

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2016DS024
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<b>Name of Service:</b>	StartBright Greenhills
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<b>Address of Service:</b>	Bancroft Avenue, Greenhills Road, Tallaght, Dublin 24, Co. Dublin
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<b>Eircode:</b>	D24 K248
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<b>Name of Registered Provider:</b>	Elaine McQuillan
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<b>Service type:</b>	Full Day
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<b>Date of Inspection:</b>	21/01/2025
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<b>No of pre-school children:</b>	AM	54	PM	28
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<b>Address of the Early Years Inspectorate:</b>	The Brunel Building, Heuston South Quarter, St John's Road West, Dublin 8.
<b>Inspection undertaken by:</b>	S Early O'Brien & R Brien
<b>Title:</b>	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).

<b>Conditions if applicable</b>	NA
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### Description of service

StartBright Greenhills is one of seven not-for-profit early years services operated by StartBright Early Learning Centres CLG. The service operates from two prefabricated buildings on the grounds of St Mary's primary school in Tallaght, Dublin 24. Children aged two to six years are accommodated on a sessional, part-time or full-day basis between 8:00 and 18:00. The service participates in the Early Childhood Care and Education (ECCE) scheme between 9:00 and 12:00.

### Staffing

There are 21 staff employed by the service including the person in charge, 2 administrators, a caretaker and a cleaner. 17 staff are employed to work directly with the pre-school children and on the day of inspection 11 were present in addition to 1 student. The registered provider also employs a Quality Mentor who works across the company's seven services. The registered provider does not work directly with the children and was not present on the day of 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/ health, welfare and development of child/ safety/records/premises and facilities. The inspection may also focus on other areas as required.

The inspection focused on an examination of compliance under the following regulations:

- 9 (1)(a)(b)(2)(3)(4) Management and Recruitment
- 11 (1)(2)(8)(a) Staffing Levels
- 16 (1)(h)(i)(j)(k) Record in Relation to Pre-School Service
- 19 (1)(a) Health, Welfare and Development of Child
- 23 Safeguarding Health, Safety and Welfare of child
- 25 First Aid
- 26 Fire Safety Measures

A sampling process was used to assess compliance under regulation 16, Record in Relation to Pre-School Services.

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 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)(b)

The service had a designated person in charge and a named person to deputise as required on the premises throughout the inspection.

(2)

Following a discussion with the person in charge and a review of 22 staff files it was confirmed that 11 new members of staff and 1 student commenced working in the service since the last inspection on 01 March 2023.

Documentation was reviewed in respect of these adults and met regulatory requirements as follows:

(a)(b) Of the 24 written and validated references required, 10 were available from a past employer and 8 were available from a reputable source.

(c) Garda vetting disclosures had been obtained for 22 staff. However, 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) Of the 12 adults who had commenced employment since the last inspection date, 5 were required to hold at least a major award in Early Childhood Care and Education at Level 5 on the National Qualifications Framework. A record was available evidencing that these adults held the required qualification.

(4)  
Police vetting disclosures were available for all five staff working in the service, who had lived outside of the state for a period of longer than six months.

### Non-Compliance Information

(2)(a)(b)

Validated, written references were unavailable for three staff.

(3)

The registered provider did not take appropriate measures to ensure that all adults were suitable to work in an early years' service prior to their commencement as outlined below:

The registered provider did not ensure that a Garda vetting disclosure was obtained for two adults prior to them commencing work in the service as follows;

- One staff member commenced working in the service on 21 October 2024 and Garda vetting was obtained on 6 November 2024.
- One staff member commenced working in the service on 12 June 2023 and Garda vetting was obtained on 14 June 2023.

Three references in respect of two adults were not validated prior to commencing employment as outlined below.

- One staff member commenced employment on 12 June 2023 and two references were validated on 28 June 2023 and 30 June 2023 respectively.
- One staff member commenced employment on 22 July 2024 and one reference was validated on 26 July 2024.

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

#### Corrective and Preventive Action

The following was submitted by the Registered Provider

2)(a)(b) Staff members in question references have been validated and put on each staff members file.

(3) Recruitment policy revisited. Staff members were not working directly with the children on these dates. The staff were doing their mandatory training and policy reading. All admin staff have reread the recruitment and management regulations and are made aware of these regulations now.

Regulation 9 was revised by admins, and all necessary changes were implemented.

Admin staff have revisited the recruitment policy and will be more aware of this non-compliance. All references will be validated prior to commencing employment.

Attached is our recruitment policy for your attention and signed evidence from the admin staff as proof of staff retraining of the policy. We have also set up a filing system available for the admin staff to clearly see dates for renewals

### **Supporting documentation submitted**

Photographic evidence of validated references, a copy of the recruitment policy and staff training notes, signed by relevant staff members.

### **Summary Comment**

The information submitted here is deemed to meet regulatory compliance.

## 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)  
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 was adhered to during the inspection. There were 54 children attending the service being supervised by 11 adults on the morning of inspection and 28 children being cared for by 4 adults on the afternoon of inspection.
- (8)(a)  
There were at least 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;*
  - (j) details of any medication administered to a pre-school child attending the service with signed parental consent;*
  - (k) details of any accident, injury or incident involving a pre-school child attending the service.*

### Compliance Information

- (1)  
(h) Details of the attendance of each child in the service was recorded at the time of entering and leaving the service.
- (i) The staff roster was available and accurately reflected the adults working in the service on the day of inspection.
- (j) A sample of sixteen medication administration records were reviewed. These records were signed by staff and parents and were completed appropriately.
- (k) A sample of twenty-one accident and incident records were reviewed. These records were signed by staff and parents and were completed appropriately.

### Part V - Care of Child in Pre-school Service

#### Regulation 19 - Health, welfare and development of child

(1) A registered provider shall, in providing a pre-school service, ensure that-

(a) each child's learning, development and well-being is facilitated within the daily life of the pre-school service through the provision of the appropriate activities, interaction, materials and equipment, having regard to the age and stage of development of the child,

#### Compliance Information

(1)(a)

##### **Basic Needs**

Heathy eating is promoted in the service and food and snacks were provided at regular intervals. In discussion with staff, they informed the inspectors that meals are provided at regular intervals with children bringing their own lunch from home for morning snack time in the ECCE sessions and additional snacks and a hot meal provided by the service for children who attend on a part-time and full day basis. Cups and jugs filled with water were available to the children in addition to drinks from their own bottles which they had access to.

On the day of inspection, children were observed to take their lunchbox from the fridge at snack time and encouraged to open and close lunch boxes and bottles and be responsible for their own belongings. During this time the staff members sat at the tables with the children in small groups. They were observed to engage in social conversations with the children and they promoted a relaxed atmosphere.

Children are encouraged to use the toilet and engage in handwashing independently with assistance provided where needed.

The adults working with the children were sensitive and responsive to the needs of children.

##### **Supporting Relationships**

A key worker system is in place in all rooms in the service with named staff assigned responsibility for creating close relationships with a designated group of children and their parents. Evidence of this was observed on inspection where staff demonstrated how they communicate children's interests and development with parents on a software application. This information is used to plan the children's next steps. This promoted the development and sustainment of relationships between the children, their parents and the staff in the service. Staff supported children to engage positively with one another and the children were encouraged to engage in play activities that required turn taking and sharing. Staff members were heard encouraging children to be mindful of the feelings of those around them which promoted an ethos of friendship and teamwork.

### **Physical and Material Environment**

Each of the three care rooms were laid out in such a way that children had easy access to resources and interest areas within the rooms such as a dolls house, a dress-up area, a play kitchen, a library area with a couch, an arts and crafts and mark making station and a construction area.

A family tree containing photos of each child's family and birthday charts were displayed on the wall at their level in the cosy area of each room.

On the day of inspection children were invited to engage in messy play activities which were presented to them in a large tray, placed on a low table and were adequately resourced.

Each care room has a scheduled time daily where children enjoy time in the outdoor play area. This area while not accessed directly from care rooms, was adequately supervised safe and secure on the day of inspection. In this area they have access to sand play, water play, climbing frames, diggers, blocks, a mud kitchen, book corner and art station. A newly built sensory room was available in the outdoor play area and is used primarily by children in the service who require additional supports.

### **Programme of Activities**

During the inspection it was evident that children's individual choice was respected in the daily routine in which they are encouraged to participate. There are picture cues and visual displays on the wall at their level to support them to make decisions on their play throughout the day. Staff demonstrated how they document, record and share children's learning and development with parents. They also discussed with the inspectors how this documentation supports future planning. Children were observed to make choices on their own play materials within the environment, engaged in movement activities and relaxing activities both individually and as a group. Positive language was observed to be used across the staff team and with the children. Language development was supported in discussions observed both at snack time and in the outdoor areas where the adults encouraged the children to use words to describe their thoughts and feelings.

### 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 leading into the service was appropriately secured with a buzzer system to prevent children from exiting unsupervised and to restrict unauthorised persons from gaining access to the premises.

Medication was stored safely and out of the reach of children.

All storage facilities for hazardous cleaning materials were inaccessible to children.

##### Infection Control:

Liquid soap, warm water and paper towels were available to facilitate handwashing for both staff and children.

Good hand washing practices were observed after toileting and outdoor play and before eating.

Lunch boxes that included perishable food items were stored in the fridges in the playrooms in line with safe food guidance.

##### Administration of Medication:

There was written evidence of prior parental consent for the administration of anti-febrile medication and prescribed medication and there were procedures in place to safely administer and document such medication if required, including in the case of an emergency. Staff adequately detailed the procedures for administering medication if required during discussions with the inspectors.

##### Fire Safety:

On the day of inspection, all emergency exits were observed to be clearly identifiable and were not obstructed.

#### Non-Compliance Information

##### General Safety:

1. While a Garda vetting disclosure was available for one staff member, this was not dated within the previous three years in adherence to the Early Years Inspectorate Regulatory Notice 'EYI-RN12.3 Renewal of Garda Vetting'.
2. Foam blocks in the Sunshine Room and Starlight Room were observed to be broken with pieces torn off posing a choking risk.

### Infection Control:

- 3 The outer cover of a couch in the outdoor play area was observed to be torn with foam exposed. It cannot be cleaned effectively and poses a risk of cross contamination.
4. In the sanitary area adjacent to the Rainbow room, the pedal function on the bin was not working. Children were observed lifting the lid of the bin to dispose of paper towel posing a risk of cross contamination.

### Action submitted by the Registered Provider

#### Corrective & Preventive Action

The following was submitted by the registered provider:

#### **General safety 1**

Staff in question had garda vetting renewed.

#### **General safety 2**

Foam block in sunshine room and starlight room removed.

#### **General safety 1**

New garda vetting list created for Admin to monitor all re-vetting.

#### **General safety 2**

Regulation 19 was given to H&S Officer, who read it, put it in her Health & Safety Statements & Risk Assessments folder to coincide with this every month by doing her monthly safety audit. This will ensure all equipment is monitored more closely.

### Infection Control:

The following was submitted by the registered provider

#### **Infection Control**

Sofa was removed from the garden

New pedal bin installed. Children observed using the new pedal bin to avoid contamination.

Regulation 19 was given to H&S Officer, who read it, put it in her Health & Safety Statements & Risk Assessments folder to coincide with this every month by doing her monthly safety audit.

## Supporting documentation submitted

### General Safety:

Updated Garda Vetting disclosure submitted and checklists for future use to ensure all staff records are updated as required.

Checklist to include review of materials as part of monthly Health and Safety audit.

Copy of notes from staff meeting/training, signed by relevant staff members.

### Infection Control:

Photographic evidence of sofa removed from garden and pedal bin in situ at sanitary area.

## Summary Comment

The information submitted is deemed to meet regulatory compliance.

## 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)  
Five staff members hold the appropriate First Aid Responder (FAR) certification, ensuring that a person trained in first aid was immediately available to the children at all times

(2)(a)(b)  
There were suitably equipped first aid boxes stored in an easily accessible position in each of the care rooms and were available for use by the staff and children.

## 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 fire fighting 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)

Records were available demonstrating that fire drills take place monthly. The last recorded fire drill was documented as having been carried out on 20 January 2025.

(b)

A record was maintained of when the fire detection system and smoke alarms were last serviced on 18 November 2024.

Firefighting equipment records were available demonstrating that these were last serviced on 27 March 2024.

(4)

Fire evacuation procedures were displayed in conspicuous places throughout the service.