

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015KE083				
Name of Service:	Tír na Nóg				
Address of Service:	Avilla, Old Connell, Newbridge, Co. Kildare				
Eircode:	W12 TP63				
Name of Registered Provider:	Ian Clarke, Orlaith Connolly Clarke				
Service type:	Full Day				
Date of Inspection:	27/05/2024				
Regulatory Compliance Meeting	28/06/2024				
No of pre-school children:	<table border="1"> <tr> <td>AM</td> <td>96</td> <td>PM</td> <td>60</td> </tr> </table>	AM	96	PM	60
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Address of the Early Years Inspectorate:	Early Years Inspectorate, Child & Family Agency, Suite 7, Vista Primary Care, Ballymore Eustace road, Naas, Co. Kildare, W91 X38W.
Inspection undertaken by:	T. Duignan, F. Maher.
Title:	Early Years Inspectors

Authority to Inspect

The Tusla Early Years Inspectorate carries out inspections of Early Years Services under Section 58(J) of the Child Care Act 1991 (as inserted by Section 92 of the Child and Family Agency Act 2013).

Conditions if applicable	n/a
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Description of service

Tir na N'óg was established in 1997 as an early year's service for pre-school children aged 0 to 6 years. The service provides full day, part time and sessional childcare and education to pre-school children from 7.15am to 18.30 hours Monday to Friday. School aged childcare is provided also in the service. The service operates over a large area and consists of two detached dormer bungalows, a single-story semi-detached bungalow, a detached two-story building named Montessori House and two log cabins on the outskirts of Newbridge, Co Kildare. There are nine pre-school rooms and two sleep rooms available. The service has two separate outdoor play areas.

Staffing

The service employs twenty-eight adults including the registered providers. Twenty-seven adults were present on the day of the inspection; twenty-two adults were working directly with the preschool children and two adults provided additional support to care rooms. The two registered providers and the manager were present also. Of the twenty-four adults working directly with the pre-school children, fifteen adults held a major award in Early Childhood Care & Education on the National Framework of Qualifications, or a qualification deemed by the Minister to be equivalent.

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.

A sampling process was used to assess compliance under:

- Regulation 16 (1)(i),(j),(k) – Record in relation to pre-school service.
- Regulation 19(1)(b) - Health, welfare and development of child.
- Regulation 19(3) - Health, welfare and development of child.
- Regulation 23 – Safeguarding Health, Safety and Welfare of child.
- Regulation 27 – Supervision.

As a result, the scope of the inspection included Wobbler, Wobbler 1 and Toddler rooms.

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

14 May 2024 - Information was received by the Feedback and Concerns department. The content of the information received, when assessed, triggered an inspection.

1. A written immediate action notice under Regulation 23 – Safeguarding Health, Safety and Welfare of child in relation to Regulation 19 Health, welfare and development of child, was issued to the registered providers by the Early Years Inspector on 28 May 2024.
2. Two written responses were received by the Early Years Inspector on 28 and 29 May 2024 from the registered providers in relation to the immediate action notice and mitigated the risk identified. The responses were accepted by the Early Years Inspectorate.
3. A regulatory compliance meeting was conducted by the Inspection and Registration Manager with the Registered Provider and managers of the service on 28 June 2024.

Acknowledgments

The inspectors wish to acknowledge the cooperation of the registered providers, 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.*
- (3) The procedures specified in paragraph (2) shall be carried out prior to any person being appointed, assigned or allowed access to or contact with a child attending the pre-school service.*
- (4) A registered provider shall ensure that, without prejudice to the generality of paragraph (2) and subject to paragraphs (5) and (6), each employee working directly with children attending the service holds at least a major award in Early childhood Care and Education at Level 5 on the National Qualifications Framework or a qualification deemed by the Minister to be equivalent.*
- (7) A registered provider shall ensure that all employees, unpaid workers and contractors are appropriately supervised and provided with appropriate information, and where necessary training, including in relation to the following:*
- (a) the policies, procedures and statements of the service specified in Schedule 5.*
- (b) Part VIIA (inserted by section 92 of the Child and Family Agency Act 2013 (No. 40 of 2013)) of the Act, and*
- (c) these Regulations.*

Compliance Information

- (1)
- (a) There was a designated person in charge.
- (b) The named person in charge remained on the premises for the duration of the inspection.
- Thirty staff records were reviewed.
- (2)
- (a),(b) Fifty-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 thirty staff members whose records were reviewed.
- (c) Garda Vetting disclosures were available for thirty staff members. The service also demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years.
- (d) Police vetting was in place for two adults employed who had lived in a state other than the State for a period of longer than 6 consecutive months.
- (4) Sixteen adults working directly with the children held qualifications 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.

(7)(a) There was documentary evidence available of the following:

- An induction had been completed by the manager with all staff when they commenced employment in the service.
- All staff had completed Children First training.

Non-Compliance Information

(1)

(a) While there was a designated person in charge, there was a lack of clarity about who the deputy designated person in charge was.

(c) It is acknowledged that there was a management structure in the service. However, the identified lines of authority and accountability in the service together with the reporting responsibilities of each employee was vague as the designated person in charge was unsure who the designated deputy person was on the day of inspection, this had the potential to lead to confusion for the staff as to their reporting responsibilities.

(2)

(a) One written and verified past employer references were not available in respect of one adult whose records were reviewed.

(d) Police vetting was not in place for one adult employed who had lived in a state other than the State for a period of longer than 6 consecutive months.

(3) The procedures specified in paragraph (2) were not carried out prior to any person being appointed, assigned or allowed access to or contact with a child attending the pre-school service as evidenced by the following:

- Two adults had commenced in the service prior to the Garda Vetting being received and assessed by the registered providers.

This did not align with the Recruitment policy for the service which states that “Where an employee is successful for a position with the Service, they will be required to complete a Garda Vetting Application Form before they commence employment.”

This was an area of non-compliance at the last inspections dated 6 March 2023 and 7 March 2022. The corrective actions submitted following the inspections failed to prevent recurrence of this non-compliance.

(4) There was no documentary evidence that eight adults working directly with the children held qualifications 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.

There was no documentary evidence available for five adults employed by the service who stated that they were students on placement. There was no documentation provided by the registered providers that evidenced a link between the practice placement and the course.

This was an area of non-compliance at the last inspections dated 6 March 2023 and 7 March 2022. The corrective actions submitted following the inspections failed to prevent recurrence of this non-compliance.

(7)(a)

- There was no documentary evidence that a system of regular structured team meetings was held with the staff. Minutes of a staff meeting dated 22 February 2024 were provided to the inspectors.
- The inspection report dated 7 March 2022 stated that structured monthly meetings had been implemented with the management team including the registered providers, managers, and supervisors however there was no documentary evidence provided to evidence that this was current practice.
- It is acknowledged that there was a schedule of one-to-one supervision meetings completed on a monthly basis, however there was no evidence available for completion of these meetings with a sample of four staff members requested by the inspector.
- Two of the three designated liaison persons named in the service as the persons to manage child safeguarding concerns had not completed the necessary training for the role.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(1)

(a) We have done an organisational chart & put it in our information areas in the service & sent it via our messenger group, so all staff are aware of who's in charge on any given day. This includes when managers are absent and who deputises for them. An updated organisational chart is displayed in all information areas & any new staff will be informed whom to report to.

(c) An organisational chart has been sent to all staff. All staff are now aware who is in charge. Any new staff appointed will be sent the chart and made aware who they have to report to.

(2)

(a)(b) One written reference is now verified and on file for this employee.

(d) Staff in question had police clearance on file on date of inspection.

(3) We have ensured everyone has garda vetting on file and is in date. We have completed a list of when everyone is due for renewal for garda vetting so it's always in date and on file.

(4) Going forward all adults will have a minimum full level 5 in childcare if working directly with children. An outside agency is being used to source staff.

(7)(a) Quarterly full-service meetings will be held, and minutes recorded. These meetings will be put in the calendar at the start of the school year so that everyone is aware of the dates.

Management meetings will be held monthly, and minutes will be recorded and filed at the service.

Staff supervision meetings will be held by the service manager regularly and all minutes will be recorded and filed at the service.

Supporting documentation submitted

(1)(a)(c) – Management organisational chart.

(2)

(a)(b) – Written validated reference for one adult.

(d) – Police vetting document

(4) – DCECIY letter of temporary qualification recognition for one adult; acceptance letter for one adult from education body; practice placement request letter from education body in relation to a second adult working in the premises; letter from manager of service with update in relation to unqualified staff.

(7)(a) – Staff roster for 8 and 15 July, team meetings schedules and staff supervision schedule June – Nov 24, team meeting minutes 26 Jun , training certificates for behaviour management completed and planned designated liaison person (DLP) training for the adults in the service who are the named DLP's on the organisational chart.

Summary Comment

The written response and documentary evidence submitted by the registered providers has been assessed by the Early Years Inspectorate. The minimum requirement for regulatory compliance for regulation 9 is met. This area will be assessed at the next inspection.

Part III – Management and Staff

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

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

Compliance Information

The registered provider ensured that the required written policies, procedures, and statements specified in schedule 5 were in place in the service. The content of the following policies was reviewed and met the requirement of the regulations:

- Behaviour Management policy.
- Staff Training policy.
- Staff Supervision policy.
- Complaints policy.
- Induction policy.
- Risk Management policy.
- Child Safeguarding Policy and Procedures.

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 ninety-six children attending the service being supervised directly by twenty-two staff members during the inspection.

(8)(a) The staff roster indicated that they were at least two adults on the premises at all times

Non-Compliance Information

- (2)
1. In Wobbler room there were two adults caring for 10 children aged 1 to 2 years. One adult was a student. Students on placement are there for learning purposes and are not part of the staff ratios. They are not counted in the adult to child ratio for the care room.
 2. In ECCE room at 9:58am there were two adults caring for 13 children aged 3 to 6 years. One adult was a student. Students on placement are there for learning purposes and are not part of the staff ratios. They are not counted in the adult to child ratio for the care room.
 3. In Toddler room there were seven adults caring for twenty children aged 2 to 3 years. One adult had a qualification, four adults were students, and two adults did not have a qualification to work directly with the children. Students on placement are there for learning purposes and are not part of the staff ratios. They are not counted in the adult to child ratio for the care room.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

- (2)
- 1, 2, 3, All staff who have not completed a minimum of QQI level 5 and have not presented their level 5 full award certificate for their staff file are not working directly with the preschool children.

Supporting documentation

Letter from manager of service with update in relation to unqualified staff.

Staff roster for week beginning 8 and 15 July.

Summary Comment

The written response and documentary evidence submitted by the registered providers has been assessed by the Early Years Inspectorate. The minimum requirement for regulatory compliance for regulation 11 is met. This area will be assessed at the next inspection.

Part IV – Information and Records

Regulation 16 – Record in relation to pre-school service

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

(i) details of staff rosters on a daily basis.

(k) details of any accident, injury or incident involving a pre-school child attending the service.

Compliance Information

(i)

1. The registered providers provided documentation of the staff roster for the service on a daily basis.

(k)

2. The registered providers ensured that a record in writing with details of any accident, injury or incident involving a child attending the service was available.

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-

(b) appropriate and suitable care practices are in place in the pre-school service, having regard to the number of children attending the service and the nature of their needs.

(3) A registered provider shall ensure that no practices that are disrespectful, degrading, exploitive, intimidating, emotionally or physically harmful or neglectful are carried out in respect of a pre-school child whilst attending the service.

Compliance Information

Regulation 19(1)(b), and 19(3) was assessed in the Wobbler 1, Wobbler and Toddler rooms.

(1)(b)

The children were observed to be content and relaxed within the care rooms.

The staff members spoke to the children kindly, using their first name, appropriate eye contact and gentle vocal tones during the interactions that were observed.

The service had a healthy eating policy, and the snacks were observed to be healthy. The staff members sat with the children at meal times.

Children were supervised and assisted with hand washing depending on their age and stage of development. The children's toileting needs were attended to at regular intervals throughout the day and more frequently if needed.

A rest area with soft furnishings was available to the children in the care rooms in case a child wished to rest or take a break from activities. Two sleep rooms with cots were provided for the children aged under 2 years. The children in Wobbler 1 room were provided with sleep based on the individual needs and the children in Wobbler and Toddler 2 rooms slept at a designated time. Sleep mats with individual bed linen were provided to the children in the Toddler room.

All the children were provided with and opportunity for outdoor play in the morning and the afternoon.

(3)

The staff members in the Wobbler 1, Wobbler and Toddler rooms were observed being kind and respectful towards the children in their care. First names, appropriate eye contact and gentle vocal tones were used during all interactions with the children.

The young children in Wobbler 1 room went to the staff members for reassurance and comforting and the staff members quickly responded by lifting and cuddling them.

The staff in the Wobbler 1, Wobbler and Toddler rooms were aware of the behaviour management policy for the service. The staff members demonstrated a knowledge of appropriate age-appropriate strategies to use when managing children's behaviour. They also knew the behaviour management practices that were unsuitable and prohibited when caring for children.

Non-Compliance Information

19(3)

1. The registered providers did not submit a detailed action plan regarding protective measures that were required to be put immediately in place to ensure a safe environment for the preschool children in the identified Toddler room. This posed a risk of safety to the children in the Toddler room.

An immediate action notice was issued to the registered providers under regulation 23 – Safeguarding health, safety and welfare of child in relation to this non-compliance. Two written responses were received by the Early Years Inspector on 28 and 29 May 2024 from the registered providers in relation to the immediate action notice and mitigated the risk identified. The responses were accepted by the Early Years Inspectorate.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

1. The required referral forms were completed and forwarded to the relevant authority. An external HR company has completed an investigation on behalf of the registered providers.

Supporting documentation submitted

Documents received in relation to immediate action notice issued.

Written report

Summary Comment

The written response and documentary evidence submitted by the registered providers has been assessed by the Early Years Inspectorate. Regulatory compliance is met for 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 entrance gate and doors to the service was controlled by the staff members to prevent children from exiting the service unsupervised and to restrict unauthorised persons from gaining access the premises.

There was a risk management policy for the service. The staff members in the three care rooms had completed daily indoor and outdoor environmental risk assessments.

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

Non-Compliance Information

General Safety:

1. The staff members did not recognise the potential risk of choking that amber bead necklaces worn by young children in a child care setting posed.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1. Communication sent to all staff members in relation to the danger of amber beads. Information posters put in all rooms re: danger of amber beads. Also sent a notification to parents that no amber beads allowed in our creche. No amber beads allowed in the service.

Supporting documentation submitted

General Safety:

1. Amber beads information sheet

Summary Comment

Regulatory compliance met

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 staff caring for them indoors, in their care rooms, in the sanitary areas and in the outdoor play area.

Non-Compliance Information

- At 13:11pm, 9 children were observed being supervised for sleep, on low level beds in the Toddler room, by two adults. A further 7 children were observed sleeping on low level beds in an adjoining room, while it is acknowledged the interconnecting door was open, the children could not be directly observed or potentially heard if they awoke, got up and moved about the room due to the positioning of both adults in the main room.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

- Going forward we will make sure there is a staff member in each of the sleep rooms and ensure that both rooms have a staff member in each room.

Supporting documentation submitted

- No evidence submitted.

Summary Comment

The written response has been assessed by the Early Years Inspectorate and meets the minimum requirement for regulatory compliance for regulation 27. This area of practice will be assessed at the next inspection.

Part VIII - Notifications and Complaints

Regulation 32 – Complaints

- (1) A registered provider shall ensure that the complaints policy of the service specifies-
- (a) the procedure to be followed by a person for the purposes of making a complaint in relation to the service,
 - (b) the manner in which such a complaint shall be dealt with, and
 - (c) the procedures for keeping a person who makes such a complaint informed of the manner in which it is being dealt with.
- (2) A registered provider shall ensure that-
- (a) a record in writing is kept of a complaint made to the provider in respect of the pre-school service, and
 - (b) the complaint is duly dealt with in accordance with the provider's complaints policy.
- (3) A record in writing referred to in paragraph (2)(a) shall-
- (a) include the nature of the complaint and the manner in which the complaint was dealt with, and
 - (b) be open to inspection on the premises by an authorised person.
- (4) A registered provider shall ensure that a record in writing referred to in paragraph (2)(a) is retained for a period of 2 years from the date on which the complaint has been dealt with.
- (5) The requirement in paragraph (4) is without prejudice to any requirement to retain the record in writing referred to in paragraph (2)(a) under any other enactment or rule of law.

Compliance Information

- (1) (a) (b) (c) The complaints policy referred to the procedures outlined in (1)(a) (b) (c).
- (2)(a)(b) This is stated in the complaints policy for the service.
- (3)(a)(b) This is stated in the complaints policy for the service.
- (4) The registered provider ensured that a record in writing of any complaint made will be retained for a period of 2 years. This is stated in the complaints policy for the service.

Part IX - Inspection and Enforcement

Regulation 33 – Furnishing of information to agency

A registered provider shall furnish the Agency with such information as the Agency may reasonably require for the purpose of enforcing and executing these Regulations and the information shall be in such form, if any, as may be specified by the Agency.

Compliance Information

The registered provider furnished all information as reasonably required by the Agency for the purpose of enforcing and executing these Regulations.