

# Early Years Inspectorate Regulatory Report

## Pre School

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| <b>TUSLA Identifier:</b> | TU2015GY110 |
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| <b>Name of Service:</b> | Ionad Tacaíochta Teaghlaigh Teo |
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| <b>Address of Service:</b> | Ionad Tacaíochta Teaghlaigh Teo, An Cnoc, Indreabhan, Co. Galway. |
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| <b>Eircode:</b> | H91 K6NE |
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| <b>Name of Registered Provider:</b> | Seamus O'Fatharta |
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| <b>Service type:</b> | Full Day |
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| <b>Date of Inspection:</b> | 11/06/2024 |
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|-----------------------------------|----|----|----|----|
| <b>No of pre-school children:</b> | AM | 60 | PM | 55 |
|-----------------------------------|----|----|----|----|

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| <b>Address of the Early Years Inspectorate:</b> | Tusla – Child and Family Agency, Early Years Inspectorate, Quality and Regulations Directorate, Clinical & Administration Building, Block A - (1st Floor- Green Corridor), Merlin Park, Galway |
| <b>Inspection undertaken by:</b>                | S. Meehan and F. Kelly.  |
| <b>Title:</b>                                   | 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).

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| <b>Conditions if applicable</b> | Not applicable |
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### Description of service

This community owned crèche and pre-school was established in 2009 and is in Indreabhan, in west county Galway. The service promotes the Irish language and culture. The service offers full day care and part time service from 7:15 am to 6:15 pm and an Early Childhood Care and Education (ECCE) pre-school care programme and a sessional care programme from 9 am to 12 pm. The service caters for children aged between 0 months and 6 years of age, from Monday to Friday. The service has 5 playrooms, staff room, dining room and administration office. The service has a designated kitchen where snacks and meals are prepared, cooked and stored. There is a designated sleep room off the Seomra 1 with 5 cots. Stackable beds are available for older children to sleep during the day. There were 3 designated outdoor play areas for children to play, explore and get fresh air.

### Staffing

There was a total of 19 adults working in the service which did not include the registered provider. The manager was the person in charge, a chef and an auxiliary staff member who prepares the meals on site.

### 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, 11, 19, 23, 25 and 26; however, on inspection additional non-compliance which posed a risk was identified under 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

13/06/2024 An Immediate Action Notice was issued under Regulation 9(2)(c), a mandatory vetting disclosure was not available for 1 adult working in the service contrary to the National Vetting Bureau (Children and Vulnerable Persons) Act 2012.

18/06/2024 The service manager responded to say that the outstanding vetting for 1 adult had been applied for and a copy of these vetting disclosure will be forwarded to the office of the Early Years Inspectorate. A copy was received of the Garda vetting on the 20/06/2024.

## Acknowledgments

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

### Part III – Management and Staff

#### Regulation 9 – Management and recruitment

(1) A registered provider shall ensure that-

- (a) the service has a designated person in charge and a named person who is able to deputise as required,
- (b) at all times during the period when the pre-school service is being carried on, the designated person in charge or the named person referred to in subparagraph (a) is on the premises, and

(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)(b) The person in charge was on the premises when the early years inspectors arrived and remained on site for the duration of the inspection.

All 20 staff files were reviewed including the file for the registered provider:

- (2)(a)&(b) Twenty six of the validated references on file in respect of adults were from a past employer or a source other than a past employer.
- (c) Garda vetting disclosures were available in respect of 19 adults.
- (d) One adult working in the service had lived outside the jurisdiction for longer than 6 consecutive months while over the age of 18 years and had the required police vetting.

- (4) Ten adults had evidence of a childcare qualification to at least a major award in Early Childhood Care and Education at a Level 5 on the National Qualifications Framework or a qualification deemed by the Minister to be equivalent.

### Non-Compliance Information

- (1) (a) Although there was a person in charge, there was no named person available to deputise in the service.
- (2)(a) &(b) Seven adults did not have 2 validated references on file. This was a non-compliance on the previous inspection on the 02/11/2023.
- (c) Garda vetting was not available for 1 adult and an immediate action notice was issued to the registered provider. This was a non-compliance on the previous inspection on the 02/11/2023.
- (4) Three adults did not provide evidence of a childcare qualification to at least a major award in Early Childhood Care and Education at a Level 5 on the National Qualifications Framework or a qualification deemed by the Minister to be equivalent. This was a non-compliance on the previous inspection on the 02/11/2023.

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

The registered provider stated in their response that:

#### Corrective and Preventive Action

- (1)(a) A temporary person has been appointed and the position has been advertised.
- (2)(a) &(b) Two validated references for the seven adults was sought and on file.
- (c) Garda vetting was submitted to the inspectorate and the recruitment policy has been updated.
- (4) The three adults in question are to attend a course to achieve a level 5 in Early Childhood Education.

#### Supporting documentation submitted

- (1)(a) A copy of the advert was submitted to the Inspectorate.
- (2)(a) &(b) A copy of the references was submitted to the Inspectorate.
- (c) A copy of the outstanding Garda vetting and updated recruitment policy was submitted to the Inspectorate.
- (4) No evidence was submitted.

### Summary Comment

- (1)(a) & (2)(b)(c) The evidence submitted has been reviewed and has been deemed to have met the requirements of the Regulations.
- (4) The non-compliance remains outstanding as no evidence was submitted for the three adults to the Early Years Inspectorate.

## 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) The preschool attendance records and roster were reviewed and indicated that an adequate number of staff were working directly with the children. On the day, the adult and child ratio were correct and maintained.

(2) The minimum ratio of adults to children was adhered to, during the inspection.

On the morning there were 60 preschool children being directly cared for by 14 staff members and 1 student that was on work placement. In the afternoon there were 55 preschool children being directly cared for by 13 staff members and 1 student that was on placement.

## 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

(19)(1)(a)

- Healthy eating was promoted within the service, children's cultural and dietary requirements were met.
- The main hot meal of the day was fish fingers, mashed potatoes and vegetables.
- A water station was available in the playrooms for children to help themselves as required.
- Perishable items were stored in the fridge belonging to children for snack times.
- The children had unrestricted access to the toilet and were either independent at toileting or supported by adults as required.
- Nappies were changed by adults on a regular basis and the correct procedure in line with best practice was observed at nappy changing.
- Children were encouraged and supported to develop self-help and personal hygiene skills. Children were observed washing hands after toileting before snack time and after nappy changing.
- There were 5 cots in total available in the designated sleep room for children under 2 years of age and stackable beds were available for children over the age of 2 years of age.
- All the children had opportunities to move about freely and explore their environment, both indoors and outdoors.
- Adults used a soft tone of voice, the child's individual name, and were observed getting down to their level and making eye contact.
- Children had the opportunity to partake in small and large group activities and play, leading to increased social awareness, co-operation, collaboration, teamwork, and a sense of belonging,
- Adults were observed to manage children's minor behavioural or disagreements in a positive way throughout the day.

#### Non-Compliance Information

19(a)

### Basic Needs

1. Although the service had access to a dining room the service did not use this facility. The opportunity for children to transition into a new environment and enjoy the social interaction with other children, siblings and adults was not provided at mealtimes.

### Physical Environment

2. Soft seating in the form of child size soft seating in designated cosy areas in the playrooms was not provided for children to relax and rest. This was a non-compliance on the previous inspection on the 02/11/2023.
3. Clearly defined interest areas to support children's play and learning were not clearly visible in the playrooms.
  - Play equipment was sparse in the playrooms for example there was limited or no dress up with a mirror and there was limited sensory equipment in the playrooms.
  - There were kitchens with no or limited utensils, lack of nature tables to bring the local environment and seasons into children's learning.
  - There was a lack or a limited supply of children's books. This was a non-compliance on the previous inspection on the 02/11/2023.
  - Items of interest on the walls which included educational posters, children's artwork and their family tree were too high on the wall and out of children's eye level.

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

#### Corrective and Preventive Action

### Basic Needs

1. Children are now using the dining room at meal times and will continue to do so.

### Physical Environment

2. Soft furnishings are being made to measure and they will be in place before end of August.
3. Play equipment and materials have been purchased and all necessary resources will be in place in place for end of August. Two staff training days are scheduled for the end of August.

#### Supporting documentation submitted

1. Photographic evidence of the dining room set up for children was submitted to the Inspectorate.
2. A receipt of the order for the soft seating was submitted to the Inspectorate.
3. Receipts and photographic evidence of play equipment and materials was submitted.

### Summary Comment

1., 2 & 3. The receipts and photographic evidence submitted has been reviewed and has met the requirements.

## 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.*

### Non-Compliance Information

#### General Safety:

1. Garda vetting was available for all nineteen staff members, however for 1 of the adults their vetting disclosures were not dated within the previous three years in adherence to the Early Years Inspectorate Regulatory Notice 'EYI-RN12.3 Renewal of Garda Vetting'.
2. Two rocking chairs in Seomra 1 and Seomra 2 may present as a safety hazard to the babies and wobblers when on floor play or crawling. A child could potentially get a finger or hand trapped under the swinging rocking chair.

#### Infection Control:

3. Four of the mattresses in the 5 cots in the designated sleep room area off Seomra 1 did not have waterproof covers which may pose as a risk of cross infection for a preschool child.
4. The children's bed linen was not stored appropriately; they were left on a shelving unit on the ground in the designated sleep room which may pose as a risk of cross infection.
5. Childrens personal belongings were stored in the nappy changing and sanitary area which may present as a risk of cross infection for a preschool child.
6. Childrens training potties were stored on the floor in the sanitary area off Seomra 1 and this may present as a risk of cross infection for a preschool child.
7. In the designated sleep room 50cm was not maintained between cots which may pose as a risk of cross infection for a preschool child.

8. The steriliser for soothers and bottles was broken and therefore this may pose as a risk of cross infection for preschool children. As they could not be cleaned and sterilised as required.
9. Uncovered soothers were left in a cot in the designated sleep room off Seomra 1 and in Seomra 2, 3 soothers were left uncovered on the stackable beds which may pose as a risk of cross infection for a preschool child.

### Action submitted by the Registered Provider

#### Corrective & Preventive Action

##### **General Safety:**

1. Garda vetting was renewed and submitted to the Inspectorate and all Garda Vetting will be completed before a member of staff will commence employment and that all Garda vetting are renewed before 3-year expiry date of previous Garda Vetting.
2. The rocking chairs have been removed and replaced by suitable adult comforting chairs in the playrooms. Rocking chairs will not be used in the future.

##### **Infection Control:**

The following measures were taken to reduce cross infection:

3. New cots have been purchased along with waterproof covers for the designated sleep room.
4. Bed linen is now stored in sealed containers in the sleep room.
5. Boxes with lids and children's names have been labelled to ensure no cross contamination in the nappy changing area.
6. Training potties have now been placed on a shelf to avoid the risk of cross infection.
7. In the designated sleep room 50cm is now maintained between cots and this will be monitored in the future.
8. A working steriliser was purchased and is now in place for use in the service.
9. Individual boxes have been labelled for children's soothers.

#### Supporting documentation submitted

##### **General Safety:**

1. A copy of the Garda vetting and updated recruitment policy was submitted to the Inspectorate.
2. Receipts and photographic evidence of new comfort chairs was submitted.

##### **Infection Control:**

3, 4, 5,6, 7, 8 & 9. Photographic evidence, receipt and documented evidence was submitted.

### Summary Comment

(23) 1-9 The evidence submitted has been reviewed and it has been deemed to have met the requirements of this part of the Regulations.

### 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) The service provided evidence that a person trained in first aid responder for children was available to the children attending the pre-school service. Six staff had current first aid responder training.
- (2)(a) There was a first aid with content items within date, safely stored, easily accessible and stored in a conspicuous position on the corridor and in the playrooms. The person in charge advised there is a first aid box in each playroom kitchen and office.
- (b) The service demonstrated that the first aid box was fully equipped and available to the children attending the pre-school service.

### Part VI - Safety

#### Regulation 26 - Fire safety measures

- (1) A registered provider shall ensure that a record in writing is kept of-*
- (a) any fire drill that takes place in the premises, and*
  - (b) the number, type and maintenance record of fire fighting equipment and smoke alarms in the premises.*
- (4) A notice of the procedures to be followed in the event of fire shall be displayed in a conspicuous position in the premises.*

#### Compliance Information

- (1)(a) A record in writing of fire drills indicated that the last fire drill was conducted in May 2024.
- (b) A record of the number, type and maintenance record of firefighting equipment was maintained. It was recorded that firefighting equipment was checked annually last checked in November 2023. The records for the smoke and fire detection alarm system were maintained and serviced on the 28 of May 2024.
- (4) The fire evacuation procedure for the service which contained details in relation to the procedure to be conducted in the event of a fire was available on file and was displayed in the lobby and each playroom of

the service.

## Part VII - Premises and Space Requirements

### Regulation 29 - Premises

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

### Non-Compliance Information

(29)(d)

1. The walls throughout the service was maintained in a poor state of repair with paint chipped.
2. There was a damp patch on the ceiling of Seomra 2 which needed repair.
3. Tiles were missing or fallen off in the children's sanitary area and the adult sanitary area.
4. The woodwork on the exterior of the building was weather beaten and in need of repair.
5. The mechanically operated ventilation in the sanitary areas had a substantial amount of dust which may pose as a risk of cross infection for a preschool child.

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

(29)(d)

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

1-5 I have been in contact with a painter, a maintenance team and a carpenter and ongoing work is being done to receive quotes, guidance as to what is best for the ITT building in terms of longstanding work and maintenance that is to be done.

#### **Supporting documentation submitted**

(29)(d)

1-5 No evidence was submitted.

### Summary Comment

(29)(d) 1-5 No evidence has been submitted for the above non compliances therefore they remain outstanding.