

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015LH078		
Name of Service:	Pugwash Bay Ltd		
Address of Service:	Lis na Dara, Carrick Road, Dundalk, Co. Louth		
Eircode:	A91 VR66		
Name of Registered Provider:	Sharon Bell		
Service type:	Full Day		
Date of Inspection:	18/07/2023		
No of pre-school children:	AM	45	PM 42
Address of the Early Years Inspectorate:	Early Years Inspectorate, 181-189 Lakeshore Drive, Airside Business Park, Swords, Co. Dublin K67 Y5C6.		
Inspection undertaken by:	S Taaffe, AM Coyle and S Cully		
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	Not Applicable		

Description of service

Pugwash Bay Ltd. is one of 5 privately-owned early years services which are operated by the registered provider in Co. Louth and east Co. Meath, all of which have recently undergone a change of ownership. This full day care service is registered to accommodate 72 pre-school children and caters for babies from 6 months of age up until children commence attendance in primary school. Although registered to do so, school aged children are generally not accommodated in this service. The service operates from 8.00am to 6.00pm each weekday participating in the Early Childhood Care and Education (ECCE) scheme for 38 weeks each year. There are 6 care rooms provided on the premises, namely the Jelly Babies Room, the Smarties Room, the Little Buttons Room, the Skittles Room, the Rolos Room and the Marshmallows Room. There are two sleep rooms in place, the larger of which contains 8 standard cots and which is located between and accessible from both the Jelly Babies Room and the Smarties Room. The second smaller sleep room contains 4 standard cots and is located on a corridor adjoining the Jelly Babies Room. A fully enclosed outdoor play area is provided on the premises.

The inspectors were informed that plans were in place to equip a cordoned off section of the spacious hallway with a range of play materials to provide smaller groups of children attending the various care rooms with a change of environment during the day. This was not in place on the day of inspection.

Staffing

There are 20 staff employed in this service, 16 of whom work directly with the children including the service manager who provided support across the care rooms as required. A deputy manager from one of the company's other services was present in the service on the day of inspection supporting the service manager and providing support across all care rooms as necessary. Within the staff compliment 2 housekeeping staff, an office administrator and a bookkeeper are employed in the service. The registered provider was not present in the service during the inspection and is not based in this service. The service manager confirmed that the services' chief operating officer is present in the service intermittently and that one of the housekeeping staff members is present on the premises each evening outside of the operational hours of the service.

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.

The inspection focused on an examination of compliance under Regulations 9, 11, 15, 19, 22, 23 and 25. However, on inspection additional non-compliances which posed significant risks were identified under Regulation 8 - Notification of change in circumstances and Regulation 29 - Premises. These findings are outlined within the relevant regulations within this report.

A sampling process was used to assess compliance under Regulation 15 – Record of pre-school child and Regulation 16 – Record in relation to pre-school service.

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

An immediate action notice was issued to the service manager on the day of inspection in relation to the ambient temperature in the Rolos Room being above the optimum care room temperature of 18-22°C. The service manager provided written assurances of appropriate immediate actions undertaken in the service to control the risk to children within 24 hours of the inspection.

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 II - Registration and Register

Regulation 8 - Notification of change in circumstances

(1) A registered provider of a pre-school service other than a temporary pre-school service shall, subject to paragraph (3), notify the Agency in writing of any proposed change in the details in relation to the pre-school service contained in the register pursuant to section 58C(2) of the Act or Regulation 7(2) at least 60 days before it is proposed that the change would take effect.

(3) Where a registered provider has been unable for good and proper reason to notify the Agency within the time specified in paragraph (1) or (2), as the case may be, of a change in the details in relation to the pre-school service contained in the register pursuant to section 58C(2) of the Act or Regulation 7(2), the registered provider shall notify the Agency in writing of the change as soon as possible thereafter.

Non-Compliance Information

(1)(3) The registered provider failed to notify the Early Years Inspectorate of a change in circumstances as required as evidenced in the following:

- The person detailed as the registered provider on the National Register is no longer engaged with the service.

Corrective & Preventive Action submitted by the Registered Provider

The registered provider stated the following corrective action has been undertaken:

Corrective Action:

(1)(3) A new registered provider has been approved by the Inspectorate.

Supporting documentation submitted:

Written evidence was submitted confirming that the new registered provider was approved, and their name would be entered on the National Register of early years services.

Summary Comment

The registered provider demonstrated that the non-compliance identified under Regulation 8(1)(3) has been adequately addressed.

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) The service manager was the designated person in charge of the service and there was a named person available to deputise as required.

(b) The service manager was present and in charge of the service when the inspectors arrived unannounced on the morning of the inspection.

A total of 22 staff files were reviewed including the file for the deputy manager from another service who was present in this service on the day of inspection and the file for the company's chief operating officer.

(2)(a)(b) Two written, validated references were available for 21 of the 22 staff members whose files were reviewed.

(c) Garda vetting disclosures were available for the 21 staff members who were or may be present during the service's operational hours.

(d) International police vetting was available for 5 staff members who had resided outside of the Irish jurisdiction for more than 6 consecutive months as an adult.

(4) Documentary evidence was available to confirm that, of the 17 staff members whose files were reviewed and who work directly with children in the service, 16 staff members held an appropriate childcare qualification at Level 5 or higher on the National Framework of Qualifications or a qualification deemed by the Minister to be equivalent.

Non-Compliance Information

(2)(a)(b) Two validated written references were not available for 1 staff member whose file was reviewed.

(d) International police vetting was not available for 1 staff member who had resided outside of the Irish jurisdiction for longer than 6 months as an adult.

(4) Documentary evidence was not available to confirm that 1 staff member whose files was reviewed and who works directly with the children in the service did not hold an appropriate childcare qualification at Level 5 or higher on the National Framework of Qualifications (NFQ) or a qualification deemed by the Minister to be equivalent.

Corrective & Preventive Action submitted by the Registered Provider

The registered provider stated the following corrective actions and preventive actions have been undertaken:

Corrective Action:

(2)(a)(b) Two references have been provided. These have both been validated and filed in head office.

(2)(d) The staff member in question is working with the Embassy and is in the process of getting her international police vetting. All advice was sought and followed in relation to her position and the steps she needed to proceed with.

(4) The staff member was in contact with QQI. Her forms and qualifications have been sent and the service is awaiting confirmation of her qualification recognition. In the interim, risk assessments have been completed and the staff in question is not working directly with the children. Her hours have been reduced and she is supporting the household staff.

Preventive Action:

(2)(a) (b) All staff files will be checked and audited on a regular basis going forward. This will be done by the centre manager and a company auditor.

(2)(d) All files will be reviewed by manager and area manager before employing a childcare practitioner. They will also be audited on an ongoing basis by the manager and company auditor.

(4) All staff files will be checked by manager and area manager before commencing employment. They will also be audited on an ongoing basis by the manager and company auditor.

Supporting documentation submitted:

The registered provider submitted the following documentary evidence:

- Two written, validated references for the relevant staff member.
- International police vetting for the relevant staff member issued from the country in which she had resided for a period in excess of 6 months as an adult.

Summary Comment

The actions undertaken by the registered provider address the non-compliances identified under Regulation 9(2)(a)(b)(d).

The non-compliance under Regulation 9(4) remains outstanding. The registered provider is required to submit confirmation, when available, that the relevant staff member has achieved a major award in childcare at Level 5 or higher on the NFQ before she resumes working with pre-school children.

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) On the day of inspection there was an adequate number of staff members working directly with the children attending the service.

(2) The adult to child ratios were correct in the service when the inspectors arrived unannounced at 9.40am and remained so throughout the inspection.

The following adult to child ratios were observed during the inspection:

- In the Jelly Babies Room there were 6 children (of whom 1 child was aged 10 months and 6 children were aged 1 year 1 month to 1 year 9 months) being cared for by 2 staff members.
- In the Smarties Room there were 9 children aged 1 years 8 months to 2 years 5 months being cared for by 2 staff members.
- In the Little Buttons Room there were 10 children aged 2 years 4 months to 3 years 2 months being cared for by 2 staff members.
- In the Skittles Room there were 6 children aged 3 years 5 months to 4 years being cared for by 1 staff member.
- In the Rolos Room there were 14 pre-school children aged 3 years 4 months to 4 years 9 months and 2 school aged children being cared for by 2 staff members.
- The Marshmallows Room was unoccupied.

The service manager and 2 additional members of staff were available to provide support and assistance in the care rooms when required, particularly during nappy changing, when children were settling to sleep and for break cover.

(8)(a) The registered provider ensured that 2 adults were present on the premises at all times, verified by staff rosters and staff attendance records maintained at the service.

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.*

(3) A record in writing referred to in paragraph (1) or (2) shall be open to inspection on the premises by-

- (c) an authorised person.*

Compliance Information

(1) A sampling process was used in relation to the children's records. All 15 sampled registration forms were appropriately completed with the required information as specified in sub-sections (a) to (i) in this regulation.

(3)(c) The children's records were open to inspection as requested by the inspectors as authorised persons.

Part IV – Information and Records

Regulation 16 – Record in relation to pre-school service

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

- (a) the name, position, qualifications and experience of the person in charge and of every other employee, unpaid worker and contractor;*
- (b) details of the class of service and the age profile of children for which the service is registered to provide services;*
- (c) details of the adult:child ratios in the service;*
- (d) the type of care or programme provided in the service;*
- (e) the facilities available;*
- (f) the opening hours and fees;*
- (g) the policies, procedures and statements the service is required to maintain in accordance with Regulation 10;*
- (h) details of attendance by each pre-school child on a daily basis;*
- (i) details of staff rosters on a daily basis;*
- (j) details of any medication administered to a pre-school child attending the service with signed parental consent;*
- (k) details of any accident, injury or incident involving a pre-school child attending the service.*

(3) A record referred to in paragraph (1) shall be open to inspection on the premises, and the documents and records referred to in paragraph (2)(a) shall be open to inspection whether on the premises or elsewhere, by an authorised person.

Compliance Information

(1)(a) Apart from the non-compliance detailed below information including each staff member's experience and training records were maintained within the staff files for 20 of the staff files that were reviewed on the premises, and these were presented for review by the inspectors.

(b) - (f) The information specified in sub-sections (b) to (f) in this regulation were on display on a notice board in the foyer of the service.

(g) A record in writing was maintained of policies and procedures required in accordance with Regulation 10.

(h) Details of children's daily attendance including arrival and departure times were recorded in attendance records within each care room.

- (i) An up-to-date weekly staff roster was available, and staff sign in records were maintained on a daily basis.
 - (k) The service had a record in writing of accidents, injuries and incidents involving pre-school children.
- (3) The records referred to in paragraph (1) were open to inspection as requested by the inspectors as authorised persons.

Non-Compliance Information

(1)(a) Two staff members did not have a recorded history of past employment and relevant experience available for inspection. Therefore, it was not possible to determine whether the available references had been obtained from the most recent employers or whether police vetting from other jurisdictions was required, in accordance with Regulation 9(2)(a), (b) and (d).

(j) Not all medication administration forms maintained in the service were complete. A number of forms were not signed by the child's parent or guardian to document that, before leaving the service, they had been informed and were aware of what medication was given to their child during the course of the day and at what time. Examples of this practice included forms maintained in relation to medication administered in the service on 17/07/2023, 14/07/2023 and 28/06/2023.

Corrective & Preventive Action submitted by the Registered Provider

The registered provider stated the following corrective actions and preventive actions have been undertaken:

Corrective Action:

(1)(a) One CV has been provided and submitted. The other CV was held in head office as it is a CV of the Chief Operating Officer.

(j) The parents have signed the forms. The administration of medication policy was given to the childcare practitioners to read and sign. Training was provided for staff members in relation to same.

Preventive Action:

(1)(a) All staff files will be audited on an ongoing basis by the manager and company auditor.

(j) Ongoing audits are being carried out to ensure the childcare practitioners are up to date on the administration of medication policy. The childcare practitioners will complete online administration of medication training.

Supporting documentation submitted:

The registered provider submitted the following documentary evidence:

- Copies of two CVs for the relevant staff members.
- A copy of the service's medication administration policy which was sufficiently detailed to guide safe practice.

Summary Comment

The evidence submitted has been reviewed and accepted. The non-compliances observed under Regulation 16(1)(a)(j) have been adequately addressed.

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

(1)(a) The following observations were made on how each child's learning, development and well-being was facilitated within the daily life in the service:

Basic needs:

- The staff members in the five occupied care rooms were respectful in their interactions with the children in their care. The staff members were observed engaging with the children in an interested and responsive manner during the inspection.
- During mealtimes the staff members interacted warmly with the children which created a relaxed atmosphere and encouraged the children to enjoy their meals.
- The children had their nappies changed regularly and in a timely manner when required, with the staff members heard chatting to and engaging positively the children during these procedures. Children who were toilet trained were facilitated to use the toilet independently with reminders, discreet supervision and assistance provided by the staff members when required.

- The children in the Jelly Babies Room were facilitated to sleep when their needs dictated on the day of inspection with child-led sleep practices observed being facilitated for these children. For some children their sleep time coincided with dinner time at 12.00midday and they were provided with their meal when they were ready after they woke up. Sleep mats were available for the older children who still availed of a day-time nap and who were facilitated to sleep at the service’s designated sleep time after lunch. Floor matting and soft cushions were provided in the care rooms for children to rest and opt out of activities if required during the day.
- The children engaged in outdoor play on the afternoon of the inspection when the heavy rain cleared.

Supporting relationships around children:

- Staff members frequently shared information with each other during the inspection to facilitate and support each individual child’s needs, likes and routines. A team spirit was demonstrated in the manner in which the staff engaged and consulted with each other as they organised the daily routine and sharing of tasks.
- The staff members approached children’s behaviour in a positive and supportive manner, calmly distracting or re-directing the children before conflict escalated.
- Staff members provided written notes to parents on a daily basis in relation to what their child had eaten, their nappy changes, activities and their sleep in the service.
- The service manager reported that regular staff meetings were held after hours with all staff members to share information, discuss policies and to plan the curriculum and activities in the care rooms. Coincidentally a staff meeting was scheduled to place on the evening of the inspection.

Physical and material environment:

- With the exception of the non-compliances detailed below the care rooms were laid out in defined interest areas including home corners, library areas, arts and crafts spaces and construction areas. A range of push-along toys and an indoor wooden frame with two carpeted steps and ramp attached were provided to support the children in the Jelly Babies Room to engage in physical activity.
- Opportunities for sensory play were facilitated in the service. Textured balls and a variety of brushes and fabric pieces were amongst the sensorial materials provided in the Jelly Babies Room. Homemade modelling dough was provided in the Smarties Room. In the Little Buttons Room, the Skittles Room and the Rolos Room sensory play was accessible on sensory trays layered with dried pasta and glitter or with sand.

- Family photographs were on display at children’s eye level in the care rooms which supported the children to develop a sense of belonging and connectedness in the service and enabled the children to maintain links with family and home.
- An armchair was provided in the Jelly Babies Room and in the Smarties Room to facilitate the staff members to sit with, cuddle and comfort the children when required throughout the day.
- Floor matting, cushions and soft toys were provided as spaces in each care room for children to rest and opt out of activities as required.
- The outdoor play area was divided by low level fencing into 3 separate sections, one of which was accessed directly from the Jelly Babies Room, one of which was allocated for use by the children attending the Smarties Room and the remaining larger area assigned for the children in the other care rooms at scheduled times each day. The surface of the outdoor play area was covered with a synthetic impact absorbing material and play materials included a rigid plastic ground-level tunnel, a climbing A-frame, a low level slide, two plastic playhouses, ride on toys, an outdoor wooden kitchen, tyres and picnic benches. Equipment in the 3 areas was tailored to the age and stage of development of the children using each area.

Non-Compliance Information

Basic needs:

1. Transitions between activities were not managed appropriately at all times. For example, the children in the Rolos Room were observed sitting at their tables waiting for dinner but were not productively engaged in activities for a 20-minute period before the meal was served at 12.21pm. It is acknowledged that one staff member sang songs and engaged the children in a colour recognition game during the waiting period but some of the children showed signs of becoming disengaged and restless, fidgeting in their chairs. A similar delay of 20 minutes occurred before dinner was served in the Smarties Room, during which time the children were observed sitting unoccupied at tables waiting for the meal to be served.

Physical and material environment:

2. A wooden play kitchen was available in the Jelly Babies Room but the small range of supportive play materials provided (namely a plastic orange, a plastic lemon, a small bunch of plastic grapes, a cloth banana and one small plastic shopping basket) did not facilitate meaningful play experiences for the children in attendance.

3. A lack of resources and materials was observed in the home corner of the Smarties room also, which consisted of a wooden kitchen, 1 box with some play food, a table and chair and doll pram. Overall, the equipment and resources accessible to the children in this room was sparse and did not meet the developmental needs and interest of the varied age group. Although the staff engaged children in conversation and activity, outside of these moments' children were observed wandering in the room and showing signs of boredom.
4. There were two highchairs and three low level wooden chairs provided for the children in the Jelly Babies Room, but these were insufficient in number to allow flexible seating arrangements for children to play and eat together when all 8 children were present when the care room was operating at capacity.
5. The range of books available in the Jelly Babies Room and Smarties Room was insufficient to support children's choice and promote language development.

Corrective & Preventive Action submitted by the Registered Provider

The registered provider stated the following corrective actions and preventive actions have been undertaken:

Corrective Action:

Basic needs:

1. Transitions were discussed in detail at the staff meeting. All childcare practitioners are aware that transitions need to be considered more in their rooms. Mediums such as music will be used to complete transitions more effectively. Kitchen staff have been involved in discussions and planning around transitions. They are aware that timetables need to be adhered to and managed more effectively. Each childcare practitioner has been given information on transitions from a national best practice guidance document. It was also covered in training provided by an outside organisation, to all staff members.

Physical and material environment:

2. Further play materials and resources for the kitchen area and all other areas of the room including the doll's section and the home corner were purchased and are now in use in the room. The staff members received training on environments and upkeep of their rooms, and this will be an ongoing piece of work for the staff members. As the children display their emergent interests, the room will be adapted to suit their needs.

3. Further play materials and resources for the kitchen area and all other areas of the room were purchased. Tabletop materials and home corner equipment were updated. Staff have received training around this and ongoing assessments will be done on the room in order to ensure resources and activities are in line with the children's needs and interests.
4. & 5. Two highchairs have since been purchased. Age-appropriate books were purchased for the library in both rooms. These are displayed in a manner suitable to the age groups and will be monitored. The resources in the rooms are now under regular inspection and risk assessments will be carried out in rooms with regards to resources. Training has been provided with regards to environments and room set ups which all staff have taken on board. All childcare practitioners are developing a sense of ownership in the rooms and are enjoying the task of creating a more enjoyable space for all the children. Training will begin with an external quality development service which includes training for the quality liaison person who will monitor room environments and set ups.

Preventive Action:

Basic needs:

1. The service has employed a staff member to complete ongoing training on curriculum development. Training information has been provided to the Inspectorate and evidence of the staff meeting and agenda.

Physical and material environment:

2. All staff have received training on environments from an external specialist training company. All rooms will be audited on a regular basis. Risk assessment will be completed on the resources in the classroom. All childcare practitioners will be encouraged to take ownership on their rooms.
3. All staff have received training on environments from an external specialist training company. All rooms will be audited on a regular basis. Risk assessment will be completed on the resources in the classroom. All childcare practitioners will be encouraged to take ownership of their rooms.
4. & 5. Ongoing audits are being completed in every room. Staff are aware of their environments; all childcare practitioners are advised to take ownership of their room and resources available. A quality liaison person has been appointed and will monitor the resources in each room.

Supporting documentation submitted:

The registered provider submitted the following documentary evidence:

- Agenda and minutes of a staff meeting held on 18/07/2023 which included transitions and play environments as agenda items.
- Documentation (dated 22/08/2023) from an external specialist training company confirming that three training sessions had recently been provided in the service in a range of topics including the early years regulations, professionalism, interactions and play environments.
- A number of photographs showing a range of additional predominantly wooden play resources, in addition to books and a well-resourced home area provided in the service.
- A photograph and a receipt for 2 new highchairs.

Summary Comment

The inspectors reviewed the corrective and preventive actions and evidence submitted by the registered provider following the inspection. The non-compliances observed under Regulation 19(1)(a) have been adequately addressed. Assurances given by the registered provider have been accepted and these will be reviewed at the next inspection.

Part V - Care of Child in Pre-school Service

Regulation 22 – Food and drink

A registered provider shall ensure that adequate and suitable, nutritious and varied food and drink is available for each pre-school child attending the pre-school service.

Compliance Information

A selection of cereals was available for the children to have for breakfast in the service up until 9.00am daily, if required. Dinners are sourced in bulk from a specialist catering company and stored frozen on the premises, in advance of use. A 4-week dinner menu was on display on the premises. Children with specific dietary requirements were catered for during the inspection. Drinking water was available and accessible to the children in the individual care rooms.

Non-Compliance Information

The daily nutritional requirements were not adequately met for children attending the service as evidenced in the following:

1. With the exception of breakfast and dinner, all other food eaten by the children in the service were provided by parents or guardians and these mostly consisted of snack food rather than food which would constitute a second meal containing protein, carbohydrate, dairy and fruit or vegetables. Some of the snacks observed being eaten by the children for their morning snack and their afternoon snack were of low nutritional value and were high in sugar, saturated fat and salt content, as evidenced in a number of children eating flavoured puffy corn snacks, biscuits and biscuit bars. One child was provided with two yogurt pots and one yogurt drink at the time of one snack.
2. Dinner portions of beef pasta Bolognese served to some children in the Jelly Babies Room and the Smarties Room were observed to be small, only partially covering the base of the small plastic bowls in which they were served. A number of children were observed eating their dinner very quickly, with two children in the Smarties Room observed reaching out towards other children's bowls as soon as they had finished their own dinners. However, apart from the snack foods provided from home, there was no stock of food available in the service for a child who may require additional or alternative food.

Corrective & Preventive Action submitted by the Registered Provider

The registered provider stated the following corrective actions and preventive actions have been undertaken:

Corrective Action:

1. The menu has been reviewed and updated which includes an evening meal. See menu attached. This has been successful to date. All parents were reminded of the service's healthy eating policy and encouraged not to pack unhealthy snacks for the children.
2. The children are being offered larger portions and an alternative is given for a child who requires additional or alternative food. The food company is working closely with the service to perfect the meal requirements and the children's preferences.

Preventive Action:

1. Unhealthy snacks will be sent home with the children and a healthy one will be provided. Parents will be reminded of the service's healthy eating policy. The menu will be monitored and reviewed on a regular basis, so as to ensure that there is plenty of variety for the children.
2. Ongoing audits will take place. The food waste and intake will be monitored to assess the children's likes and dislikes.

Supporting documentation submitted:

The registered provider submitted the following documentary evidence:

- A copy of the service's revised 4-week menu showing a range of healthy food options provided, including an additional meal (tea) being served each afternoon on a daily basis.
- A copy of the times when dinner and tea is served to the children in the individual care rooms.
- Agenda and minutes of a staff meeting held on 18/07/2023 which included healthy eating as an agenda item.

Summary Comment

The evidence submitted has been reviewed and accepted. The non-compliances observed under Regulation 22 have been adequately addressed.

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:

- At the main entrance to the premises an 'air lock' lobby area was in place with a half door provided to separate the front hallway from the adjoining corridor. A magnetic door release button positioned out of the reach of children was required to be activated to facilitate entry and exit through the half door. This ensured that staff members could facilitate each child's entry to and departure from the service in a safe and controlled manner.

- The water temperature in the care rooms and sanitary accommodation in the service did not exceed the recommended maximum water temperature of 43°C. This reduced the risk of scalding for the children. The inspectors were informed that the warm water supply was thermostatically controlled.
- Tightly woven wire mesh fan guards were in place on the fans in use in the care rooms during the inspection. These physical barriers reduced the risk of children or objects making contact with the spinning blades.
- Blind cords were appropriately secured or provided on windows which were positioned near ceiling height, out of the reach of children.
- Cleaning agents were stored safely out of the reach of children.
- The kitchen was inaccessible to the children during the inspection.

Infection Control:

- In the Jelly Babies Room soothers were stored in individually labelled containers when not in use.
- A steam steriliser was provided in the service and staff members described safe practice in relation to washing soothers in warm soapy water in advance of sterilising these items at least on a daily basis.
- In the Jelly Babies Room bottles of infant formula/ milk pre-prepared by parents were appropriately stored in named containers in the fridge.
- Perishable food items provided by the parents for the children to eat in the service were refrigerated in the care rooms on arrival which reduced the risk of bacteria growth.
- Disposable aprons and suitable disposable gloves were available and observed being worn by staff members for each individual nappy change.

Administration of Medication:

- Medications were stored out of the reach of children. No children were observed having medication administered on the day of inspection.

Safe Sleep:

- All children aged less than 2 years slept in a standard cot on the day of inspection. Based on an examination of the children's attendance records maintained in the service, all children under 2 years of age had access to a standard cot on a daily basis.
- There was a digital thermometer available in both sleep rooms and these were used to ensure the ambient air temperature was maintained within the recommended safe sleep temperature range of 16-20°C.

- The cots in the sleep rooms and the sleep mats set up for children aged 2 years and older to sleep in the unoccupied Marshmallows Room after dinner were positioned at the recommended distance of a minimum of 50cm apart. This reduced the risk of cross infection and enabled staff to access children in the event of an emergency.

Fire Safety:

- The service's designated emergency exits were unobstructed.

Non-Compliance Information

General Safety:

- The ambient air temperature of the Rolos Room was not maintained between 18-22°C during the inspection as evidenced in table 1.1 below. The service manager and staff members confirmed that this was an ongoing issue and on occasions in recent months the air temperature in this care room reached 27°C. This posed a risk in relation to the safety and comfort of the children in attendance.

Ambient air temperature in Rolos Room	Time
24.5°C	12.05pm
26.0°C	12.45pm
25.6°C	2.50pm

Table 1.1 Ambient air temperatures in the Rolos Room on the day of inspection.

Infection Control:

- Inappropriate handwashing was observed on the day of inspection as evidenced in the following examples:
 - Staff members did not always wash their hands after nappy changing.
 - Staff members did not wash their hands after cleaning children's noses in the Smarties Room.
 - Children's hands were not always washed after nappy changing.
 - Children being cared for in the Jelly Babies Room and the Smarties Room did not have their hands washed before eating their morning snack.
 - Staff members in the Smarties room were not observed to wash their hands before meals, but did wear gloves while serving food.

- The press head on the liquid soap dispenser in the sanitary accommodation adjoining the Rolos Room was broken and there was no liquid soap available in this sanitary area to support effective hand hygiene. It is acknowledged that the staff members endeavoured to provide liquid soap or hand sanitiser when the children returned to the care room but some of the children used the toilet independently and resumed play in the care room without washing their hands.
- 3. Some staff members were vague in relation to the correct dilution and appropriate use of the sterilising fluid provided for the management of mouthed toys in the service.
- 4. Dust and food particles had accumulated on each of the 4 shelves on a white shelving unit in the Jelly Babies Room which posed a risk of cross infection.

Safe Sleep:

- 5. One mattress cover in the larger sleep room was torn with the inner foam exposed which was a safety risk posed a risk of cross infection.
- 6. In the Smarties Room, sleep check records for 3 children were incomplete suggesting that 10-minute physical sleep checks had not been carried out for a period of time. The records showed that three children who had slept between that 12.30 – 2.40pm were last checked at 1:55pm on the day of the inspection.

Action submitted by the Registered Provider

The registered provider stated the following corrective actions and preventive actions have been undertaken:

Corrective Action:

General Safety:

- 1. An industrial fan was purchased for the Rolos Room. The room temperature was reduced and this was approved of by the inspectors.

Infection Control:

- 2. A new hand soap dispenser arrived the next morning and is now in place. Infection control has been discussed at the staff meeting. All staff were required to update their knowledge on the nappy changing policy. Training was provided to all staff members by an external specialist training company on the service's policies including infection control, and safe and effective cleaning procedures. The service has engaged with a new supplier for the hygiene equipment. All were recently assessed and will be put in place promptly. Infection control will be monitored very closely.

Hand hygiene is of the upmost importance and will be something that is of priority for all staff members. Signs will remain in place to encourage correct hand hygiene and it is an ongoing item on the staff meeting agenda.

3. Training was provided to staff with regards to this area. All policies and procedures are readily available to all the childcare practitioners, and they are encouraged to read these if they require to. All items will be submerged in the solution for the correct period of time and monitored as necessary. All containers used will be marked with the correct solution and procedure.
4. This area has been cleaned and sanitised.

Safe Sleep:

5. Two new mattresses with mattress protectors were purchased. The issue of mattresses damage was discussed in the staff meeting.
6. This was discussed at the staff meeting. The safe sleep policy is readily available to all the childcare practitioners. Training was provided on this with an external specialist training company. This area will also be covered on the ongoing audits.

Preventive Action:

General Safety:

1. There are regular temperature checks in the room throughout each day. These checks will also be monitored in the ongoing audits.

Infection Control:

2. Regular observations will be carried out. This will be an ongoing item on the agenda for the monthly staff meetings. Training was provided by an external specialist training company on policies including infection control. Hand hygiene is something that will be monitored closely.
3. The correct dilution of the sterilising fluid has been provided for the childcare practitioners and placed on the wall. Regular observations will be carried out. All staff have been informed of this process and will continue to be reminded of same. This will be an item on the service's in-house continuous audits. Documentation has been provided to the Inspectorate for the solution mixture.
4. The staff members have been advised to check all shelves and units to ensure that they are always clean and sanitised and to follow the infection control policy. This area will be covered in the service's ongoing audits. The in-house cleaner will monitor this area and any similar areas going forward.

Safe Sleep:

5. All mattresses have mattress protectors to prevent similar damage and to allow for easy cleaning. All staff are aware of monitoring mattresses and to alert management if there are any issues with any of the mattresses.
6. Training was provided on this through an external specialist training company. This area will also be covered on the service's ongoing audits. See list of training covered provided.

Supporting documentation submitted:

The registered provider submitted the following documentary evidence:

- A receipt for 3 air coolers was submitted within 24 hours of the inspection, within the service's response to the immediate action notice issued on the day of inspection.
- Training records and practical assessment templates in relation to hand hygiene.
- Mouthed toy policy and a copy of the procedure for the appropriate use of sterilising fluid.
- Revised cleaning schedules.
- A photograph and receipt for 2 new mattresses.
- Agenda and minutes of a staff meeting held on 18/07/2023 which included each issue detailed as a non-compliance in this inspection report and the service's associated policies.

Summary Comment

An immediate action notice was issued to the service manager on the day of inspection in relation to the ambient temperature in the Rolos Room being above the optimum care room temperature of 18-22°C.

The service manager provided written assurances of appropriate immediate actions undertaken in the service to control the risk to children within 24 hours of the inspection.

The evidence submitted has been reviewed and accepted. The non-compliances observed under Regulation 23 have been adequately addressed.

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) A sufficient number of staff members held in-date First Aid Response (FAR) training to ensure that a person with FAR training was at all times immediately available to the children attending the service. This was evidenced in staff members' training records and the service's staff roster.
- (2)(a)(b) The first aid boxes available in the service were suitably equipped and stored in conspicuous locations on the premises and these were available for the children in attendance, in the event of an emergency.

Part VII - Premises and Space Requirements

Regulation 29 - Premises

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

Compliance Information

- (b) The premises was found to be appropriately secured to prevent the children from exiting unsupervised and to restrict unauthorised persons from gaining access to the early years service. A doorbell was provided at the main entrance to allow parents or visitors notify staff members of their arrival to the service. Glass panels in the front doorway facilitated staff members to see visitors before facilitating their entry to the service. The outdoor play area fully enclosed by the service walls and high-level fencing.

Non-Compliance Information

- (d) The floor covering at the doors leading from the corridor into both the Smarties Room and the Little Buttons Room was torn and in a defective condition. This posed a trip hazard and also did not allow for effective cleaning.

Corrective & Preventive Action submitted by the Registered Provider

The registered provider stated the following corrective actions and preventive actions will be undertaken:

Corrective Action:

(d) Maintenance was aware of this issue and were sourcing a company to repair the flooring. This has been sourced and a plan is underway. Due to underfloor heating, it was a longer process than originally expected.

Preventive Action:

(d) Maintenance is aware of this issue happening and will monitor other areas in the service to prevent a similar issue occurring. This creche now has a company who will work with any flooring issues that arise.

Supporting documentation submitted:

The registered provider submitted the following documentary evidence:

- An email from a tradesman dated 22/08/2023 stating that he planned to carry out the floor repairs “after (his) holidays”.

Summary Comment

The non-compliance observed under Regulation 29(d) remains outstanding as of 12/09/2023, as confirmed with the service manager.