

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015MO116
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Name of Service:	Foxford Childcare Group Ltd - The Growing Tree
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Address of Service:	Admiral Brown Road, Foxford, Co. Mayo
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Eircode:	F26 A381
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Name of Registered Provider:	Jean Murray
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Service type:	Sessional
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Date of Inspection:	28/04/2023
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No of pre-school children:	AM	33	PM	-
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Address of the Early Years Inspectorate:	Early Year's Inspectorate, TUSLA, Child and Family Agency, 2nd Floor, St. Mary's HQ., Castlebar, Co. Mayo
Inspection undertaken by:	M Farrell
Title:	Early Years Inspector

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

Foxford Childcare Group Ltd - The Growing Tree is located in an urban area of Foxford, Co Mayo and is registered to provide sessional services to children aged between 2 and 6 years of age from 08:55-12:05hours. The service is also registered to provide school aged services. The premise is a detached, purpose-built building with three playrooms, two of which are used at present by preschool children, a kitchen, sanitary accommodation and offices. Enclosed outdoor play areas with outdoor play equipment are located to the sides and rear of the building.

Staffing

There are ten staff employed in the service. Eight adults work directly with the children including two managers. The service has a finance manager and a cleaner. Two students were on placement in the service at the time of the inspection. The registered provider does not work directly in 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/safety. The inspections may also focus on other areas as required.

The inspection focused on an examination of compliance under regulations 9, 11, 23, 27 and 28: however, on inspection additional non-compliance which posed significant risk was identified under Regulation 24. 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.

Additional Information

An immediate action notice was issued to the service in relation to Regulation 9(2)(c) - unavailability of garda vetting documentation for one adult, and Regulation 23 -safety issues requiring immediate action to be taken by the service.

Acknowledgments

The inspector wishes to acknowledge the cooperation of the registered provider, persons 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.

Compliance Information

(1)

- (a) There were two childcare managers in the service named as designated persons in charge.
- (b) The inspector was advised by one of the designated persons in charge that one of the managers was available at all times during the operation of the service. This was reflected in a sample of attendance records viewed by the inspector during the inspection.

(2) The inspector was informed by the managers that there were 6 new adults in the service since the most recent inspection of the 15 June 2021.

The following vetting information was available for the adults new to the service:

- (a) Two written references from employers that had been validated in particular their most recent employers for 3 adults and 1 written validated reference from a past employer for 1 adult.
- (b) A total of 3 written references from sources other past employers for 2 adults.
- (c) Vetting disclosures from the National Vetting Bureau of the Garda Síochána for 5 adults.

- (4) Certification of a major award in Early childhood Care and Education at Level 5 on the National Qualifications Framework was available for the 3 staff members new to the service who worked directly with the children.

Non-Compliance Information

(2)

There was no vetting file available on inspection for 1 adult to include:

(a) and (b)

Two written validated references.

(c) Garda vetting documentation.

(d) Evidence to demonstrate if international police vetting was required for the staff member.

There was insufficient evidence to demonstrate if international police vetting was required for a second staff member.

Corrective & Preventive Action submitted by the Registered Provider

The service advised in a written response that:

Corrective and Preventive Action

(2)

(a) A vetting file in respect of the staff member is now in the staffing file.

The service will ensure all documentation relating to Garda/Police vetting is put into the staff file under the relevant employee/student on receiving such prior to commencement of employment.

(b) Two written validated references in respect of staff member have been added to the staffing file.

The service will ensure that written references are received in respect of employee/student in the service and that they are validated and filed into the staff file prior to the commencement of the staff in the position.

(c) Garda vetting documentation has been added to staff file in respect of the staff member.

The service will ensure all garda/police vetting is added to staff file prior to commencement of employment.

(d) International police vetting documentation has been added to staff file in respect of one staff member. In respect of the second staff member, the curriculum vitae has been updated and demonstrates that no evidence is required in relation to the need for International Police Vetting.

The service will ensure International Police Vetting is gained where necessary and that these must be added to staff file prior to commencement of employment.

The service will ensure they identify any gaps in curriculum vitae's. Identified gaps must be addressed and if necessary International Police Vetting obtained.

Supporting documentation submitted

Copies of the outstanding vetting documents were submitted by the service to the Early Years Inspectorate.

Summary Comment

An immediate action notice was issued to the service on the 28 April in relation to the unavailability of garda vetting documentation for 1 adult in the service on inspection. The service responded to the immediate action notice on the 2 May 2023 providing a copy of garda vetting dated for the 30 September 2021.

The actions taken and evidence submitted has been reviewed by the Early Years Inspectorate and been found to have addressed the regulatory non-compliance found on inspection.

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.

(3) Subject to paragraph (5), a registered provider of a sessional pre-school service shall ensure that at all times the minimum ratio of adults to children specified in column (3) of Part 2 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) therefore at that reference number is satisfied.

Compliance Information

- (1) On the morning of the unannounced inspection, there were 6 staff members assigned to care directly for 33 children in the service. One of the managers was not assigned to a playroom on the day and was also available to provide direct care if needed. Two adult students were present in the service on the day of the inspection.
- (3) The minimum ratio of adults to children of 1 adult for each 11 sessional children aged from 2 years and 6 months to six years was adhered to with staff caring for the 33 children present. A sample of attendance records reviewed showed that the minimum ratios of adults to children were met by the service.

Part VI - Safety

Regulation 23 - Safeguarding health, safety and welfare of child

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

Compliance Information

General Safety:

- The main entrance door was secured on the inspector's arrival to the service with a buzzer system in place to allow staff to control access to the service. The inspector was admitted to the service by one of the managers following production of their warrant and identification.
- The door leading from the Preschool 1 playroom to the kitchen was kept secured during the inspection preventing children from accessing this area. The door leading from the kitchen to the outdoor area was secured throughout the inspection preventing people from entering without permission.
- The blind cords on the windows of the Preschool 1 playroom were secured with appropriate securing devices.
- Scissors and sharp objects were stored out of reach of the children.
- The toys and play equipment were in good condition and suitable for the age and developmental stages of the children using them during the inspection.
- Cleaning products were stored out of reach of the children in the service for example on high shelves in the playrooms.
- The oil tank and boiler were sectioned off and inaccessible to the children in the outdoor area to the side of the building.

Infection Control:

- Foot pedal bins were provided for the disposal of waste in the service.
- Liquid soap, paper towels and warm water were provided for handwashing purposes. A waist-high, clean nappy changing mat was provided in the nappy changing area with gloves and aprons for changing children's nappies when required.
- Refrigerators were available to store perishable items in children's food provide from home.

Administration of Medication:

- Detailed care plans were available where required for children who may need medication to be administered whilst in attendance in the service. Medication record templates were provided to be signed by two staff members.

Fire Safety:

- The emergency exit routes were observed to be free from obstruction during the inspection.

Non-Compliance Information

General Safety:

- The securing mechanisms on the double wooden entrance gates at the rear of the outdoor area did not adequately secure the gate to prevent a small child from potentially leaving the area.
- There were gaps at the bottom of a section of fencing in the outdoor area with the potential for a child to leave the service unnoticed.
- There was an unsecured blind cord in the Preschool 2 playroom posing a potential risk of injury to a child.
- A window in the hallway leading from the Preschool 1 playroom to the sanitary area used by the children attending this room was not adequately secured with the potential to open outwards allowing a child to leave the building. The window was secured immediately when the inspector brought this to the attention of a staff member.
- A high wooden gate in a small recently developed outdoor area had footholds that could be potentially used by children to climb on. It is acknowledged that this area was not in use during the inspection and the staff advised that this space was infrequently used by children.
- There were daily risk checklists for outdoors in place in the service however these had not been kept by staff with the last record dated for the 7 January 2022. There was no detailed up to date risk assessment available on the day of the inspection for the outdoor area. The service's risk assessment policy stated that a risk assessment of the outdoor area should be updated yearly or when a new risk arises.

Infection Control:

- The service was found to be clean on the day however the cleaning records had not been kept up to date with the last record of cleaning available dated the 25 October 2022.
- A rack used to store the children's wellington boots was very rusty posing difficulties for cleaning the surfaces.

Action submitted by the Registered Provider

The service advised in a written response that:

Corrective & Preventive Action

General Safety:

1. Repairs have been carried out to secure the gate.
The service will through daily health and safety checks, identify risks and record same so risks can be removed or dealt with in a timely manner. Yearly risk assessments are to take place as written in the services outdoor policy. The service will ensure gates are checked thoroughly for wear and tear, record the checks and action as necessary.
2. The gap has now been removed under the fence, netting is in place and secured to the ground removing the gap. Secure fence panels have been erected where there was any possible foot hold or gap. Gates and fencing are to be checked daily in accordance with the service's policy and recorded to ensure they are safe and that children cannot leave the premises. Thus, ensuring fences can't be climbed over, under or through, that gates cannot be pushed open and ensuring no footholds for climbing fences/gates.
3. The blind cord has been secured.
Thorough daily health and safety checks risks including blind cords will be recorded and issues addressed immediately.
4. Windows are checked to make sure they are locked, and this is recorded into the health and safety sheets both in the morning and evening. Cleaning staff have been made aware of the need to lock any window they may open to dry floors.
The service is completing daily health and safety checks to ensure that windows are shut and are ensuring staff are aware and understand their role regarding health and safety.
5. The high wooden gate in the newly developed outdoor area has been panelled to prevent footholds. Daily health and safety checks/recordings will ensure risks are identified and that gates in the newly established area remain safe. The service will ensure there are no foot holds that children can use to climb over gates.
6. The outdoor area is checked morning and evening and recorded into the daily health and safety. Any risk identified must be inputted onto a risk assessment form. This form identifies the area/equipment with risk, what that risk is, what is the level of risk, who will look after the risk, the expected duration for the risk to be dealt with and a manager must sign off on the work or equipment on completion. This risk assessment form is used for any risk within or outside the service. Also, a form has been developed for an

annual inspection to be completed, any risks found must then be fully addressed using the appropriate form.

The service will ensure daily health and safety checks take place and are recorded, risks identified are to be logged onto the risk assessment form and actioned. Staff are to have in in-service training to refresh their understanding of all procedures in relation to health and safety.

Infection Control:

7. The service has a cleaner who has now been informed of cleaning schedules and the necessity to sign them each day.

Cleaning records need to maintained and signed daily by the cleaner and signed by a manager on a weekly basis. Managers must ensure cleaning sheets are organised and in place for the following week.

8. The wellie rack has been sanded, painted and all screws tightened to ensuring the rack can be cleaned and remains stable.

The wellie rack must be kept in suitable condition that enables cleaning.

Supporting documentation submitted

Photographic evidence and copies of the cleaning and daily health and safety checklists were submitted.

Summary Comment

An immediate action notice was issued to the service in relation to non-compliances 1, 2 and 3. The service responded to the Early Years Inspectorate on the 2 May 2023 with a written response containing information relating to the immediate actions taken to address these non-compliances.

The actions taken and supporting evidence submitted by the service was reviewed by the Early Years Inspectorate and found to have addressed the non-compliances found under this regulation on inspection.

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

- On the day of the inspection adequate staffing levels were provided to ensure children were adequately supervised in both playrooms. The children were supervised primarily by sight but were out of sight of the staff but within earshot when using the toilet depending on their age and developmental stage.
- The staff members were observed to place themselves strategically around the large outdoor play area when the children were playing outdoors so that the children could be observed and heard in accordance with the service’s outdoor play policy.

Part VI - Safety

Regulation 28 - Insurance

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

Compliance Information

A certificate of insurance was available and displayed in the service providing adequate insurance cover for up to 55 children at any one time attending sessional services valid until the 27 March 2024.

Part VI - Safety

Regulation 24 - Checking in and out and record of attendance

(3) A registered provider shall ensure that-

(a) no person other than-

(i) pre-school child attending the service,

(ii) a person dropping or collecting such a child,

(iii) an employee, or

(iv) an unpaid worker, can enter the premises without his or her entry being approved by an employee, and

(b) a daily record in writing is kept of the entry on the premises of any such person.

Compliance Information

(3) (a) and (b)

The inspector was requested by one of the designated persons in charge to provide written details of attendance in the service on arrival.

Non-Compliance Information

(3) (a) and (b)

There was no daily record in writing kept by the staff of the attendance of 2 students in the service at the time of the inspection.

Corrective & Preventive Action submitted by the Registered Provider

(3) (a) and (b)

The service advised in a written response that:

Corrective and Preventive Action

All students are now entered into the daily staff register and have been shown where they must sign in and out.

At induction students will be shown where to sign in and out.

Supporting documentation submitted

Photographic evidence of the daily staff register signed by students.

Summary Comment

The actions and evidence submitted by the service have demonstrated that the non-compliance found has been satisfactorily addressed.