

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015MN046
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Name of Service:	Riverbank Community Childcare CLG
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Address of Service:	The Enterprise Centre, Emyvale, Co. Monaghan
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Eircode:	H18 P521
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Name of Registered Provider:	Denise Jordan
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Service type:	Full Day, Part Time, Sessional
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Date of Inspection:	05/06/2024
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No of pre-school children:	AM	52	PM	34
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Address of the Early Years Inspectorate:	Early Years Inspectorate No.18 The Grange Plantation Road Monaghan
Inspection undertaken by:	S. Skinnader and M. Flood
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
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Description of service

Riverbank Childcare CLG has been operating as a community run childcare service since 2005. They provide full day care, part-time and sessional education and care to pre-school children aged from 0 - 6 years of age. The service is open from 07:45 to 18:00 each weekday and caters for a maximum of 80 children. The service operates from rooms in a purposely developed premises in the village of Emyvale Co. Monaghan. The service currently has 4 care rooms in operation in the morning namely: the Baby Room, Toddler Room and Preschool Rooms 1 and 2. In the afternoon Preschool Room 2 converts into a room for school aged children. There are 2 separate sleep rooms, nappy changing and sanitary accommodations, a kitchen and an office.

Staffing

There were 27 staff employed in the service 19 who could work directly with the preschool children, 4 employed as cleaners and maintenance, 1 cook, 1 staff member in an administrative capacity and 2 staff members who worked with school age only.

Methodology

Tusla's Early Years Inspectorate is the independent statutory regulator of early years services in Ireland. The Child Care Act 1991 (Early Years Services) Regulations 2016 define the duty of a registered provider to ensure the safety and well-being of children and to comply with these regulations. This Act also gives Tusla the authority to assess compliance with the regulations. The purpose of regulation in relation to early years services is to ensure that the care, safety, and well-being of children attending such services is upheld. Inspections of early years services are planned based on the following:

- Previous inspection history
- Any information received in relation to the service

The findings on inspection are based on:

- Information obtained through examination of documentation
- Direct observation
- Discussion with relevant staff

This inspection was unannounced and focused on the area of governance/ health, welfare and development of child/ safety/ premises and facilities. The inspection may also focus on other areas as required.

The inspection focused on an examination of compliance under regulations 9, 11, 16, 22 and 26; however, on inspection additional non-compliance which posed a risk was identified under Regulation 23. These findings are outlined within the relevant regulations within this report.

Inspection findings are documented in the inspection report which is first issued in draft format to the service with an opportunity to respond to any findings. Where statutory requirements are identified as not being met, the registered provider must demonstrate how they have rectified the non-compliance and will prevent any non-compliance from re occurring. The Corrective Action and Preventive Action plan (CAPA) will be used to inform decisions about compliance with regulatory requirements. Where the registered provider fails to meet the statutory requirements an escalation process may be commenced.

The inspectorate reserves the right to edit responses received for reasons including clarity, completeness and compliance with administrative and legal processes.

The contents of the report are compiled by the inspectorate body.

Acknowledgments

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

Part III – Management and Staff

Regulation 9 – Management and recruitment

(1) A registered provider shall ensure that-

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

(2) A registered provider shall ensure that each employee, unpaid worker and contractor is suitable and competent taking into consideration the nature of the needs of children, including by-

- (a) consideration of references from the person's past employers, if any, and in particular the most recent employer, if any,
- (b) consideration of references from reputable sources in the case of a person who has no past employers,
- (c) consideration of the vetting disclosure received from the National Vetting Bureau of the Garda Síochána in accordance with the Act of 2012 in respect of the person, and
- (d) ensuring, insofar as is practicable, that where a person has lived in a state other than the State for a period of longer than 6 consecutive months, he or she provides police vetting from the police authorities in that state.

(4) A registered provider shall ensure that, without prejudice to the generality of paragraph (2) and subject to paragraphs (5) and (6), each employee working directly with children attending the service holds at least a major award in Early childhood Care and Education at Level 5 on the National Qualifications Framework or a qualification deemed by the Minister to be equivalent.

Compliance Information

(1)(a) & (b) The service had a designated person in charge and a system in place to designate a named deputy person to deputise as required. The deputy person in charge was on the premises for the duration of the inspection.

There were 27 staff files presented for inspection.

(2)(a) & (b)

- There were 2 written and validated references from a past employer or an alternative source available for 22 members of staff.
- There was 1 written and validated reference available for 2 staff members.
- There were 6 written references available.

(c) Documentary evidence of a processed Garda vetting disclosure was available for all 27 staff members in the service. The service did not adhere to the re-vetting timeframes as outlined in the Early Years Inspectorate Regulatory Notice, requiring services to renew Garda vetting every three years. Please refer to the information outlined under regulation 23 of this report.

(d) Following a review of the staff files presented on the day of inspection, international police vetting was available for the 7 staff members who had resided outside the jurisdiction for a period of greater than 6 months as an adult.

(4) Documentary evidence was available to demonstrate that the 19 members of staff, who worked directly with the pre-school children had a minimum Level 5 childcare qualification.

Non-Compliance Information

(2)(a) and (b)

1. Two staff members did not have a second written and validated reference.
2. Six written references were not validated.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(2) (a) and (b)

1. Management immediately sought the written references.
2. All staff members references have been validated, signed and dated by the person responsible.

A second signature added to the staff file showing that each new staff member has been cross checked by both manager and deputy manager. All staff files are re-visited annually to update in July of each year or immediately if the need arises.

Supporting documentation submitted

Copies of written and validated references

Summary Comment

The Inspectorate have reviewed the registered provider's response and supporting documentation and is satisfied that the non-compliances have been addressed.

Part III – Management and Staff

Regulation 11 - Staffing levels

(1) Subject to this Regulation, a registered provider shall ensure that there is always 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) During the inspection there were an adequate number of adults working directly with the children attending the pre-school service in the Baby Room, Toddler Room, and Preschool Rooms 1 and 2.

(2) When the inspectors arrived unannounced to the service there were 4 rooms in operation the Baby Room, the Toddler Room, and Preschools 1 and 2.

The following adult: child ratios were observed:

- Three staff in Baby Room with 10 children aged 10 months – 1 year and 8 months years.
- Four staff in the Toddler Room with 16 children aged 2 - 3 years.
- Two staff in Preschool Room 1 with 13 children aged 3-5 years.
- Three staff in Preschool Room 2 with 13 children aged 3 - 5 years.

In addition, the deputy in charge was present from 7:45am – 5pm, one staff member employed in administrative duties from 9 – 2pm, one staff member employed as cook from 9 – 2pm and a staff member employed as cleaner from 11.1:30 and then 1:30 – 4:30 in the kitchen.

(8)(a) Following a review of the available documentation e.g., staff rotas and children’s attendance records the information demonstrated that the registered provider ensured that there were at least 2 adults on the premises at all times

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:

(h) details of attendance by each pre-school child on a daily basis,

(i) details of staff rosters daily,

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

Compliance Information

(1)(h) All preschool children were signed in on both the “app” and attendance books.

(k) Documentary evidence was available of any accidents and incidents involving the preschool children; for example, of the 6 forms reviewed in the Toddler Room all contained the required information and relevant signatures.

Non-Compliance Information

(1) (i) The service rota was not reflective of all staff present on the day of inspection or for the documented week as the person in charge and deputy were not on the rota.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(1)(i) All staff have been added to the rota including management.

Continue to include all staff on the service rota that are in the setting in the operational times/days.

Supporting documentation submitted

Sample copy of staff rota

Summary Comment

The registered provider’s response is accepted, and the non-compliance has been addressed.

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

Healthy eating was promoted in the service and there was a 2-week menu on display. Dinner, morning and afternoon snacks were provided by the service for those children staying on a full day care basis. The morning snack consisted of scrambled eggs and soda farls. Dinner was roasted stuffed pork with potatoes, carrots and peas. Fruit was served at 2pm and evening tea consisted of pasta and sauce. The consistency of the food was age appropriate. Drinks were freely accessible in the Preschool Rooms in individual cups and there was potable water and milk available in the service. Preschool children had the option of bringing their own lunches in. It was reported by staff that bottles of powdered infant formula are brought in ready made up by the parents and then stored appropriately in the fridge.

Part VI - Safety

Regulation 23 - Safeguarding health, safety and welfare of child

A registered provider shall ensure that all reasonable measures are taken to safeguard the health, safety and welfare of a pre-school child attending the service and that the environment of the service is safe.

Non-Compliance Information

General Safety:

1. While it is acknowledged that Garda vetting was available for 7 staff members, these vetting disclosures were not dated within the previous three years in adherence to with the Early Years Inspectorate Regulatory Notice 'EYI-RN12.3 Renewal of Garda Vetting'.
2. There were sharp corners on the on white units in Preschool Rooms 1 and 2.

In Preschool Room 1 the following health and safety risks were identified:

3. The cupboard lock under the sink was broken and the cupboard contained cleaning sprays and detergent which were potentially accessible to the children. In addition, one bottle of cleaning spray was stored on the sink area and accessible to the preschool children.

4. A plate of fruit for the afternoon snack was sitting on the sink area with a kitchen knife to cut the fruit up also on the plate. This was accessible to the preschool children.
5. A speaker and charging lead were unsecured at a low level accessible to the children and a potential impact and injury hazard.
6. The phone in the room was at a low level with the handset cord accessible to the children which posed a potential impact and injury hazard.

Infection Control:

7. The service did not have guidance for staff on the correct procedure for cleaning and sterilising soothers. The current procedure did not include washing the soothers in detergent first prior to sterilisation which is best practice.

Corrective & Preventive Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1. All staff have current garda vetting dated within the last three years and documented on staff file.
Date of expiration of Garda vetting has been added to staff file.
2. Management to communicate the health and safety issues regarding furniture with sharp corners and staff to act immediately if furniture pieces need to be updated.
Management and room leaders to check all furniture daily and replace corner pieces when necessary
3. The cupboard was immediately fitted with a secure lock and a shelf was introduced for staff to have easy access to cleaning sprays in a safe procedure.
All room leaders to report any missing lock to be replaced to management immediately. Sprays to be locked in cupboard or on a high shelf away from children's reach.
4. All foods including fruit to be prepared in the kitchen area only.
All food to be prepared in the kitchen area only.
5. All devices including the speaker to be charged out of reach for children in the evening time when children are not in the building.
All devices to be charged in the store are.
6. The telephone line has been extended to run along the wall area in a secure manner.
Staff to be made aware of the hazards leads accessible to children.

Infection Control:

7. A clear policy outlining the correct procedure on sterilising soothers has been implemented.

All staff have been updated with the new policy outlining the correct sterilising procedures for soothers in the service.

Supporting documentation submitted

General Safety:

Copies of Garda vetting disclosures x 7, photographic evidence.

Infection Control:

Copy of soother policy

Summary Comment

The registered provider's response and supporting documentation has been reviewed and accepted. The non-compliances identified in Regulation 23 have been addressed and will be for review at the next inspection.

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 record was maintained of all fire drills which had been completed in the service. A fire drill was last carried out on 27/05/24.
- (b) A record was kept of the number, type and maintenance of the fire-fighting equipment and smoke alarms in the premises. The equipment was last serviced 16/05/24.
- (4) Notices of the procedures to be followed in the event of a fire were conspicuously displayed in the premises