

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015SO033
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Name of Service:	Little Haven
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Address of Service:	Fort Haven, Coolaney, Co. Sligo
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Eircode:	F56 EC43
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Name of Registered Provider:	Mairead McCann
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Service type:	Full Day, Part Time, Sessional
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Date of Inspection:	09/05/2025
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No of pre-school children:	AM	22	PM	11
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Address of the Early Years Inspectorate:	Early Years Inspectorate, TUSLA Child & Family Agency, Markievicz House, Barrack St, Sligo, F91 XC84
Inspection undertaken by:	L Costello and K Folan
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

Little Haven is a community run full day early years' service in operation since 2008. It is located in a housing estate in Coolaney, a rural town, 20km from Sligo town. The service provides sessional and full day care services from 07:30 to 18:00hrs, Monday to Friday. The service caters for a maximum of 65 children. The service also caters for school aged children

Staffing

There is ten adults employed in the service nine adults work directly with the preschool children and one adult works in the kitchen. The Registered Provider does not work directly with the preschool children.

Methodology

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

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

The findings on inspection are based on:

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

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

The inspection focused on an examination of compliance under regulations 9,10 (b) (j) (l) (p), 11, 17, 22, 23, 27 and 32. 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 registered provider on 09 May 2025 in relation to a safety concern under Regulation 23. The registered provider issued a response on 12 May 2025 to address this concern.

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 III – Management and Staff

Regulation 9 – Management and recruitment

(1) A registered provider shall ensure that-

- (a) the service has a designated person in charge and a named person who is able to deputise as required,*
- (b) at all times during the period when the pre-school service is being carried on, the designated person in charge or the named person referred to in subparagraph (a) is on the premises, and*
- (c) there is a clear management structure in the service that identifies the lines of authority and accountability in the service and the specific roles and responsibilities of each employee and unpaid worker.*

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

- (a) consideration of references from the person's past employers, if any, and in particular the most recent employer, if any,*
- (b) consideration of references from reputable sources in the case of a person who has no past employers,*

(c) consideration of the vetting disclosure received from the National Vetting Bureau of the Garda Síochána in accordance with the Act of 2012 in respect of the person, and

(d) ensuring, insofar as is practicable, that where a person has lived in a state other than the State for a period of longer than 6 consecutive months, he or she provides police vetting from the police authorities in that state.

(3) The procedures specified in paragraph (2) shall be carried out prior to any person being appointed, assigned or allowed access to or contact with a child attending the pre-school service.

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

Compliance Information

1) (a) (b).

There was a designated person in charge and a named person to deputise as required.

(2) (a) (b).

Three adults had been employed since the service last inspection on the 6th of May 2024 as confirmed by the person in charge and these files were the subject of this review.

Four written and verified past employer references or references from a reputable source in the absence of a past employer, were available in respect of all three adults employed in the service.

(c)

A garda vetting disclosure was available for all ten adults' adults in the service. The service also demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years

(d)

International police vetting was not required for two of the adults employed in the service as they had not lived outside the state for a period of longer than six consecutive months.

(4)

One adult had attained major awards in Early childhood care and education at level 5 or above on the national framework of qualifications, or qualifications deemed by the Department of Children, Disability and Equality, (DCDE) to meet the regulatory requirement.

Non-Compliance Information

(2) (a) (b)

Two adults had only one reference on file from past employers a second reference from their past employer is required.

(d)

It could not be determined if international police vetting was required for one adult as no history of employment was available for one adult.

(4)

One adult who was completing her qualification in Early Childhood care and Education did not have the required letter from the Department of Children Disability and Equality to meet regulatory requirement.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

In a written response the registered provider stated:

(2) (a) (b)

References submitted to the inspectorate, and this will be added to the file checklist to ensure compliance.

(d)

Employment history for this individual submitted to the inspectorate and international police vetting is not required.

(4)

Letter received from the department and submitted to the inspectorate. This will be sought prior to employment going forward.

Supporting documentation submitted

- References submitted.
- Employment history submitted.
- Letter submitted.

Summary Comment

The corrective and preventive actions submitted by the registered provider adequately address the non-compliance found on inspection. This regulation is now compliant.

Part III – Management and Staff

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

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

Compliance Information

The following policies were reviewed and were deemed to be compliant.

- (b) Complaints policy
- (j) Policy on accidents and incidents.
- (l) Policy on healthy eating
- (p) policy on the use of the internet and photographic and recording devices.

Part III – Management and Staff

Regulation 11 - Staffing levels

(1) Subject to this Regulation, a registered provider shall ensure that there is at all times an adequate number of adults working directly with the children attending the pre-school service.

(2) Subject to paragraphs (4) and (5), a registered provider of a full day care service or a part-time day care service shall ensure that at all times the minimum ratio of adults to children specified in column (3) of Part 1 of Schedule 6 opposite a particular reference number specified in column (1) of that Part in respect of the age range of the children specified in column (2) thereof at that reference number is satisfied.

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

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

Compliance Information

- (1)
There were 5 adults working directly with 22 children on the inspectors' unannounced arrival to the service.
- (2)

The minimum adult to child ratios were provided on the morning of the unannounced inspection in accordance with the required ratios considering the ages of the children and the length of time each child spent in the service as outlined below:

- Sunflower Preschool: 2 adults cared for 12 children aged 3-5 years of age.
- Daisy Preschool: 2 adults cared for 7 children aged from 4-5 years of age.
- Toddler Room: 1 adult cared for 3 children aged 2-3 years of age.

In the afternoon the following ratios were observed:

- Sunflower Preschool: 2 adults cared for 6 children aged 3-5 years of age.
- Daisy Preschool: 2 adults cared for 4 children aged from 4-5 years of age.
- Toddler Room: 1 adult cared for 1 child aged 2-3 years of age.

(8) (c)

The registered provider ensured that there were always at least two adults on the premises when children were present in the service as evidenced in a sample of attendance records reviewed.

Part IV – Information and Records

Regulation 17 – Information for parents

A registered provider shall ensure that a parent or guardian of a child proposing to attend the service is provided with the information referred to in subparagraphs (a) to (g) of Regulation 16(1).

Compliance Information

The Registered provider demonstrated that information referred to in subparagraphs (a) to (g) of Regulation 16 (1) is provided to parents prior to enrolment in the form of a parent handbook. The Registered Provider demonstrated that information is provided to parents daily with a notice board at the entrance to the preschool service.

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

The service operated a three-week menu plan which is displayed daily on the parents notice board. Breakfast dinner and afternoon snack is provided by the service while morning snack is provided from home. Water is provided with meals and throughout the day with a hydration station in place in all care rooms.

Non-Compliance Information

The service did not provide suitable nutritious and varied food in line with service policy.

On the week of the 5th of May the service menu consisted of the following main meals:

- Monday- Bank holiday
- Tuesday: Fish Fingers, mash potato peas and sweetcorn.
- Wednesday: Chicken nuggets, potato croquettes and beans.
- Thursday: Pizza
- Friday: Chicken Korma and rice and vegetables.

This is in contradiction to the service healthy eating policy where it states that ‘processed meat products such as sausages, burgers, chicken nuggets and fish bites are kept to a minimum.

On inspection one child was observed to bring a sandwich from home which consisted of a chocolate nut spread, this was in contradiction of the service policy where it states ‘we do not allow nut spreads. This was not noticed by the adults on duty.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

In a written response the registered provider stated:

All menus are reviewed, and any processed meats are kept to a minimum. A four-week menu plan has been sent to the inspectorate.

Supporting documentation submitted

- Menu plan submitted.

Summary Comment

The corrective and preventive actions submitted by the registered provider adequately address the non-compliance found on inspection and this regulation is now compliant and will be checked on next inspection.

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 into the service was found to be secured upon the inspectors unannounced arrival to the service, which prevented persons entering unauthorised and children from leaving the building unsupervised.
- All cleaning products in the care rooms were stored on high level shelving out of the reach of children.
- Materials and resources were maintained in a good state of repair.
- The kitchen was inaccessible to the preschool children.
- The outdoor perimeter was secure with waste bins stored out of reach of children.

Infection Control:

- Children observed to wash their hands prior to mealtimes.
- Tables were cleaned prior to mealtimes and after messy play.

Administration of Medication:

- The service had a medication administration policy in place and when discussed with staff they were aware of their responsibilities for the safe administration of medication.

Safe Sleep:

- A designated sleep room was in place with stackable floor beds for individual use.
- Room temperatures on the day were recorded as 20.4°C which is within the safe sleep temperature limits.

Fire Safety:

- Fire doors remained unobstructed through the course of inspection.
- Fire evacuation plans were displayed on the walls of the care rooms.

Non-Compliance Information

General Safety:

1. An immediate action notice was issued on the day for water temperature recorded at 51.5°C, this is in excess of the maximum allowable temperature of 43°C . An immediate response by the Registered provider corrected this issue.
2. A bait box was located in the sleep room posing a risk to preschool children.
3. The windows in the designated sleep room did not have restrictors in place and could pose a risk of unsupervised entry to the service.
4. The nappy changing areas adjacent to the toddler room and the sunflowers room were cluttered with boxes of equipment and could pose a risk of injury to the preschool child.
5. A radiator spike was exposed in the sleep room, posing a risk of injury to the preschool child.

Infection Control:

6. Taps and one basin in the bathroom adjacent to the sunflower room were corroded making the equipment difficult to clean posing a risk of infection control.
7. There were no hand towels available in the bathrooms for effective hand drying.

Administration of Medication:

8. Medication records were incomplete posing a risk the children. The three medication records available were missing the parents' signature. One medication record was missing the full name and date of birth of the child.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1. A response was received within the required time frame and the water is now within the correct safety limits.
2. The bait box has been removed.
3. Risk restrictors have been installed on the windows.
4. The nappy changing area has been decluttered.
5. The radiator cover has been replaced, and this will be added to the risk assessment.

Infection Control:

6. The service is awaiting this unit to be replaced.
7. Hand towels have been replaced.

Administration of Medication:

- The policy was reviewed and reminders of the importance of properly completing all details in regard to medication was sent out to staff members.

Supporting documentation submitted

General Safety:

- Photographic evidence submitted.
- Photographic evidence submitted.
- Photographic evidence submitted.
- Photographic evidence submitted.
- Photographic evidence submitted.

Infection Control:

- No evidence submitted.
- Photographic evidence submitted.

Administration of Medication:

- Photographic evidence submitted.

Summary Comment

The corrective and preventive actions submitted by the registered provider adequately address the non-compliance found on inspection and this regulation is now complaint and will be checked on next 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

Supervision on the day was largely completed by sight. The adults in the service were observed to work well together positioning themselves in the outdoor play area to ensure all areas were in sight while children were playing in the outdoors.

At mealtimes the adults sat alongside children supervising and offering support as required.

In the care rooms the children were supervised as they played, staff members working in teams were observed to communicate well informing each adult where they were and if leaving the room to supervise children toileting.

Adults working on their own called for assistance if nappy changes were required to ensure all children were supervised at all times.

Part VIII - Notifications and Complaints

Regulation 32 – Complaints

- (1) A registered provider shall ensure that the complaints policy of the service specifies-
- (a) the procedure to be followed by a person for the purposes of making a complaint in relation to the service,
 - (b) the manner in which such a complaint shall be dealt with, and
 - (c) the procedures for keeping a person who makes such a complaint informed of the manner in which it is being dealt with.
- (2) A registered provider shall ensure that-
- (a) a record in writing is kept of a complaint made to the provider in respect of the pre-school service, and
 - (b) the complaint is duly dealt with in accordance with the provider's complaints policy.
- (3) A record in writing referred to in paragraph (2)(a) shall-
- (a) include the nature of the complaint and the manner in which the complaint was dealt with, and
 - (b) be open to inspection on the premises by an authorised person.
- (4) A registered provider shall ensure that a record in writing referred to in paragraph (2)(a) is retained for a period of 2 years from the date on which the complaint has been dealt with.

Compliance Information

- (1)
- The service had a complaints policy in place which demonstrated the following:
- (a) the procedure to be followed by a person for the purposes of making a complaint in relation to the service,
 - (b) the manner in which such a complaint shall be dealt with, and
 - (c) the procedures for keeping a person who makes such a complaint informed of the manner in which it is being dealt with.

(2) (a) (b)

The service had a record of all complaints received by the service and had documentary evidence of the procedures followed in addressing these complaints.

(3) (a) (b)

The service demonstrated the steps they had taken to address any complaints received by the service and this information was provided to the inspectors.

(4)

The person in charge is aware of their responsibility to retain records of complaints for a period of two years from the date in which the complaint has been dealt with.