

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2015WH009		
<b>Name of Service:</b>	Killucan Care Ltd		
<b>Address of Service:</b>	St Joseph's Gardens, Rathwire, Killucan, Co. Westmeath		
<b>Eircode:</b>	N91 KN34		
<b>Name of Registered Provider:</b>	Ita Copley		
<b>Service type:</b>	Full Day		
<b>Date of Inspection:</b>	24/10/2024		
<b>No of pre-school children:</b>	AM	62	PM 32
<b>Address of the Early Years Inspectorate:</b>	Early Years Inspectorate, Tusla, Child and Family Agency, SAP Office, St. Loman's Campus, Springfield, Mullingar, Co Westmeath.		
<b>Inspection undertaken by:</b>	C.O' Connor Hughes & K. Murphy		
<b>Title:</b>	Early Years Inspectors		
<b>Authority to Inspect</b>			
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).			
<b>Conditions if applicable</b>	Not applicable		

### Description of service

This community service provides a full day care service offering fulltime, part time and sessional places. The age range of children that can attend the service is 1 to 6 years of age. The service operates between the hours of 08:00 and 18:00 on a Monday to Friday basis.

The Early Years' Service is located in a purpose-built single storey premises consisting of six pre-school rooms, two sleep rooms, a kitchen, a staff room and an office. One of the pre-school rooms is not currently in use. Outdoor play areas are attached to the front and side of the service. On-site parking and set down facilities are available. The service is located in a rural area in Killucan, Co. Westmeath.

### Staffing

The deputy designated person in charge and thirteen adults were working directly with children on the 24 October 2024. A cook and caretaker were present in the service. The designated person in charge arrived at the service after the inspector's arrival and attended the closing meeting. The registered provider does not work directly with children and was not present during the inspection.

### 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 and safety. The inspection may also focus on other areas as required.

The inspection focused on an examination of compliance under:

- Regulation 9 Management and Recruitment (1)(a)(b)(c) (2)(a)(b)(c)(d) (4) (6A) (7)
- Regulation 10 Policies, Procedures of Pre-School Service
- Regulation 11 Staffing levels (1)(2)(8)(a)
- Regulation 16 Record of a pre-school service (1) (h)(i)(k)
- Regulation 23 Safeguarding Health, Safety and Welfare of Child - General Safety
- Regulation 27 Supervision
- Regulation 28 Insurance
- Regulation 31 Notification of Incident

A sampling process was used to assess compliance in the Butterfly room (2 to 3 years) and Dragonfly room ( 1 to 2 years) under:

- Regulation 23 Safeguarding Health, Safety and Welfare of Child - General Safety
- Regulation 27 Supervision

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

The inspection was informed by a notification of incident submitted to TUSLA Early Years Inspectorate on the 16 October 2024.

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## Acknowledgments

The inspectors wish to acknowledge the co-operation of the designated person in charge, 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
- (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.

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

(7) A registered provider shall ensure that all employees, unpaid workers and contractors are appropriately supervised and provided with appropriate information, and where necessary training, including in relation to the following:

- (a) the policies, procedures and statements of the service specified in Schedule 5;
- (b) Part VIIA (inserted by section 92 of the Child and Family Agency Act 2013 (No. 40 of 2013)) of the Act, and
- (c) these Regulations.

## Compliance Information

(1)(a)

The designated person in charge and a named person to deputise were available as required.

(b)

The deputy designated person in charge was present for the duration of the inspection. The designated person in charge attended the service later in the inspection.

(c)

A notice outlining the management structure in the service was displayed in the premises and detailed the designated person in charge, the deputy designated person in charge and another named staff member to act in the absence of either of the two service managers.

Three staff files were reviewed in respect of new staff who had commenced employment in the service since the last inspection on the 27 May 2024.

Garda vetting disclosures were reviewed in respect of the registered provider and eighteen staff members.

The following was noted:

(2)(a)(b)

The required number of written validated references were available from past employers and from a source other than a past employer in respect of the three new staff employed since the last inspection.

(c)

A Garda Vetting disclosure was available in respect of the three new staff employed since the last inspection. In respect of eighteen of the nineteen garda vetting disclosures reviewed the service demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew garda vetting every three years. 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 in respect of one of the nineteen garda vetting disclosures reviewed. Please refer to the information outlined under regulation 23 of this report.

(d)

No new staff member had lived outside the state for a period of longer than six consecutive months.

(4)

The three new staff members present and working directly with children attending the service and held a major

award in Early Childhood Care and Education at level 5 on the National Framework of Qualifications.

(7)(a)

All staff had completed Children First training online with certificates available for review.

Evidence of mandatory training completed by staff members including first aid response (FAR) and manual handling was available in the individual staff profiles. The renewal dates were noted in a training log for qualifications and mandatory training. Staff had signed as having read and understood the policies and procedures of the service during the induction process for new staff and for all staff as each policy was reviewed. Evidence of induction training completed by new staff members was available in the individual staff profiles.

(7)(b)(c)

Tusla quality regulatory framework (QRF) certificates of completion were available in respect of four staff members as evidence of training undertaken in the Child Care Act 1991 (Early Years Services) Regulations 2016 and Childcare Act 1991 (Early Years Services) (Amendment) Regulations 2016.

### Non-Compliance Information

(7)(a)

With the exception of the staff signing the policies and procedures for the service there was no evidence of service wide staff training undertaken in any specific service policies and procedures.

(7)(b)(c)

With the exception of the four staff identified under the compliance information there was no evidence of service wide staff training undertaken in the Child Care Act 1991 (Early Years Services) Regulations 2016 and Childcare Act 1991 (Early Years Services) (Amendment) Regulations 2016.

### Corrective & Preventive Action submitted by the Registered Provider

#### Corrective and Preventive Action

7(a)(b)(c)

Management will add training to the agenda for staff meetings and discuss with staff.

Online training on the 7 modules of the Quality and Regulatory Framework for staff.

As policies are updated and signed off by the board of management. Staff are given non-contact time to read and sign off on these policies. They will also be added to staff meeting agenda and discussed at staff meetings with all staff. Manager will also check to ensure all staff have signed off on all updated policies.

All Staff will have completed Quality and Regulatory Framework before the Christmas break during working hours.

## Supporting documentation submitted

Staff meeting agenda and notes.

## Summary Comment

(7)(a) The non compliance has been addressed.

(7)(b)(c) The practice stated will address the non compliance when the Quality and Regulatory Framework training has been completed by staff members in December 2024.

## 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 presented by the designated person in charge were reviewed and found to be in keeping with Regulation 10 with the exception of the non-compliance outlined below.

- Statement of purpose and function.
- Accidents and incidents policy
- Outdoor play policy
- Risk management policy
- Staffing training policy
- Supervision of staff policy

### Non-Compliance Information

The following policies presented by the designated person in charge were found not to be in keeping with the requirements of Regulation 10.

- The outings policy stated that the critical incident plan is implemented if a child goes missing. The critical incident plan stated that a missing child is dealt with under the missing child policy. This policy was not available for review.

- The risk management policy did not set out how long the risk management records will be kept. The risk management policy did not state that the risk assessment record showed who is involved in the risk assessment process and how risk assessments completed by the service are conducted and documented. Signposting and notes included in the document indicated that the risk management policy was a draft document.
- The accident and incidents policy did not outline the risk assessment procedures to be taken following an accident or incident occurring in the service beyond the statement that “a risk assessment will be completed following any accident or incident”.
- The outdoor play policy did not set out the procedures for carrying out risk assessments or set out how children are supervised during outdoor play beyond one reference to “observe” and two references to “adult: child ratio”.
- The staff training policy did not provide a description of induction training in the service. The staff training policy did not provide information regarding the availability of ongoing training and professional development or how staff training needs are identified and addressed beyond a statement that “training needs or additional support identified” is included in the “staff support and supervision form”.
- The supervision of staff policy did not provide sufficient detail in relation to the format, duration and frequency of supervision and ongoing supervision beyond statements relating to “probation at six months, review at three months and annual appraisal”.

### Corrective & Preventive Action submitted by the Registered Provider

#### **Corrective and Preventive Action**

Outing policy: A missing child policy was created. It will be discussed at our staff meeting and staff will sign off on the new policy.

The Risk management policy has been updated with added information of how long risk management records will be kept.

The Accident and incident policy now outlines the risk assessment procedures to be taken in more detail.

Outdoor play policy: the procedure for carrying out a risk assessment has been added.

Staff training policy has been updated.

Staff supervision policy has now been updated.

All staff to be aware of these roles and responsibilities.

Using the new roll call system with every room move.

To complete a missing child drill in the service with every room to ensure all staff know the procedure.

Staff will read the policy at non-contact time any questions to discuss with manager.

Manager will check to ensure all staff have signed off on the policy.

### **Supporting documentation submitted**

Policies and procedures.

### **Summary Comment**

The non compliance has been addressed.

## **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)  
The minimum ratio of adults to children was maintained during the inspection.

(2)  
There were sixty-two children attending the service supervised directly by fourteen adults in the morning.  
There were thirty-two children present in the afternoon supervised by thirteen children in the afternoon.

(8)(a)  
The staff roster indicated there were two 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 on a daily basis;
- (k) details of any accident, injury or incident involving a pre-school child attending the service.

#### Compliance Information

(1)

The service held information in respect of (h)(i)(k).

## Part VI - Safety

### Regulation 23 - Safeguarding health, safety and welfare of child

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

#### Compliance Information

##### General Safety:

The entrance to the service was secure. The service met the necessary safety requirements in respect of the indoor environment, toys and equipment and the safe storage of cleaning agents in the Butterfly room and Dragonfly room. The inspectors signed the visitors book on arrival.

#### Non-Compliance Information

##### General Safety:

1. The most recent Garda vetting disclosure presented in respect of one staff member was not dated within the previous three years in adherence with the Early Years Inspectorate Regulatory Notice 'EYI-RN12.3 Renewal of Garda Vetting'.
2. Safety checks of the outdoor play areas were not consistently carried out on a daily basis which posed a potential risk of harm to a child if a safety hazard went unchecked. The last recorded check noted for the Butterfly and Dragonfly rooms was dated 17 July 2024.

3. There were no indoor risk assessments available for the Butterfly and Dragonfly rooms to identify risks and take appropriate corrective actions.

### Corrective & Preventive Action submitted by the Registered Provider

#### Corrective & Preventive Action

##### General Safety:

1. Management contacted the agency responsible for obtaining Garda Vetting and spoke to a member of the team about the Garda Vetting. This has now been completed and a copy of the vetting is in our Tusla folder with all staff qualifications. Management will renew Garda Vetting at least 6 months before it the Garda vetting runs out.
2. Outdoor risk assessments are carried out daily.
3. Indoor risk assessments are carried out daily.

Daily inspection take place to ensure the areas are safe and secure for all children with a roll call taken before and leaving different areas in ensure all children are counted for.

All staff know the requirements and have a clear understanding of their roles and responsibilities in relation to the risk management policy.

All staff were called to Staff Appraisal meeting to discuss their roles and responsibilities in the service and now have a clear understanding of their own role and range of responsibilities in the service to ensure the health, safety and welfare of the children attending the service.

A staff meeting was held to discuss the incident was held to ensure staff were informed about the incident to prevent this from happening again in the service. All staff member understands their role and responsibilities in relation to the checking in and out and recording the attendance of children in the service.

#### Supporting documentation submitted

##### General Safety:

Indoor and outdoor daily risk inspection books, roll call books and minutes of staff meeting.

### Summary Comment

The non compliance has been addressed.

### Part VI - Safety

#### Regulation 27 – Supervision

*A registered provider shall ensure that pre-school children attending the service are supervised at all times.*

#### Compliance Information

Children were supervised in the indoor and outdoor environments during the inspection. Upon discussion with staff in the Butterfly and Dragonfly room staff were aware of the need for supervision of children at all times.

A supervision of children policy created in March 2022, updated in October 2024 was available to support practice.

### Part VI - Safety

#### Regulation 28 - Insurance

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

#### Compliance Information

There was evidence of current insurance cover for the number of children attending the service. The expiry date noted was 27 March 2025.

### Part VIII - Notifications and Complaints

#### Regulation 31 - Notification of incidents

*A registered provider shall notify the Agency in writing within 3 working days of becoming aware of any of the following incidents occurring in the preschool service:*

*(e) an incident in respect of which a pre-school child attending the service goes missing while attending the service.*

#### Compliance Information

(e)  
The designated person in charge submitted a notification of incident form to TUSLA Early Years Inspectorate on the 16 October 2024.