

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2015KE055			
<b>Name of Service:</b>	Bright Beginnings			
<b>Address of Service:</b>	Bungalow 1, Dunmurray Road, Kildare, Co. Kildare			
<b>Eircode:</b>	R51 D276			
<b>Name of Registered Provider:</b>	Audrey Lynch			
<b>Service type:</b>	Full Day, Part Time, Sessional			
<b>Date of Inspection:</b>	21/05/2024			
<b>No of pre-school children:</b>	AM	146	PM	106

<b>Address of the Early Years Inspectorate:</b>	Early Years Inspectorate Child & Family Agency Suite 7, Vista Primary Care Ballymore Eustace Road Naas, Co. Kildare W91 X38W
<b>Inspection undertaken by:</b>	F. Maher, T. Duignan
<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>	N/A
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### Description of service

Bright Beginnings is one of three private childcare services operated by the registered provider in Kildare town and Brownstown.

The service provides full day care, part-time and sessional education and care to pre-school children aged 0-6 years and opens from 7:00am – 6:30pm, Monday to Friday. The service is registered to provide school aged care.

The service operates from a terrace of adapted and extended bungalows in Kildare town. Twelve pre-school rooms, two dedicated sleep rooms, a kitchen, office and a staff room are provided. Outdoor play facilities are located to the rear of the premises including a large, covered play area to the side. Parking is available to the front of the building.

### Staffing

There were thirty-seven adults present in the service on the day of the inspection. Twenty-four of the adults present, were working directly with the children and four relief staff members provided cover and support to the rooms as required, two cooks were also present. Three members of the management team were present and four staff arrived from a sister service for afternoon and lunch cover at 12pm. The registered provider was not present and does not work directly with the children.

### 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.

A sampling process was used to assess compliance under:

Regulation 15 (i) - Record of a Pre-school Child

Regulation 20 (1) - Facilities for Rest and Play

Regulation 23 - Safeguarding Health, Safety and Welfare of child

Regulation 27 – Supervision,

However, on inspection additional non-compliances which posed additional risk were identified under:

Regulation 29 (c)(d)- Premises.

These findings are outlined within the relevant regulation within this report.

The scope of the inspection included rooms 204, 208, 213, 222 and 224.

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.

## Acknowledgments

The inspectors wish to acknowledge the cooperation of the management team, 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)(a),(b)

There was a designated person in charge and a named person to deputise when needed and both were present on the premises.

The records of five staff members, employed since the last inspection, were reviewed.

(2)(a),(b)

Nine written and verified past employer references or references from a reputable source in the absence of a past employer were available in respect of five staff members whose records were reviewed.

(c) Garda Vetting disclosures were available for all employed staff members.

The service also demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years for all staff employed.

(d) Police vetting was available for three recently employed staff members who had lived in a state other than the State for a period of longer than 6 consecutive months.

(4)

Of the five recently employed staff members working directly with the children, one staff member was in possession of a letter of eligibility to practice issued by the Department of Children, Equality, Disability, Integration and Youth (DCEDIY) and four staff members were in possession of a letter of qualification recognition issued by the DCEDIY.

### Non-Compliance Information

2(a),(b)

One written and verified reference from a past employer, or in its absence, from a reputable source was unavailable for one staff member recently employed.

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

#### Corrective and Preventive Action

These references were present on the day and were all located in one poly pocket.

We acknowledge that going forward documents will be more visible for inspection purposes.

#### Supporting documentation submitted

Document x 1

### Summary Comment

Following submission of the outstanding document the requirement for Regulation 9 (2)(a),(b) has been met.

## 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.*

*(8) Without prejudice to paragraphs (2) to (7)-*

*(a) a registered provider of a pre-school service other than a child-minding service or a sessional pre-school service shall ensure that there are at least 2 adults on the premises at all times,*

### Compliance Information

- (1)  
There were 146 children attending the service being supervised directly by 24 staff members during the inspection.
- (2)  
The minimum ratio of adults to children was adhered to during the day as specified in column (3) of Part 1 of Schedule 6.
- (8)(a)  
There were at least two adults on the premises at all times for the duration of the inspection, this was verified by the up-to-date staff roster.

### 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

- A sample size of 17 child enrolment forms were reviewed.
- The information for each child as outlined in (a)-(i) of this regulation was completed for each record reviewed.

### Part V - Care of Child in Pre-school Service

#### Regulation 20 – Facilities for rest and play

(1) Subject to this regulation, a registered provider shall ensure that-

- (a) having regard to the number of pre-school children attending the service, their respective ages and the amount of time they spend on the premises, there are adequate and suitable facilities for each child to play indoors and, where required by these Regulations, outdoors, during the day, and
- (b) there are adequate and suitable facilities for a pre-school child to rest during the day, and in the case of an overnight pre-school service, during the day and the night.

#### Compliance Information

(1)(a)

The five pre-school rooms inspected were bright and spacious for the children to move about, work and play during their time spent in the service. Each room was resourced with age-appropriate play and learning materials. Furniture was child sized and enabled the children to sit comfortably for meals and tabletop activities.

The outdoor area had various play areas where the children could enjoy gross motor activities with the climbing frame, ball games in the football area, digging activities while using the sit on diggers and imaginative play in the large shed that changed according to the children's interest and was currently set up as the seaside with a large area of sand and a restaurant with plenty of props in each area.

(b)

Suitable, comfortable rest areas were observed in rooms 204, 208, 213 and 222, should a child wish to take a break from activities for some quiet time, rest or read a book. The rest areas consisted of soft, child sized couches, mats and cushions.

Two sleep rooms, with 24 standard cots were provided for the sleep needs of any child under two years old and low-level sleep beds were in place for children aged two years and above who availed of a period of sleep during the day when attending on a full or part time basis.

#### Non-Compliance Information

1. There was no rest area available for the children in room 224.

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

##### Corrective and Preventive Action

New soft seating was purchased to create rest area and daily checks to ensure all relevant equipment in rooms.

##### Supporting documentation submitted

Photograph x 1

Document x 1

### Summary Comment

The written response and documentary and photographic evidence submitted has been assessed by the Early Years Inspectorate. Regulatory compliance is met for Regulation 20.

### 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 main entrance door to the service was secured with an electromagnetic lock and keypad entry; this was controlled by staff to prevent the pre-school children from exiting the service unsupervised and to restrict unauthorised persons from gaining access to the pre-school.

During conversations with staff members, they advised they were very observant of any food provided that had the potential risk of choking and immediately halved or cut food into smaller pieces.

The service met the necessary safety requirements in respect of the indoor environment, toys and equipment and safe storage of cleaning agents.

##### Infection Control:

Each staff member was responsible for their daily pre-school room cleaning such as tabletops and sweeping the floors and cleaning schedules were completed by the staff daily. A cleaning company attended to larger cleaning duties in the evenings.

Children's hands were routinely washed before eating, following toilet use, outdoor and messy play. There was a supply of liquid hand soap and paper towel at the sinks to support hygienic hand washing and foot pedal operated bins were available for the hygienic disposal of used paper hand towel, tissues and soiled nappies. Bed linen was individual to each child and laundered by the service.

##### Administration of Medication:

Medication was not given at the time of the inspection and in conversation with staff members, they were aware of the procedures to be followed to administer medicine safely to a child if required while attending the service.

##### Safe Sleep:

The staff members were familiar with current safe sleep guidance to reduce the risk of sudden infant death including completing 10-minute sleep check observations on all sleeping children and documenting the colour, position and breathing pattern of sleeping children in their care.

### Fire Safety:

Regular monthly fire drills were carried out and records maintained. All fire exits were easily identifiable and unobstructed.

### Outing:

Outings are not conducted from the service; this was confirmed by the person in charge.

## Non-Compliance Information

### General Safety:

1. It was observed there were no window restrictors on two open velux windows in room 224. A child had the potential to gain access to the windows and therefore this posed a potential risk of harm.

The inspector took immediate corrective action and closed both windows and brought it to the attention of staff in the room and to the management team at the feedback meeting at the conclusion of the inspection.

2. The toilet seat in the designated 'boys' cubicle in the sanitary area between rooms 204 and 208 had become detached from the toilet and was observed on the floor; this posed a potential injury risk due to the lack of stability for a child if/when using the toilet.

3. Daily risk assessments were not completed for each room environment in order to identify and manage risks that may arise; this was contrary to the manager's morning check list that stated, 'staff are equipped with daily risk assessments in each room'.

4. The floor covering on two steps of the stairs leading to room 224 was missing the floor seal thus exposing the edges; this was a potential trip hazard.

5. A tube of nappy cream and was observed on the sink unit and a box with nappy creams was observed stored on a low level shelf under the nappy change unit in the sanitary area on the main corridor; these were accessible to a child.

### Infection Control:

6. The following infection control risks were observed in the sanitary area between rooms 204 and 208:

- There was no hot water dispensed from the mixer tap in the disabled access toilet to facilitate hygienic hand washing.

- The rolls of toilet paper were observed placed on top of the radiators in the designated ‘boys’ and ‘girls’ cubicles and not in the wall mounted dispensers; this was inadequate for infection control purposes.
  - Two insert toilet seats and the main toilet seat were observed on the floor of the ‘designated ‘boys’ cubicle.
7. The nappy changing procedure observed for six nappy changes were not carried out to mitigate against the potential risk of cross infection as observed by the following:
- Handwashing was not completed by the staff member before commencing the nappy change procedure on two occasions.
  - Two staff members did not wash their hands after completing nappy changing on two occasions.
  - A child’s hands were not washed prior to being brought back to the care room following nappy changing.
  - A staff member did not remove the apron and gloves until the end of the nappy changing procedure. This contaminated the clean nappy and child’s clothing and created a risk of cross infection.
  - A staff member did not secure the single use disposable apron which was not adequate to protect clothing for infection control purposes.
  - A staff member was observed not to use the foot pedal mechanism to open the lidded nappy bin and instead handled the lid to open it.
  - A staff member used the foot pedal mechanism to open the lidded nappy bin however pushed down the contents into the bin with their hand.
8. The plastic aprons worn for nappy changing procedures were spilling out from the storage shelf and trailing on the floor in the nappy change area on the main corridor and posed a risk of cross infection.
9. Wall mounted dispensers were not in place for the hygienic dispensing of the rolls of blue paper towels which were observed lying on work surfaces in the nappy change areas beside room 221 and the sanitary area along the main corridor.
10. The foot pedal operated bin in the nappy change area beside room 211 was observed to be placed against the container with the single use disposable aprons used by the staff for nappy changing procedures and posed a risk of cross infection due to its close proximity.
11. There was no documentary evidence available that the sterilising solution used for the immediate sterilisation of mouthing toys and soothers was appropriate. The information on the back of the container referred to its use for floors, walls, cutlery and crockery.

12. The sterilising container was not used correctly as the weighted grid was not placed on top of the items being sterilised. The items were not fully submerged in the sterilising fluid and therefore not sterilised.

*This was a non-compliance on inspection carried out 11/04/2022.*

13. Staff stated that items removed from the sterilising solution were washed under running water; this practice compromised the infection control method of sterilisation being used.

### Safe Sleep:

14. Two cot mattresses, in cots located in the sleep room on the main corridor, did not have a recognised safety label in place.

15. The environmental temperatures in sleep room 222 used for children aged 1-2 years and the sleep room on the main corridor used to facilitate sleep during the day, were not maintained between the required temperature of 16°-20° Celsius and 18°- 22°Celsius (sleep room 222) for safe sleep purposes and to reduce the risk of sudden infant death as observed by the following:

- The temperature in sleep room 222 was recorded at 24.7° Celsius at 13:40hours and 22.5° Celsius at 14:00 hours.
- The temperature in the sleep room on the main corridor was recorded at 24.5° Celsius at 13:21 hours and 22° Celsius at 13:55 hours.

It is acknowledged that immediate controls were put in place when requested by the inspector, however, the room temperatures did not reduce sufficiently despite the measures implemented over the course of an hour and half while children and babies were sleeping.

16. There was no documentary evidence available that sleep room environmental temperatures for the two sleep rooms were being routinely monitored on a daily basis. An environmental sleep room record was observed on the wall in sleep room 222. The last entry recorded was on 4 August 2023.

### Action submitted by the Registered Provider

#### General Safety:

#### Corrective Action

1/2/4/5. Window restrictors put in place on ceiling Velux windows, new toilet seat installed and hazard tape installed on steps and all creams now stored in sealed lid boxes; completed 22<sup>nd</sup> May 2024.

3. Room specific Daily Risk Assessments completed for each room, bathrooms, changing areas and common areas.

#### Preventive Action

1. All windows rechecked in creche to ensure that restrictors were in place and no further risks identified.

2. Full check on all children and staff toilets to ensure no seats loose or missing, daily Bathroom Check List.
3. All rooms have room and equipment specific Daily Risk Assessment sheets and checked each day by Management.
4. New flooring ordered for this area, due for installation first week in July and all floor coverings checked each day on Room Daily Risk Assessment sheets and Managers Daily Check Sheets.
5. Full review of Nappy Changing Policy and Infection Control Policy will all staff.

### **Infection Control:**

#### **Corrective Action**

6. Plumber has amended the hot water mixer, completed 22<sup>nd</sup> May 2024, toilet rolls all inserted into wall mounted dispensers and hook placed on wall and children's toilet seats sprayed and cleaned after each use and placed in individual storage bag.
7. Full review and refresh of Nappy Changing Policy with all staff members.
- 8/9. Apron, glove and blue roll dispensers purchased 22<sup>nd</sup> May 2024 and installed 27<sup>th</sup> May 2024.
10. Foot pedal bin relocated 21<sup>st</sup> May 2024.
11. Sterilising solution is appropriate for mouthed toys and soothers.
- 12/13. Existing containers replaced with Steamer.

#### **Preventive Action**

6. Daily checks to ensure hot water heater is working; policy on infection control and toileting redistributed to all staff to ensure toilet paper is placed in dispensers going forward and added to daily check sheet.
7. Weekly nappy changing observations with all staff members at Nappy Changing time.
- 8/9/10. All aprons, gloves and blue roll now dispensed from containers going forward. Bathroom and nappy changing area checks daily.
11. Technical Data Sheet available in each room (sterilising solution).
- 12/13. All mouthing toys, soothers etc to be sterilised in Steamer Unit only going forward.

### **Safe Sleep:**

#### **Corrective Action**

14. These are safety mattresses.
- 15/16. Portable Air Con units in sleep rooms and temperature Check Sheets located in each sleep room.

#### **Preventive Action**

14. Specification sheet on hand for future inspection.
15. Full wired Air Con units to be installed July 2024 in all sleep rooms

16. Daily and weekly Management checks.

**Supporting documentation submitted**

**General Safety:**

Photograph x 4

Document x 2

**Infection Control:**

Photograph x 7

Document x 2

**Safe Sleep:**

Documents x 2

Photograph x 1

**Summary Comment**

The written response and documentary evidence submitted has been assessed by the Early Years Inspectorate. Regulatory compliance is met for Regulation 23.

**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)

Persons trained in first aid response were immediately available to the children attending the service.

(2)(a)(b)

The first aid equipment was safely stored and in conspicuous positions throughout the premises and were at all times 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 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)(a)

A written record was available of fire drills completed in the service. The last recorded fire drill was recorded on 9 April 2024.

(b)

Records were kept of the maintenance of the firefighting and the smoke alarm system in the premises which was last serviced 30 November 2023 and 5 April 2024 respectively.

(4)

A notice of the procedure to be followed in the event of a fire was displayed in the service.

### 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

Children were observed being supervised by the adults caring for them at all times when indoors in each care room, being safely escorted when descending the stairs, during mealtimes and in the outdoor play areas.

### Part VI - Safety

#### Regulation 28 - Insurance

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

#### Compliance Information

There was evidence of current insurance cover valid until 27 May 2024. The insurance provided cover for 220 children.

### Part VII - Premises and Space Requirements

#### Additional Risk Identified

#### Regulation 29 - Premises

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

#### Non-Compliance Information

1. There was a strong malodour in the designated 'boys' toilet cubicle located in the sanitary area between rooms 204 and 208; this created an unpleasant environment for children.
2. The paint work on the wall mounted radiator in the 'boys' toilet cubicle had a significant area of rust at its base and required repainting/repair.
3. A wooden panel beneath the sink unit in the sanitary area on the main corridor was broken and observed hanging onto the floor exposing a crawl type space that had a build-up of dirt and debris and an area of lodged water and required repair should a child gain access to the area.
4. There were three unfilled holes with rough edges observed on the walls on the left-hand side in the sanitary area outside room 224 and were accessible to a child.

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

##### Corrective Action

1. Plumber has fixed small leak at back of toilet.
2. Radiator painted 22<sup>nd</sup> May 2024. New radiators to be installed July 2024.
3. Opening on wooded panel screwed closed 22<sup>nd</sup> May 2024.
4. Holes refilled and wall painted.

##### Preventive Action

- 1/2/4. Daily check sheet and maintenance issues reported to Management.
3. Full refit of changing area to be completed 1<sup>st</sup> week of July 2024

##### Supporting documentation submitted

Photographs x 3

#### Summary Comment

The written response and documentary evidence submitted has been assessed by the Early Years Inspectorate. Regulatory compliance is met for Regulation 29.