

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2016DR010		
<b>Name of Service:</b>	St. Nicholas Montessori School		
<b>Address of Service:</b>	16 Adelaide Street, Dun Laoghaire, Co. Dublin		
<b>Eircode:</b>	A96 H5P3		
<b>Name of Registered Provider:</b>	Nicholas Breakwell		
<b>Service type:</b>	Full Day, Part Time, Sessional		
<b>Date of Inspection:</b>	27/11/2024		
<b>No of pre-school children:</b>	AM	58	PM 39
<b>Address of the Early Years Inspectorate:</b>	Loughlinstown Health Centre, Loughlinstown drive, Loughlinstown, County Dublin.		
<b>Inspection undertaken by:</b>	O Quill and S Quigley		
<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

St. Nicholas Montessori School is currently registered to provide full daycare, part-time care and sessional care to pre-school children aged 2-6 years. The early years service is one of three services privately operated by the registered provider in the Dublin region. The programme of care is facilitated through the Montessori curriculum and in keeping with the Montessori philosophy, the early years classes combine pre-school and both Junior and Senior Infants. The service is located in a late Georgian building in Dun Laoghaire County Dublin. There are four early years classrooms in the setting. There is a sports hall and an outdoor play area on the premises.

### Staffing

In total fourteen staff are employed in the service including a secretary. On the day of inspection nine staff worked directly with the children. The manager and deputy manager did not work directly with the children. The registered provider does not work 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, information and records, safety and premises and facilities. The inspection may also focus on other areas as required.

9 (1)(a)(b), (2)(a) -(d) and (4) Management and Recruitment,  
11(1), (2), Staffing Levels,

15 (1)(a)-(i) Record of a Pre-school child,  
16 (h) and (i) Record in relation to pre-school service,  
23 Safeguarding, Health, Safety and Welfare of Child,  
25 (1) First Aid,  
29 Premises (d) however, on inspection additional non-compliance was identified under regulation 29(c)  
These findings are outlined within the relevant regulations within this report.

A sampling process was used to assess compliance under regulation 15(1) (a)-(i) Record of a Pre-School child.

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 on the day of inspection for non-compliance identified under regulation 9(2) (c) A mandatory Garda vetting disclosure was not available for one adult who directly worked with the children on day of inspection contrary to the National Vetting Bureau (Children and Vulnerable Persons) Act 2012.

The registered provider submitted a response on 28 November 2024 regarding general safety which was deemed to satisfactorily address this non-compliance.

A regulatory compliance meeting was held with the registered provider and person in charge on 25 February 2025.

### 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*

*(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) The service had a designated person in charge and a named person to deputise as required.
- (b) The deputy person in charge was on the premises throughout the inspection.

(2)

Fifteen adults are employed to work in the service. The inspection included a review of seven files for new staff employed since the last inspection on the 15 November 2022 and Garda vetting disclosures for all adults employed to work in the service. Documentation was reviewed in respect of these adults and met regulatory requirements as follows:

Fourteen validated written references were required.

- (a) Seven written validated were available from a past employer.
- (b) One written validated reference was available from a source other than a past employer.
- (c) Garda vetting disclosures from the National Vetting Bureau of An Garda Síochána were available for thirteen adults. Twelve of these were dated within the previous three years in adherence to the Early Years Inspectorate Regulatory Notice 'EYI-RN12.3 Renewal of Garda Vetting'.
- (d) Police vetting was available for two adults who had lived outside the State for a period exceeding six months.

(4) Records were available evidencing that six adults who were employed to work directly with the children held the required qualification or equivalent. One adult did not require a qualification as this was not working directly with the children.

## Non-Compliance Information

(2) A number of issues were identified with how the service manages safer recruitment processes as detailed below:

- (a) There were no written references available for one adult. Three written references available were not validated.
- (b) A second reference for one adult was not accepted as there was insufficient information and it was not validated.

(c) A mandatory Garda vetting disclosure was not available for one adult who was on the premises on the day of inspection contrary to the National Vetting Bureau (Children and Vulnerable Persons) Act 2012. An Immediate Action Notice was issued on 27 November 2024.

(d) Police vetting was not available for two adults who had lived outside the state for a period longer than six months.

(3) All required procedures specified in paragraph (2) were not carried out prior to staff being appointed and allowed access with children attending the pre-school service. Non compliances in relation to (2)(a), (b), (c) and (d) above were present on the last inspection on 15 November 2022. The corrective and preventive actions submitted by the registered provider did not prevent the reoccurrence of these non-compliances.

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

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

(2)(a)(b) Written references were obtained and submitted.

(c) Garda vetting was obtained as required for a staff member.

(d) A translation service was contacted to issue the manager with the official documents for police vetting translated.

(3) The manager has implemented a system of using a cover page for each staff file with a checklist of requirements to ensure all relevant information is available to view in each file and validated by the school Principal and school secretary.

#### **Supporting documentation submitted**

Copies of references, Garda vetting and police vetting.

### Summary Comment

Supporting evidence was submitted in keeping with the action taken. The Regulatory requirement has been met.

### 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.*

#### Compliance Information

(1) An adequate number of adults were working directly with the children at all times during the inspection.

(2) The minimum ratio of adults to children for full day care services was adhered to at all times during the inspection. There were fifty-eight children attending the service being supervised by nine adults on the day of inspection.

### 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.*

### Compliance Information

- (1) A sample of thirteen records were reviewed for children who were attending the service. The records reviewed contained the following information:
- (a) The name and date of birth of each child.
  - (b) The date on which the child first attended the service.
  - (c) There was an area on the registration form where the date when a child would cease to attend the service will be recorded.
  - (d) The names, addresses and telephone number of parents were recorded and information where parents can be contacted during the hours of operation of the service were also available.
  - (e) There was authorisation for the collection of the child.
  - (f) The record available supported the recording of any illness, disability, allergy or special need of the child.
  - (g) The name and telephone number of each child's medical practitioner was recorded.
  - (h) A record of immunisations received was recorded.
  - (i) There was written consent for appropriate medical treatment of a child in the event of an emergency.

## 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;*

### Non-Compliance Information

(h) Details of attendance for each child present in the service was not recorded as detailed below.

1. In Ms C and Ms G’s room 15 children were signed in at 10:22 and 16 children were present. The inspector asked the staff member to record the additional child present. The staff member signed the child on the attendance record from 08:55.
2. In Ms O’M room 21 children were present and 20 children were signed in. The inspector showed the staff the attendance record at 11:20 the staff identified the child who was not signed in. When the attendance record was checked at 12:40 it was noted the additional child had still not been signed in by staff.

These non-compliances were present on the last inspection on 15 November 2022. The corrective and preventive actions submitted by the registered provider did not prevent the reoccurrence of these non-compliances.

- (i) The staff roster provided was inaccurate and did not reflect the staff who were present and working in the service on the day of inspection. Five staff who were present and working in the service were not recorded on the staff roster. A sixth adult was recorded as working from 09:00-12:30 however, the manager confirmed this adult was working from 13:00-18:00.

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

#### Corrective and Preventive Action

- (h)
- 1&2. The manager has spoken with the relevant teachers to remind them of the importance of filling all attendance registers as the children arrive and leave in order to have an accurate record of children present at any given time.
- (i) The staff roster has been updated to reflect accurate hours for all staff members. The manager has set a reminder in our Google Calendar to print and review the Staff Roster each Monday morning for the week ahead to ensure the roster is accurate and reflective of that particular week.

#### Supporting documentation submitted

Written evidence.

### Summary Comment

The actions as stated by the registered provider have addressed the non-compliance. The practice will be reviewed 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 entrance door to the service was adequately secured to ensure the safety of the children within and to avoid unauthorised persons accessing the service or children exiting unsupervised.
- Cleaning agents and medicines were stored safely out of reach of children.
- All storage facilities were inaccessible to children.

#### Infection Control:

- Liquid soap, warm water and paper towels were available to facilitate hand washing. Children were observed to wash their hands prior to eating and after messy play and using the toilet.
- Pedal operated bins were provided.
- Perishable food items were stored in the fridge.

## Administration of Medication:

- A sample of medication records were reviewed. The records were completed correctly signed by parents, staff, and witnessed by a second staff member. Staff demonstrated they were familiar with the medication policy and procedure.
- Care plans were available for children who had medical conditions and when spoken to staff were familiar with these care plans.

## Fire Safety:

- Fire exits were unobstructed.
- The fire evacuation procedure was clearly displayed.

## Outing:

- The service does conduct outings and have an outings policy. No outings took place on the day of inspection.

## Non-Compliance Information

### General Safety:

1. Garda vetting disclosure available for one staff member was not dated within the previous three years in adherence with the Early Years Inspectorate Regulatory Notice for Garda vetting to be renewed every three years.
2. The handle to Ms C and Ms G's room was broken and tape was used to stick it. This was a fire door posing a potential safety risk.

### Infection Control:

3. The cleaning schedule in Ms M and Ms C's room had not been completed.
4. There was no system in place to record the cleaning of soft furnishings including mats and the cover for the seats.

## Action submitted by the Registered Provider

### Corrective & Preventive Action

#### General Safety:

1. Garda vetting has been renewed as required. have implemented a system of using a cover page for each staff file with a checklist of requirements to ensure all relevant information is available to view in each file and validated by the school Principal and school secretary. The manager has implemented a system of using a cover page for each staff file with a checklist of requirements to ensure all relevant information is

available to view in each file and validated by the school Principal and school secretary. The service now has a file dedicated to Garda vetting which tracks any vetting which will need to be renewed.

2. The broken door handle has been repaired.

### **Infection Control:**

3. The cleaning schedules in all classrooms are now up to date and the teachers are continuing to use the schedules to record cleaning of classrooms.
4. A system of cleaning soft furnishings has been implemented, this will be recorded on our cleaning schedules and they will be brought to a laundry service monthly.

### **Supporting documentation submitted**

#### **General Safety:**

Written and photographic evidence.

#### **Infection Control:**

Written evidence.

### **Summary Comment**

Supporting evidence was submitted in keeping with the action taken. The Regulatory requirement has been met.

### 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 person trained in first aid was immediately available to the children at all times on the day of inspection.
- (2) (a) Suitably equipped first aid boxes were easily accessible in a conspicuous position on the premises.
- (b) The first aid box was available to children attending the service at all times.

### Part VII - Premises and Space Requirements

#### Regulation 29 - Premises

- A registered provider shall ensure that the premises of the service are-
- (c) kept adequately lit, heated and ventilated
  - (d) cleaned, maintained and repaired, as required, and

#### Non-Compliance Information

- (c) The registered provider did not ensure that the premises was adequately heated and ventilated.
1. The room temperature in Ms M and Ms C's room was 16 degrees Celsius at 10:35 and one of the staff members was observed wearing a coat. The heating was not turned on in the care room at this time and staff when questioned confirmed one of the heater's was broken and they were not familiar how the other heater worked.
  2. In Ms M and Ms C's room black marks were observed on the wall just beneath the ceiling.
- (d) The registered provider did not ensure the service was cleaned and maintained as required as evidenced by the following. Many of these non-compliances were identified on the last inspection on the 15 November 2022. The corrective and preventive actions submitted by the registered provider did not prevent the reoccurrence of these non-compliances:

### **In Ms C and Ms G's room:**

1. Paint was peeling off the skirting boards onto the floor. The mat at the door was heavily worn and coming away at places.
2. Pieces of the lacquer on a cupboard beside the rest area were peeling off and exposed the porous wood beneath.
3. Areas of the flooring were heavily chipped and the concrete flooring underneath exposed.
4. The wood around the sink units in the care room were stained and damp and could not be cleaned effectively.

### **In Ms M and Ms C's room:**

5. The wooden cover on the radiator was broken and parts of the broken cover were on the floor.
6. One of the doors on the cupboard beneath the sink unit was broken off its hinge.
7. The skirting boards were covered in dust.
8. Cobwebs were visible around the windows, ceiling and light fittings.
9. The tile flooring was worn with cracks and some holes present.

### **In Ms O'M room:**

10. Dust was visible on the skirting boards and the paint was heavily stained.
11. The floor covering was ripped with visible holes and the concrete flooring underneath was exposed. This non-compliance was found on the last inspection 15 November 2022. The Corrective Action submitted at the time stated a new floor would be laid. Inspectors confirmed on this inspection that this action had not be completed by the registered provider.

### **In the sanitary area:**

12. Two holes were present in the flooring of the children's sanitary area where a rectangular cover was missing.

## Non-Compliance Information

- (c)
1. Ms. C and Ms. M's room has a storage heater on one wall and another heater at ceiling height which was installed to address previous issues with the room temperature. The thermostat was reset to raise the temperature. There is also a radiator in this room which we have been having issues with and was not working on the day of the inspection. The heating has since been repaired.
  2. Mould has been treated and the area has been repainted.

- (d)
- In Ms C and Ms G's room:**
1. Skirting boards have been painted. The doormat has been replaced.
  2. The damaged shelving has been removed.
  3. New floor covering to be installed over Easter.
  4. A new sink area has been installed.
  5. Radiator cover replacement has been completed.
  6. The damaged shelving has been removed.
  - 7., 8. The manager has arranged for all teachers to conduct a deep cleaning of their classrooms including all skirting boards.
  9. New floor covering. Ms. O'M's, Ms. C & G, and the bathroom floors will be replaced over Easter 2025.

- In Ms O'M room:**
11. The manager has arranged for all teachers to conduct a deep cleaning of their classrooms including all skirting boards.
  12. New floor covering. Ms. O'M's to be replaced over Easter 2025.

- In the sanitary area:**
13. Two holes were present in the flooring of the children's sanitary area have been filled.

### **Supporting documentation submitted**

Written evidence.

## Corrective & Preventive Action submitted by the Registered Provider

### Corrective and Preventive Action

The corrective actions as stated by the registered provider once completed will address the non-compliance.

### Supporting documentation submitted

Written evidence.

## Summary Comment

Supporting action was submitted in keeping with the actions stated. Once the required work is completed over Easter the Regulatory requirement will be met.