- (1)(a) On the day of inspection a written record was not available of fire drills that had taken place within the service.
- (b) There was no maintenance record available for inspection in relation to the smoke alarms on the premises.

Corrective & Preventive Action submitted by the Registered Provider

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

Corrective Action

- (1)(a) Fire drill records had been done up to end of June, visit was early September so staff had no new ones to display, manager has sent photo of the drills in October and September.
- (b) Sending on records again, this was due to broadband issues on the day of inspection as they were on file.

Preventive Action

- (1)(a) Will make sure to have old fire drill records on file from now on.
- (b) Make sure to have a hard copy available at all times.

Supporting documentation submitted

The registered provider submitted the following documentary evidence:

- Copy of the fire drill records showing the most recent drill took place in the service on 18/10/2024.
- Copy of a maintenance certificate showing that the smoke alarms were serviced in August 2024.
- Copy of a maintenance certificate showing that the fire extinguishers were serviced on 13/09/2024.

Summary Comment

The inspectors reviewed the corrective actions and evidence submitted by the registered provider following the inspection. The registered provider demonstrated that the non-compliances identified under Regulation 26 have been adequately addressed.

Part VI - Safety

Regulation 27 – Supervision

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

Compliance Information

On the day of the inspection the inspectors observed the staff members appropriately supervising the children in attendance. The registered provider and staff member demonstrated and described the necessity of primarily providing supervision by sight but relying on sound when the entrance door was required to be open, such as when children were arriving to and being collected from the service. The entrance door was located in the hallway adjoining the Downstairs Room which necessitated the staff member in this care room to move into the hallway to answer the door while leaving children in the Downstairs Room out of her direct line of vision. The registered provider and staff member stated that supervision was provided by listening to the children's sounds during these short intervals and that the period of interaction at the doorway was kept brief to facilitate the staff member to return promptly to the care room. This was observed in practice during the inspection. The registered provider stated that play materials and equipment and all necessary supplies were prepared and provided in both rooms in advance of the children's arrival on a daily basis to ensure that the adults could remain in their respective care rooms throughout the session. This practice was observed during the inspection.

Non-Compliance Information

A documented risk assessment was not available in the service to identify the relevant safety issues associated with answering the front door, particularly on the days when only two staff members are present in the service, one of whom cares for the children accommodated in the Upstairs Room and one of whom cares for the children in the Downstairs Room. It is acknowledged that the registered provider and staff member described the control measures implemented to ensure adequate supervision of the children in attendance, primarily by sight and briefly by sound, when managing the front door, in discussion with the inspectors during the inspection but the associated risks and hazards or robust control measures were not recorded.

Corrective & Preventive Action submitted by the Registered Provider

The registered provider stated the following corrective action and preventive action has been carried out:

Corrective Action

A documented risk assessment has now been devised to ensure the safety of all children in the morning whilst the door is being answered.

Preventive Action

Registered provider has developed a new strategy for the morning drop off and it has been implemented and is working well.

Supporting documentation submitted

The registered provider submitted the following documentary evidence:

- Copy of a risk assessment compiled in relation to children and adults entering and leaving the service.

Summary Comment

The inspectors reviewed the corrective action and evidence submitted by the registered provider following the inspection. The registered provider demonstrated that the non-compliance identified under Regulation 27 has been adequately addressed.

Part VI - Safety

Regulation 28 - Insurance

A registered provider shall ensure that the pre-school service is adequately insured.

Compliance Information

The registered provider had insurance cover in place for 21 pre-school children attending the service on a sessional basis and for an afterschool service. The policy showed that the service was insured until 27/03/2025.

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,*
- (c) kept adequately lit, heated and ventilated*

Compliance Information

(b) The entrance door leading into the premises was appropriately secured to prevent the children from exiting unsupervised and to restrict unauthorised persons from gaining access to the service.

Non-Compliance Information

(c) The mechanical ventilation unit was observed to not be operating in the children's sanitary accommodation adjoining the Downstairs Room on the day of the inspection. This non-compliance was found on the last inspection.

Corrective & Preventive Action submitted by the Registered Provider

The registered provider stated the following corrective action and preventive action has been carried out:

Corrective Action

(c) Registered provider is currently seeking out a ventilation specialist to deal with this ongoing issue and she is due to meet the property manager to try and find a solution.

Preventive Action

(c) As above and always keeping rear window open.

Supporting documentation submitted

- Email from the property manager and photographs submitted to inspector confirming window vents have been installed in Downstairs front window on 06/11/2024 to achieve cross ventilation.

Summary Comment

The inspectors reviewed the corrective action and evidence submitted by the registered provider following the inspection in relation to Regulation 29(c). The inspectors accept the assurances provided by the registered provider that this non-compliance has been adequately addressed. This will be reviewed at the next inspection.

Part VIII - Notifications and Complaints

Regulation 32 – Complaints

- (1) A registered provider shall ensure that the complaints policy of the service specifies-
- (a) the procedure to be followed by a person for the purposes of making a complaint in relation to the service,
 - (b) the manner in which such a complaint shall be dealt with, and
 - (c) the procedures for keeping a person who makes such a complaint informed of the manner in which it is being dealt with.
- (2) A registered provider shall ensure that-
- (a) a record in writing is kept of a complaint made to the provider in respect of the pre-school service, and
 - (b) the complaint is duly dealt with in accordance with the provider's complaints policy.
- (3) A record in writing referred to in paragraph (2)(a) shall-
- (a) include the nature of the complaint and the manner in which the complaint was dealt with, and
 - (b) be open to inspection on the premises by an authorised person.

Compliance Information

(2)(a) A record of a recently submitted complaint made in respect of the operation of the service was maintained electronically on the premises. The inspectors were informed that no other complaints were received since the service commenced operation in 2012.

Non-Compliance Information

(1)(a)(b)(c) A complaints policy was not available for inspection.

(2)(b), (3)(a)(b) There was no record available to demonstrate how the recently submitted complaint was dealt with by the registered provider.

Corrective & Preventive Action submitted by the Registered Provider

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

Corrective Action

(1)(a)(b)(c) A complaints policy on the day was saved on the desktop but unfortunately staff were unable to access it.

(2)(b), (3)(a)(b) As stated above a risk assessment was drawn up following complaint.

Preventive Action

(1)(a)(b)(c) Keep a hard copy of policies and make sure that complaints are documented.

(2)(b), (3)(a)(b) A new strategy was developed in the mornings involving staff and parents and has been implemented and is working well.

Supporting documentation submitted

The registered provider submitted the following documentary evidence:

- Copy of the service's complaints policy.
- Copy of the risk assessment developed on foot of the complaint.

Summary Comment

The inspector reviewed the corrective actions and evidence submitted by the registered provider following the inspection. The registered provider demonstrated that the non-compliances identified under Regulation 32 have been adequately addressed.