

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2015GY016				
<b>Name of Service:</b>	Athenry Community Childcare				
<b>Address of Service:</b>	Community House, 69A Cullairbaun, Athenry, Co. Galway				
<b>Eircode:</b>	H65 K104				
<b>Name of Registered Provider:</b>	Veronica Daly				
<b>Service type:</b>	Sessional				
<b>Date of Inspection:</b>	20/03/2025				
<b>No of pre-school children:</b>	<table border="1"> <tr> <td>AM</td> <td>11</td> <td>PM</td> <td>N/A</td> </tr> </table>	AM	11	PM	N/A
AM	11	PM	N/A		

<b>Address of the Early Years Inspectorate:</b>	<p>Tusla</p> <p>Child and Family Agency,</p> <p>Early Years Inspectorate,</p> <p>Quality Assurance Directorate,</p> <p>Clinical &amp; Administration Building,</p> <p>Block A - (1st Floor- Green Corridor),</p> <p>Merlin Park, Galway.</p>
<b>Inspection undertaken by:</b>	<p>E. Friel</p> <p>F. Duffy</p>
<b>Title:</b>	<p>Early Years Inspector</p> <p>Inspection and Registration Manager</p>

### 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

Athenry Community Childcare is a sessional early years care and education service registered to accommodate children aged from 2 – 6 years of age. Opening hours are from 09:00 to 12:30 and The Early Childhood Care and Education (ECCE) Scheme is accommodated within these hours.

The service operates from a repurposed property which is located in a residential area of Athenry town in county Galway. The ground floor is in use as a childcare premises consisting of a small reception area, two interconnecting playrooms, kitchen, adult and children’s sanitary areas and a storage room. There is also an administration office on the first floor. A secure outdoor play area is available to the front, rear and side of the building.

### Staffing

There were two staff present in the service along with an adult on a work placement programme. The registered provider and two additional adults, on the work placement programme, were not rostered on.

### 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 and safety. The inspection focused on an examination of compliance under regulations;

Regulation 9 - Management and recruitment (1)(a)(b), (2)(a)(b)(c)(d) and (4)

Regulation 11 - Staffing levels

Regulation 16 – Record in relation to pre-school service (1) (i)

Regulation 19 - Health, welfare and development of child (1)(a)

Regulation 23 - Safeguarding health, safety and welfare of child

Regulation 24 – Checking in and out and record of attendance (1)

Regulation 25 - First aid (1) (2) (a) and (b)

Regulation 26 - Fire safety Measures (1) (a) (b) and (4)

Regulation 28 - Insurance

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 inspection was triggered by information received by the Early Years Inspectorate.

A referral to Better Start, Quality Development Service, was made on 27/3/2025, with the permission of the registered provider.

### Acknowledgments

The inspectors wish to acknowledge the cooperation of the designated 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) The registered provider ensured that there was a designated person in charge and a named person available to deputise.
  - (b) Both the designated person in charge and named person were present in the service during the hours of operation.
  - (c) A clear management structure was available in the parent booklet, and staff were aware of their roles and responsibilities.

- (2) Recruitment files for all six adults, including the registered provider and three adults on placement, were reviewed:
- (a) Eight of the twelve validated references were from past employers.
  - (b) The remaining four of the twelve validated references were from sources other than past employers.
  - (c) Garda vetting disclosures had been obtained for all six adults for whom they were required. However, 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.
  - (d) International police vetting was available for two adults who had lived outside of Ireland for a period of six consecutive months or longer.
- (4) There was evidence that five adults had attained major awards in Early Childhood Care and Education at Level 5 or above on the National Framework of Qualifications. The remaining adult on placement did not require a childcare qualification.

### 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) The registered provider ensured that there were an adequate number of adults working directly with the children during the hours of operation.
- (3) The adult/child ratios were met. There were 11 children in attendance with 2 adults and one student on a placement programme.

## Part IV – Information and Records

### Regulation 16 – Record in relation to pre-school service

*(1) A registered provider shall ensure that a record in writing is kept of the following information in relation to the service:*

- (a) the name, position, qualifications and experience of the person in charge and of every other employee, unpaid worker and contractor;*
- (i) details of staff rosters on a daily basis.*

#### Compliance Information

(a) The name, position, qualifications and experience of the three staff members and the three adults on the placement programme were available on the staff recruitment files.

#### Non-Compliance Information

(i) Both staff members were unable to access their staff rosters from a mobile application. Staff attempted to locate the staff rosters however these were not accessible to evidence staff signing in/out, cover in event of staff absence and if appropriate break times of persons in attendance each day. The absence of a staff roster was noted as a non-compliance on the last inspection dated 08/12/2022 in which the registered provider stated that staff rosters were in place and staff had been trained in their responsibilities.

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

##### Corrective and Preventive Action

(i) The staff roster is now available to all staff. Paper copies will be displayed in the service in the future.

##### Supporting documentation submitted

(i) A copy of the staff roster was received in the office of the inspectorate. The statement from the registered provider that a paper copy will be available in the service in the future has been accepted.

#### Summary Comment

The action taken by the registered provider has addressed the non-compliance identified under Regulation 16 (i).

### 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

##### Basic needs:

- During the inspection the children were observed eating a variety of snacks including fruit, yogurt, sandwiches, crackers, cookies, cakes, biscuits, waffles and cereal bars provided from home.
- The children ate their snacks seated at low tables and chairs supervised by the adults who gave assistance where it was needed.
- Children were observed accessing the sanitary area independently. Staff were nearby to provide assistance to those who needed it.
- Hand washing was facilitated in the wash hand basin in the sanitary area. There was a supply of warm and cold water, liquid hand soap and hand towels.
- The children enjoyed freedom of movement in the adjoining preschool rooms and outdoor area. They were able to explore different interest areas while outdoors.
- In the playroom, the children had the opportunity to rest or relax on soft seating in the form of a child size couch in a seating area. There was a cosy alcove area with soft furnishings where children were observed seating or lying down relaxing at intervals during the session.

##### Physical and Material Environment:

The environment supported each child's learning, development, and wellbeing as –

- The playroom was equipped with open shelving units where children could access play equipment and materials independently. There was a variety of play equipment and materials appropriate to the children's age and stage of development.
- The playroom had various interest areas- a children's library area, board games and puzzles, art materials, soft toys, a play kitchen with utensils and cookware, musical instruments, playdough, farm toys and animal figurines, dolls houses, dolls and accessories, an emotions board and a family area with photos of the children's family members. The various interest areas supported learning across all areas of

development- fine motor skills, language development, cognitive development, sensory and imaginative development.

- There was sufficient floor space to enable the children to move around unhindered and appropriate furnishings of low-level tables and chairs were available to facilitate mealtimes and table-top activities.
- The walls of the playroom were decorated with posters, family photos, children’s artwork, learning materials in picture format and emerging interests of the children attending the service.
- There was an enclosed outdoor play area with a concrete floor, a wall one side and a wall and fence on the other. A covered area with soft floor matting was available to facilitate all weather play, which had a slide, sandboxes with sand/gravel, a wooden table, and a mud kitchen. Outdoor play equipment included tyres for jumping over and climbing on, playhouse, toy digger, balance bikes, scooters, ride on karts and ride in karts.

### Non-Compliance Information

1. Drinking water was not freely accessible while the early years children were present in the service. Individual water bottles were placed on a high shelf in an area of the kitchen, which was inaccessible to the children, preventing the children from availing of water if they were thirsty.
2. The temperature of the playroom was not maintained between 18°C-22°C. The inspector observed at 10:15 that the temperature of the playroom was recorded as 16.2°C and at 12:15 the temperature had gone down to 15.9°C. The heating control clock indicated that the heating was timed to come on between 08:30 and 09:00.

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

#### **Corrective and Preventive Action:**

1. An easily accessible table has been set up to ensure the children have access to water while present in the service.
2. The heating system will be managed by staff to maintain the required temperature between 18°C -22°. Temperatures and timings will be monitored daily by staff as part of the daily risk assessment.

#### **Supporting documentation submitted**

1. A photograph of the water table was received in the office of the inspectorate.
2. The statement from the registered provider has been accepted.

### Summary Comment

The actions taken by the registered provider have addressed the non-compliances identified on inspection under Regulation 19.

### 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 staff were present at the service entrance doors welcoming the children on arrival. The door was secured when not in use which ensured that no unauthorised adult could enter the playrooms and that no children could leave unsupervised.
- The outdoor area was secured with walls, fencing and gates to protect the children within.
- Internal blind cords were safe and secure and fitted correctly.
- Leads and cables were secured to prevent any tripping hazard.
- All indoor toys and play equipment appeared to be well maintained and in good working order.
- Handrails were provided at the front and back doors to assist and support children going up and down the ramps and steps safely to the outdoor areas.

##### Infection Control:

- Hand basins in use in the playrooms and sanitary areas, by the adults and children, were fitted with thermostatically controlled hot water, between 35.5°C and 39.3°C, dispensing foam soap and dispensing paper towels. Pedal operated bins were available for the disposal of paper waste.
- Children's belongings were stored in each playroom on individually named hooks, away from the floor area.
- Perishable foods were observed to be stored in the fridge, ensuring that the food did not spoil.
- Windows in the playrooms were open providing fresh air.
- The playrooms and kitchen area were clean.

##### Safe Sleep:

- There were no children observed sleeping on the day of inspection.

##### Fire Safety:

- Fire extinguishers were observed to be anchored to the walls.
- The fire assembly point was visible in the outdoor area.

### Non-Compliance Information

#### General Safety:

1. Garda vetting was available for all six adults. However, one adult vetting disclosure was not dated within the previous three years in adherence with the Early Years Inspectorate Regulatory Notice 'EYI- RN12.3 Renewal of Garda Vetting'.
2. The wooden table in the outdoor play area was observed to have sharp edges where the veneer surrounding the edge of the table had come off. This posed a safety risk should a child come into contact with the sharp edges.
3. Cleaning agents placed on the window sill in the children's nappy changing area were within reach of the children's changing plinth posing a safety risk.
4. The gate in the kitchen was left unsecured, posing a safety risk to the children. The inspector observed at 10:30, 10:35 and 12:15 staff members leaving the area without securing the gate.
5. There was no safety catch on the cupboard under the sink where the cleaning products were located, posing a safety risk to the children.

#### Infection Control:

6. The inspector observed that there was no pedal operated, sealed, lined and lidded nappy changing bin available. A staff member was observed bringing a used nappy in a sack through both interconnecting rooms to dispose of the nappy in an outdoor bin. In discussion, the staff member stated that this was normal practice, posing a risk of cross infection.
7. In contrast to the service's nappy changing procedure a staff member was observed carrying out two nappy changes at 09.27 and 11.20 without the use of disposable aprons, posing a risk of cross infection.

#### Administration of Medication:

8. There was no temperature reducing medication available in the service, posing a safety risk to a child in the event of an emergency.

### Action submitted by the Registered Provider

#### Corrective & Preventive Action

#### General Safety:

1. Renewed Garda vetting is now in place for one adult for whom it was required. Management will ensure that vetting is checked yearly to ensure compliance.
2. The wooden table in the outdoor area has been removed. Staff have been reminded of the importance of carrying out a risk assessment prior to children accessing the outdoor play area.

3. The cleaning agents have been removed and stored safely. Staff have been reminded of the requirement to store cleaning agents out of reach of the children.
4. Staff have been reminded to ensure that the safety gate, securing the kitchen remains closed at all times. The gate will be checked as part of the daily risk assessment, and a notice has been placed reminding staff to keep the gate closed.
5. A child safety lock has been placed on the cupboard under the sink to prevent children accessing the area.

### **Infection Control:**

6. A suitable nappy bin has been ordered. The nappy changing policy has been reviewed by all staff.
7. Aprons are now available at the nappy changing station. Staff have been advised that single use aprons are worn during nappy changing in order to prevent cross infection. These are disposed of after each nappy change.

### **Administration of Medication:**

8. Temperature reducing medication, stored in sealed container, out of reach of the children is now available in the event of an emergency.

### **Supporting documentation submitted**

The following documentation, photographs and receipts were received in the office of the inspectorate;

#### **General Safety:**

1. Renewed Garda vetting for one adult. The statement from the registered provider has been accepted.
2. The statement from the registered provider has been accepted.
3. The statement from the registered provider has been accepted.
4. A photograph of the notice on the gate reminding all staff to keep the gate closed and a copy of the risk assessment with the addition of the gate.
5. A photograph of the new safety lock on the cupboard under the sink.

#### **Infection Control:**

6. A photograph of the pedal operated, sealed, lined and lidded nappy bin was received in the office of the inspectorate.
7. The statement from the registered provider has been accepted.

#### **Administration of Medication:**

8. Temperature reducing medication is now available in the service. It is stored out of reach of the children in a sealed container.

## Summary Comment

The actions taken by the registered provider have addressed the non-compliances identified on inspection under Regulation 23.

## Part VI - Safety

### Regulation 24 - Checking in and out and record of attendance

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

### Non-Compliance Information

The attendance records, available on a digital application, evidenced that children had not been signed out on the 18/03/2025 and 19/03/2025. This may pose a risk to a child in the event of an emergency or in the event of a child leaving the service unsupervised. In conversation, the staff member stated this was an error and it should have been completed.

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

#### Corrective and Preventive Action

Staff have been reminded of the requirement of signing children in and out of the service each day. This now forms part of the end of session checklist to ensure that all children have been signed in and out.

#### Supporting documentation submitted

A completed copy of the children's sign in/out times for the week commencing 17 March 2025 was received in the office of the inspectorate along with a copy of the checklist.

## Summary Comment

The actions taken by the registered provider has addressed the non-compliance identified under Regulation 24.

### 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) Certificates were available to evidence that two adults had received first aid responder (FAR) training. The start and finish times recorded by the inspectors evidenced that one of the adults was available while the early years children were present in the service.

(2) (a) The first aid pack was easily accessible and stored within reach of the adults. It was available while the early years children were on the premises.

#### Non-Compliance Information

2. (b)

The inspectors observed that the following supplies were missing from the first aid box:

- Plasters x 20
- Sterile eye pad x 1
- Wound dressings in sizes medium x 2, large x 2 and extra-large x 2.
- Sterile water 500ml x 2
- Burn dressing x 1
- Crepe bandage x 1

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

##### **Corrective and Preventive Action**

2. (b) All missing supplies have now been replaced. The first aid box will be checked on a regular basis.

##### **Supporting documentation submitted**

2. (b) A photograph of the missing supplies was received in the office of the inspectorate. The statement from the registered provider has been accepted.

#### Summary Comment

The actions taken by the registered provider have addressed the non-compliance identified under Regulation 25

2. (b).

## 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

1.
  - (b) Documentation was available to evidence that the firefighting equipment had been serviced on 12 March 2025.

### Non-Compliance Information

1.
  - (a) There was no written evidence of recent fire drills having been carried out in the service. The date recorded of the last fire drill was November 2022, posing a risk that the adults and children in the service were unaware of the procedures to be carried out in the event of an emergency or a fire.
  - (b) There was no written maintenance record available of the most recent smoke alarm testing. The certificate presented indicated that the smoke alarms had been fitted in 2018.
4. The procedures to be followed in the event of a fire were not displayed in a conspicuous position in the premises.

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

#### Corrective and Preventive Action

1.
  - (a) A fire drill was carried out and recorded on 24 March 2025. In future, fire drills will be carried out on a monthly basis as required. Staff and management are aware of the requirement to carry out and maintain records of the monthly fire drills.
  - (b) The smoke alarm was tested on 24 March 2025. Management will ensure that this is carried out on a yearly basis.
4. The procedures to be followed in the event of a fire are now visible in each care room.

## Supporting documentation submitted

1.
  - (a) The statement from the registered provider has been accepted.
  - (b) A copy of a letter of confirmation was received in the office of the inspectorate from the servicing company confirming the servicing of the smoke alarm.
4. Photographs of the procedures to be followed in the event of a fire located in both care rooms was received in the office of the inspectorate.

## Summary Comment

The actions taken by the registered provider have addressed the non-compliances identified under Regulation 26 (1) (a) (b) and (4).

## Part VI - Safety

### Regulation 28 - Insurance

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

### Compliance Information

The service was insured. Written records were furnished to the inspector which included the following details;

- The name, address and contact details of the insurance company
- The name and address of the service
- The number of children for whom the service is insured: 22
- The type of service: Sessional

Expiry date: 27 March 2026.