

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2015KE028
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<b>Name of Service:</b>	Tots Creche & Daycare Nursery Limited
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<b>Address of Service:</b>	34 Killybegs Manor, Prosperous, Co. Kildare
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<b>Eircode:</b>	W91 XK13
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<b>Name of Registered Provider:</b>	Audrey Murray, Annette Akerlind
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<b>Service type:</b>	Full Day, Part Time, Sessional
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<b>Date(s) of Inspection:</b>	01/08/2024
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<b>No of pre-school children:</b>	AM	28	PM	28
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<b>Address of the Early Years Inspectorate:</b>	Early Years Inspectorate, Tusla Child and Family Agency, Suite 7, Vista Primary Care, Ballymore Eustace Road, Naas, Co. Kildare, W91 X38W
<b>Inspection undertaken by:</b>	E. Mulhern and F. Maher
<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).

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

Tots Creche and Daycare Nursery Limited opened in 2003. It is one of eight early years services privately operated by the registered providers. The service is registered to provide full day, part-time and sessional education and care to children aged 0 to 6 years from 7am to 6.30pm, Monday to Friday. A school aged service is provided also.

The service operates from a two-storey purpose-built premises within a residential development on the outskirts of Prosperous, County Kildare. The service has four care rooms, two sleep rooms, sanitary facilities and outdoor areas at the side and rear of the service. Three care rooms were in use for pre-school children on the day of inspection.

### Staffing

There are 16 staff members employed to work in the service including the person in charge. Five staff members were allocated to work directly with the children on the day of inspection. Two staff members and the person in charge were available to provide break cover and assistance as needed. The Operations Manager arrived during the inspection and was present for the Closing Meeting.

### 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 areas of governance and safety. The inspection may also focus on other areas as required.

The inspection focused on an examination of compliance under the following regulations. These findings are outlined within the relevant regulations within this report.

Regulation 9 (1)(a), (2) & (4) - Management and recruitment

Regulation 11 (1) & (2) - Staffing levels

Regulation 23 - Safeguarding health, safety and welfare of child

Regulation 25 (1) & (2) - First Aid

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

### Immediate Action Notices

#### **Regulation 23**

1. An Immediate Action Notice was issued to the registered provider on 1 August 2024 due to the significant risk posed in relation to safe sleep. A response was received on 2 August 2024 which was deemed to adequately address the risk.

2. An Immediate Action Notice was issued to the registered provider on 1 August 2024 due to the significant risk posed in relation to medication administration. A response was received on 2 August 2024 which was deemed to adequately address the risk.

#### **Regulation 9(2)(c)**

3. An Immediate Action Notice was issued on 2 August 2024 as a mandatory Garda vetting disclosure was not available for one adult who was working directly with children, contrary to the National Vetting Bureau (Children and Vulnerable Persons) Act 2012. A response was received on 2 August 2024 which was deemed to adequately address the risk.

## Acknowledgments

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

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### 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.

(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 service had a person in charge and a named person to deputise.

(2) Sixteen staff files were reviewed.

(a) (b) Thirty-two written and verified past employer references or references from a reputable source in the absence of a past employer were available.

(c) Garda vetting disclosures were available for fifteen adults and had been renewed in accordance with the Early Years Inspectorate Regulatory Notice, which requires services to renew Garda vetting every three years.

(d) International police vetting was available for two staff members who had lived outside the State for more than six months as an adult.

(4) Eleven staff members held a major award in Early Childhood Care and Education at a minimum Level 5 on the National Framework of Qualifications or a qualification deemed equivalent by the Minister.

### Non-Compliance Information

The registered provider did not take appropriate measures to ensure that all adults employed to work directly with children were suitable and competent as outlined:

- (2)
- (c) A Garda vetting disclosure was not available for one adult who was working directly with the children on inspection contrary to the National Vetting Bureau (Children and Vulnerable Persons) Act 2012. The adult had commenced employment in the service on 22 July 2024. An Immediate Action Notice was issued on 2 August 2024 due to the significant risk posed.
- (d) An international Police vetting disclosure was unavailable for one staff member who had lived outside the State for more than six months as an adult.
- (4) There was no documentary evidence that an adult working directly with the children held a qualification in Early Childhood Care and Education at Level 5 or higher on the National Qualifications Framework or a qualification deemed by the Minister to be equivalent.

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

#### Corrective and Preventive Action

- (2)
- (c) The staff member was sent home and did not return to work until her vetting came back with no convictions. No staff are allowed to start until they have received an up-to-date vetting clearance.
- (d) The staff member is on a term time contract and will not return until the police clearance has been received. Management will make sure all police clearances are checked before offering a candidate employment.
- (4) The staff members transcript was received on the day of inspection for this staff member. Transcripts are to be received before a staff member is cleared to start.

## Supporting documentation submitted

Supporting documents were submitted in keeping with the actions stated.

## Summary Comment

The actions and supporting documents were reviewed and deemed to appropriately address the non-compliances.

## 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) An adequate number of adults were working with the children. Five staff members were allocated to work directly with 28 children. Two staff members and the person in charge were available to provide break cover and assistance as needed.
- (2) The minimum adult to child ratio requirement was always maintained.

## 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

##### Safe Sleep:

Children were provided with cots or low beds to sleep appropriate to their age and stage of development. Staff checked sleeping children in relation to their breathing, position and colour at a minimum of ten-minute intervals and made a record of the checks.

##### Administration of Medication:

Medicines were stored in their original packaging out of reach of children. Staff demonstrated an awareness of the requirement to obtain written parent/guardian consent prior to administration. Records were available detailing written consent.

##### General Safety:

Measures had been taken to safeguard the children. Entrances and exits were secured to prevent unauthorised access or children leaving unsupervised. Emergency exits were kept clear to allow for the prompt evacuation of children in case of a fire. Staff demonstrated an understanding of fire safety measures, including the locations of fire extinguishers, fire drill procedures, and the importance of maintaining an up-to-date attendance record for each child for reference during an evacuation.

##### Infection Control:

Measures were taken to reduce the risk of infection spreading. Children were required to wash their hands after using the toilet, after outdoor play and before meals. Children's nappies were changed in accordance with infection control procedures. The premises were visibly clean and well-maintained. Bottles, beakers and soothers were individually labelled, and soothers were stored in separate containers to ensure each child used their own personal items. Sterilising equipment was readily available for use as needed.

Waste management practices included the use of pedal-operated lidded bins to ensure proper containment. Individual bed linens were provided, and comprehensive cleaning schedules provided for these to be laundered at least weekly. Staff were aware of guidelines for when children and staff should stay home due to illness, including symptoms such as fever, vomiting, diarrhoea, and contagious conditions.

### Outing:

No outings were undertaken on the day of inspection. The service had a policy available to guide safe practice.

### Non-Compliance Information

#### Safe Sleep:

1. Adequate measures were not taken to maintain the cot room temperatures during sleep to prevent infants and children from overheating as outlined:

- Staff members did not demonstrate an understanding of the requirement to maintain the cot room temperatures between 16 and 20°C when infants were sleeping. Measures were only taken to cool the rooms when inspectors informed staff and management that the temperatures were reading 23.8°C (Baby Cot Room) and 23.9°C (Nursery Cot Room).
- Measures taken to cool the cot rooms including use of an electric fan and opening the door (Nursery Cot Room) and opening the windows and installing a mobile air conditioning unit (Baby Cot Room) did not reduce the temperatures adequately. The temperature of the Nursery Cot Room did not fall below 22.8°C; the temperature of the Baby Cot Room did not fall below 22.5°C.
- Staff members and management did not take appropriate measures to reduce the risk. The inspectors informed staff and management of the risk at 11:23. At 12:29 the inspectors observed an infant had been placed to sleep in the Baby Cot Room cot with a fleece blanket and their outer clothing still on.

An Immediate Action Notice was issued on 1 August 2024 due to the significant risk posed.

#### Administration of Medication:

2. Adequate measures were not taken to ensure that medicine was available to a child as required. Staff told the inspector that one of the children present had a medical condition and may urgently require medicine if they

became symptomatic. The medicine was not available on the premises. An Immediate Action Notice was issued on 1 August 2024 due to the significant risk posed.

**General Safety:**

3. Adequate measures were not taken to safeguard children attending the Daycare room from accessing hazardous items. The inspector observed bottles of bleach, cleaning agents and an aerosol in an unsecured low-level cupboard. These posed a risk of injury if accessed by the children.

**Infection Control:**

4. A soft fabric mattress cover in the Baby Cot room was not suitable for use. The inspector observed it was significantly stained and could pose a risk to infection control.

**Action submitted by the Registered Provider**

**Corrective & Preventive Action**

**Safe Sleep:**

1. Permanent air conditioning units have been installed in both sleep rooms. Safe sleep training has been carried out with all staff twice since the inspection. Extra on-the-spot training has been added to managers duties to follow up on all policy and procedures training.

**Medication Administration:**

2. The medication was an inhaler that is only given during winter when the child's symptoms persist. However, the care plan did not state this. Care plans are checked and if only a sporadic treatment is required a letter from a GP will be asked for.

**General Safety:**

3. The chemicals have been stored up high, in case a staff member gets distracted when at a cupboard.

**Infection Control:**

4. The mattress protectors are washed regularly and in between if soiled. Cleaning schedules have been rewritten to include mattress protectors. Spare mattress protectors are being kept on site for replacement when soiled.

### Supporting documentation submitted

#### Safe Sleep:

Supporting documents were submitted in keeping with the actions stated.

#### Medication Administration:

Supporting documents were submitted in keeping with the actions stated.

#### General Safety:

Supporting documents were submitted in keeping with the actions stated.

#### Infection Control:

Supporting documents were submitted in keeping with the actions stated.

### Summary Comment

The actions and supporting documents were reviewed and deemed to appropriately address the non-compliances.

## Part VI - Safety

### Regulation 25 - First aid

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

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

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

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

### Compliance Information

(2)  
(a) The first aid boxes were appropriately equipped, easily accessed, and safely stored in conspicuous positions on the premises.

(b) The first aid boxes were always available for use on the premises. Staff reported that they bring a first aid box on outings as per the Outings procedure.

### Non-Compliance Information

(1) It is acknowledged one staff member present had documented training in first aid. However, the registered providers did not ensure that a person with current First Aid Responder training was always available to the children.

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

#### Corrective and Preventive Action

Staff training has taken place and there are now three staff members with First Aid Responder training with a fourth booked for September 2024.

#### Supporting documentation submitted

Supporting documents were submitted in keeping with the actions stated.

### Summary Comment

The actions and supporting documents were reviewed and deemed to appropriately address the non-compliance.