

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2016FL012
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<b>Name of Service:</b>	Little Rainbows (Baldoyle)
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<b>Address of Service:</b>	16 Red Arches Avenue, The Coast, Baldoyle, Dublin 13, Co. Dublin
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<b>Eircode:</b>	D13 WR99
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<b>Name of Registered Provider:</b>	Mary Campbell
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<b>Service type:</b>	Full Day, Part Time, Sessional
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<b>Dates of Inspection:</b>	20/03/2024
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<b>Date 2 of Inspection:</b>	21/03/2024
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<b>No of pre-school children: Day 1</b>	AM	93	PM	89
<b>No of pre-school children: Day 2</b>	AM	91		

<b>Address of the Early Years Inspectorate:</b>	Early Years Inspectorate, Floor 7 Brunel Building, Heuston South Quarter, St John's Road West, Kilmainham, Dublin 8 D08 X01F
<b>Inspection undertaken by:</b>	E. Griffin & T. Nelson
<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).

### Conditions if applicable

Not applicable.

### Description of service

Little Rainbows (Baldoyle) is a privately run service located in a residential area in North Dublin. The service provides full-time, part-time, and sessional care and education to children aged 0-6 years and participates in the Early Childhood Care and Education (ECCE) scheme. The service consists of eight care rooms: Wobbler room 1, Wobbler room 2, Wobbler room 3, Toddler room 1, Toddler room 2, ECCE 1, Junior ECCE and the Senior Montessori room, an office, kitchen, and sanitary facilities. There are two enclosed outdoor play areas located to the rear of the building.

### Staffing

The registered provider works in the service in a supportive capacity and employs twenty adults. On Day 1 of Inspection, there were eighteen adults present including the registered provider, the deputy manager, one auxiliary staff for cooking and two staff members who arrived from another service operated in association with the registered provider.

On Day 2 of inspection, there were nineteen adults present including the registered provider, the deputy manager, one auxiliary staff for cooking and two staff members from another service operated in association with the registered provider and one adult in the kitchen.

### 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 areas of governance, health, welfare and development of child and safety. The inspection may also focus on other areas as required. The following regulations were reviewed over the course of the 2-day inspection:

Regulation 9 (1)(2)(3)(4)-Management and Recruitment

Regulation 11(1)(2)-Staffing Levels

Regulation 16 Record in Relation to a Preschool Service

Regulation 17 Information for Parents

Regulation 19(1)(a) Health, Welfare and Development of Child

Regulation 23 Safeguarding the Health, Safety, and Welfare of Child

Regulation 26 Fire Safety Measures

Regulation 28-Insurance

On Day 1, an additional risk was identified and is reported under Regulation 27-Supervision. On Day 2 of inspection Regulation 9(7)- Management and Recruitment and a non-compliance in relation to Regulation 10- Policies and Procedures of Pre-school Service was identified. 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.

### Acknowledgments

The inspectors wish to acknowledge the cooperation of the registered provider, deputy person in charge, staff, student, and children who were present on the days of 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.*

*(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;*
- (c) these Regulations.*

### Compliance Information

(1)(a) The service had a designated person in charge and a named person to deputise as needed.

On Day 1

(b) The designated deputy was present when the inspectors arrived unannounced to the service. The registered provider arrived shortly after the inspection commenced.

On Day 2

(b) The registered provider and the designated deputy were present when the inspectors arrived at the service.

(c) There was a clear management structure in place, and staff demonstrated knowledge of this.

(2) The registered provider stated there were twenty adults employed. The files of ten adults who had commenced employment since the last inspection 8 June 2023 including the student who holds a childcare qualification and the files of three adults who were present from another service operated in association with the registered provider were reviewed. Garda vetting and staff qualifications were reviewed for all adults.

The registered provider had completed the following checks:

- (a) Seventeen validated written references were available from recent past employers.
- (b) Four validated written references were available from a reputable source other than a past employer.
- (c) Garda Vetting Disclosures had been obtained for all 23 adults. 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 for 1 adult. Please refer to the information outlined under Regulation 23 of this report.
- (d) Police vetting was available for six adults who had lived in a country other than Ireland for a period of six months or more as an adult.

(4) Documentary evidence was available for seventeen adults who worked directly with children attending the service, that they held at least a major award in Early Childhood Care and Education at Level 5 or above on the National Framework of Qualifications or a qualification deemed eligible by the Department of Children, Equality, Disability, Integration and Youth Affairs.

### Non-Compliance Information

(2)(a)(b) Two written and validated reference were not available for all adults evidenced by;

- One adult did not have two written validated references.
- One adult did not have one written validated reference.
- Two adults did not have their second written reference validated.

(3) Evidence showed that the procedures specified in paragraph (2) were not carried out in respect of three adults being allowed access to or contact with a child attending the pre-school service.

- Two written and validated references had not been obtained prior to the start date of 3 adults.
- A Garda Vetting Disclosure had not been obtained and reviewed prior to the start date of the one adult.

This non-compliance was observed on the previous inspection in June 2023 and the preventive action had not been maintained.

(4) There was no documentary evidence available to demonstrate that five adults who were working directly with children attending the service held 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)(c) The files of ten adults who were new to the service and who worked directly with the children were reviewed on Day 2 of the inspection. Evidence demonstrated that the registered provider did not ensure that there was a robust induction and ongoing training process demonstrated by the following examples:

- Adults as part of their induction ticked a box to sign that they had read the policies and procedures of the service. Three adults reported to the inspector team that they had not been given the policies and procedures to read. This is at variance to the service policy on recruitment which stated that all new adults are provided with the basic information including policies and procedures and will be given time to read them and ask any question they may have.

- There was no documentary evidence available that the adults in the service had signed up to the code of conduct. This was not in line with the induction policy which referred to details of a code of conduct that adults working in the service would sign up to.
- There was no documentary evidence available to show staff were provided with individual support and supervision sessions.

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

#### Corrective Action

(2)(a)(b) Five written references were validated by the creche Manager and have been submitted on 07/05/24.

(3) The Garda Vetting disclosure was obtained on the day of inspection for the individual and a copy was provided on the day to the inspectors.

(4) One staff member has since left the service. A Letter of eligibility was forwarded and accepted the day after inspection for one staff member. Academic transcripts for two staff members and a screenshot of DCEDIY qualification list was forwarded to the inspectorate. Evidence was submitted to show that one staff member completed her level 5 and including a letter of completion of the course depending on the outcome results of two modules.

(7)(a)(c) A new induction booklet and staff handbook has been designed and is now sent to new staff prior to the commencement of their employment. The booklet sets out the code of conduct and must be signed and returned on their first day and any questions can be answered.

#### Preventive Action

(2)(a)(b) All staff files will be reviewed by creche manager or person in charge on an ongoing basis that the necessary documents are held on file as required.

(3)(4) The creche manager or person in charge will ensure that staff qualifications and Garda Vetting disclosures will be in place prior to the start date of future employees and reviewed to ensure compliance with regulation and all documents will be held on file.

(7)(a)(c) The creche manager or person in charge will discuss the induction and policies with new staff members and over the probation period ensure that these are followed with continual assessment.

#### Supporting documentation submitted

- 5 written validated references.
- Garda Vetting Disclosure.
- Letter of Completion.

- Copy of Induction Booklet and Staff Handbook.
- Staff Supervision Policy.

## Summary Comment

The corrective and preventive actions taken have addressed the non-compliances identified for Regulation (9)(a)(b), (3) and (7). Regulation (9)(4) remains outstanding for one staff member until the final modules have been awarded and full certification is obtained.

## 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.*

### Non-Compliance Information

The registered provider did not ensure that the service had a Staff Supervision Policy in place to include the following information;

- How employees, unpaid workers and contractors, are supervised and supported in the service in relation to their work practices.
- The frequency and duration of supervision.
- What records will be kept for supervision and where the records will be stored and how long they will be kept for.

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

#### Corrective Action

An updated staff supervision policy has been implemented. Staff appraisals will be carried out at the start and end of the twelve-week probationary period and records will be kept. All staff will be appraised annually unless otherwise required.

#### Preventive Action

The creche manager or person in charge will ensure that staff appraisals and supervision are carried out as required and records kept.

#### Supporting documentation submitted

- Copy of Supervision Policy

### Summary Comment

The actions submitted by the registered provider in the corrective and preventive action plan have addressed the non-compliance identified on inspection.

### Part III – Management and Staff

#### Regulation 11 - Staffing levels

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

*(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) On Day 1, there were 15 adults working with 93 children in the morning and 15 adults working with 89 children in the afternoon. On Day 2, there were 15 adults working directly with 91 children in the morning.

##### Day 1 - During the morning:

Wobbler 1 room – There were 2 adults caring for 9 children aged between 1 to 1 ½ years.

Wobbler 2 room- There were 2 adults caring for 8 children aged between 1 ½ to 2 years.

Wobbler 3 room – There was 1 adult caring for 6 children aged between 2 to 3 years.

Toddler 1 room- There were 2 adults caring for 12 children aged between 2 to 2 ½ years.

Toddler 2 room- There were 2 adults caring for 11 children aged between 2-3 years.

Senior Montessori room – There were 2 adults caring for 21 children aged between 3 to 4 years.

ECCE 1 room- There were 2 adults caring for 10 children aged 2 ½ -3 ½ years.

Junior ECCE room – There were 2 adults caring for 16 children aged between 3 to 4 years.

##### Day 1 - During the afternoon:

Wobbler 1 room – There were 2 adults to 9 children aged between 1 to 1 ½ years.

Wobbler 2 room- There were 2 adults caring for 7 children aged between 1 ½ to 2 years.

Wobbler 3 room – There was 1 adult caring for 6 children aged between 2 to 3 years.

Toddler 1 room- There were 2 adults caring for 12 children aged between 2 to 2 ½ years.

Toddler 2 room- There were 2 adults caring for 10 children aged between 2-3 years.

Senior Montessori room –There were 2 adults caring for 21 children aged between 3 to 4 years.

ECCE 1 room- There were 2 adults caring for 8 children aged between 2 ½ -3 ½ years.

Junior ECCE room – There were 2 adults caring for 16 children aged between 3 to 4 years.

## Day 2 - During the morning:

Wobbler 1 room –There were 2 adults caring for 9 children aged between 1 to 1 ½ years.

Wobbler 2 room-There were 2 adults caring for 8 children aged between 1 ½ to 2 years.

Wobbler 3 room – There was 1 adult caring for 6 children aged between 2 to 3 years.

Toddler 1 room- There were 2 adults caring for 11 children aged between 2 to 2 ½ years.

Toddler 2 room- There were 2 adults caring for 11 children aged between 2-3 years.

Senior Montessori room –There were 2 adults caring for 20 children aged between 3 to 4 years.

ECCE 1 room- There were 2 adults caring for 10 children aged between 2 ½ -3 ½ years.

Junior ECCE room – There were 2 adults caring for 16 children aged between 3 to 4 years.

The registered provider was available in a supportive role on the two days of the inspection.

## Non-Compliance Information

(2) There were two adults caring for twenty-five children at 10.11am in the Senior Montessori room when the inspection team arrived at the service and were documenting the adult/child ratios on day 1 of inspection. The ratio for this age group during ECCE hours is one adult to eleven children. It is acknowledged that the children were moved after the inspector raised this as a concern and all care rooms remained in ratio for the duration of the inspection.

## Corrective & Preventive Action submitted by the Registered Provider

### Corrective and Preventive Action

Three children from the Junior Montessori room were brought up to the senior room temporarily for graduation songs practice and their teacher was about to accompany them when the inspection team arrived and there was momentary confusion. The three children were returned to their room and the ratios in both rooms were correct.

### Supporting documentation submitted

Staff were reminded at a staff meeting on 22/03/24 to ensure that all rooms stay in ratio at all times.

### Summary Comment

The action submitted by the registered provider in the corrective and preventive action plan has addressed the non-compliance identified on inspection.

### 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:*

- (a) the name, position, qualifications and experience of the person in charge and of every other employee, unpaid worker and contractor;*
- (b) details of the class of service and the age profile of children for which the service is registered to provide services;*
- (c) details of the adult:child ratios in the service;*
- (d) the type of care or programme provided in the service;*
- (e) the facilities available;*
- (f) the opening hours and fees;*
- (g) the policies, procedures and statements the service is required to maintain in accordance with Regulation 10;*
- (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.*

*(3) A record referred to in paragraph (1) shall be open to inspection on the premises, and the documents and records referred to in paragraph (2)(a) shall be open to inspection whether on the premises or elsewhere, by an authorised person.*

### Compliance Information

- (1) The registered provider ensured that the following information in relation to the service was available:
- (a) the name, position, qualification, and experience of all employees, unpaid workers and contractors.
  - (b) details of the class of service and the age profile of children for which the service is registered were displayed on the noticeboard in the hallway for the attention of parents/guardians.
  - (c) details of the adult to child ratios in the service were displayed on the noticeboard in the hallway for the attention of parents/guardians.
  - (d) the type of care or programme provided in the service was displayed on the noticeboard in the hallway for the attention of parents/guardians.
  - (e) the facilities available were displayed on the noticeboard in the hallway for the attention of parents/guardians.
  - (f) the opening hours and fees were displayed on the noticeboard in the hallway for the attention of parents/guardians.
  - (g) the required policies, procedures and statements of the service were available in the hallway.
- (3) Records were open to inspection by an authorised person. All records requested by the inspector were available for review.

### Non-Compliance Information

- (16)(i) On Day 1, the roster did not include three adults: one adult who was present in the rooms when the inspectors arrived and two adults who arrived during the inspection from another service operated in association with the registered provider.
- On Day 2, the roster did not include two adults who were present from another service operated in association with the registered provider.
- (j) On review of the service procedures and practices in place for the administration of medication the following was observed using a mixed sample of twenty-five forms taken from the different care rooms:
- There was signature on three forms to show that the administration of medication had been witnessed by a second staff member.
  - There was no written parent/guardian signature on three forms to show that the parent/guardian had been informed of the date and time that a specific medication had been administered to their child.
  - There was no staff witness signature and written parent/guardian signature on two forms to show that the administration of medication had been witnessed by a staff member and the parent or guardian had been informed of the date and time that a specific medication had been administered to their child.

This is at variance to the service policy which states the authorised person who administers the medication will document the medication administration and have the process witnessed and signed by another authorised member of staff. In addition, any administration of medication record will be shared with and signed by parents/carers. Failure to provide parents with this information on collection could result in a child receiving an overdose.

(k) A sample of twenty-five accident and incident reports taken from incident books from the different care rooms were reviewed:

- Four of these forms did not include parent/guardian signatures.
- Fourteen of these forms did not include the date to show when the parent/guardian were informed.

It is important that parents/guardians are informed of any accident/incident relating to their child so they can monitor their child appropriately.

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

#### Corrective and Preventive Action

(16)(i) Due to Staff members reporting sick on both days, replacement staff had to be temporarily transferred from another branch. Unfortunately, the roster was not updated at the time to reflect that. The roster was updated subsequently and a copy shown to the inspectors.

(j) All staff in the creche were reminded at a staff meeting on 22/03/24 that a second member of staff shall sign the Medical Consent and Administration Record on administration of medicine to a child. In addition, all staff in the creche were reminded that a parent must be informed and that a parent's signature shall be recorded on the Medical Consent and Administration Record on administration of medicine to a child.

(k) All staff in the creche were reminded at a staff meeting on 22/03/24 that the details in the Accident and Incident Report forms should be filled out accurately including date, parents signature and all relevant details.

#### Preventive Action

The creche manager or person in charge will take responsibility for:

- Checking and updating the roster on a daily basis as required.
- Checking the Medical Consent and Administration Record on administration of medicine to a child on a daily basis as required.
- Checking the Accident and Incident Report forms on a daily basis as required and that all details are correct.

## **Supporting documentation submitted**

No supporting documentation submitted.

## **Summary Comment**

The actions taken by the registered provider in the corrective and preventive action plan have addressed the non-compliances identified on inspection.

## **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 ensured the information referred to in subparagraphs (a) to (g) of Regulation 16 Record in relation to Pre-School service was available to parents/guardians.

- Information on the staff, type of service, age range of children, type of care programme, facilities and the opening hours was displayed on notice boards in the service.
- Policies and procedures were stored in the service reception area.

## **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, and*

### Compliance Information

#### (1)(a)

- Children’s drinks were available within their reach throughout the day and children were encouraged to take plenty of drinks.
- The presence of ‘Family Wall’ displays, ‘Birthday Time’ displays, ‘Country of Origin’ flag display and the children’s artwork on display throughout the service, this demonstrated a sense of identity and belonging for the children.
- The furniture provided in the rooms was low level and suitable to the needs of the children. There were a sufficient number of low tables and chairs to accommodate children during mealtimes and for table top activities in each care room. Cosy areas with soft seating, soft mats, cushions and books for rest and relaxation were present.
- The layout of the rooms facilitated choice as the toys and equipment were laid out on low level shelving and were visible and accessible to the children enabling the children to independently access their choice of activity. Children were observed to take part in free play, small group, and large group work.
- Materials in the care rooms included: home areas with play kitchens and a play shop with cash register with supporting equipment and play food, sensory toys, range of construction toys to include wooden puzzles, jigsaws, cubes, plastic building blocks, play tools and toolboxes; toys for transporting such as trucks and cars; small world play toys of play phones, instruments; small characters of animals and dinosaurs; and push along toys.
- Children’s language development was supported through one to one and group discussions, songs and storytelling which were observed during the inspection.
- Children were observed to access the outdoor play areas. Both areas had a soft artificial grass surface and play equipment such as slides, a climbing rope, a water tray, a tunnel, ride on toys such as cars and tractors. There was also a wooden table and bench for rest and socialisation. This supports their social, cognitive, gross, and fine motor development.

### Non-Compliance Information

1. The interaction strategies used by an adult in a care room were not observed to be respectful, warm or supportive. The following was observed:

- The verbal communication used to manage the children within a care room was negative, with repeated use of discouraging words such as “sit down”, “no “and “don’t touch”.

- A child who asked could they use the toilet was observed to be taken by the arm and led to the toilet without the child been informed of what was the plan. No permission was requested from the child, or no indication was given in advance that they were to be physically moved. The child was observed to then become upset and was crying. No offer of comfort was given by the adult.

Children require supportive comforting interactions, with positive verbal communication and appropriate consensual physical interactions from all adults in the service. The practices outlined above were at variance to the service policy on Behaviour Management, which stated that staff will use appropriate tone, and positive interaction strategies.

2. Children ranging in age from 3 years did not have the freedom to move freely throughout the care room and access toys, equipment or use the toilet during the transition to dinner in the one of the care rooms on the first floor. As evidenced by the following:

- Children were required to remain seated for a large group activity of reading prior to dinner time. The children were observed to show signs of disinterest by rolling on the floor and taking toys off the shelves, and they were repeatedly reminded by a staff member to stay seated on the floor, and not to play with the toys. An explanation was not given to the children as to why they could not have the toys and an alternative activity was not provided during this transition.
- A child who left the table at dinner time and approached the door of the sanitary accommodation and gestured both verbally and non-verbally they wanted to use was toilet was told to sit down. No explanation was given to the child as to why they couldn't use the toilet at that time.

3. On Day 1 of the inspection children between one year and three months and two years and four months were observed to eat fruit puree served in bowls. When the inspector asked staff members and the chef why the fruit was blended. Staff said the children were too young to be given chopped up fruit. Children should be provided with cut up fruit pieces that are age and appropriate to their stage of development. Chewing supports children's oral dexterity and oral development. It is acknowledged that on Day 2 of inspection children were observed to be given chopped up fruit during morning snack time.

4. During dinner time, a child was observed to not want to eat the dinner provided. The inspector asked staff in the room was there an alternative option of food for children who did not want to eat the dinner. Staff reported there are no alternative foods offered should a child refuse to eat at mealtimes.

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

#### Corrective and Preventive Action

1. It is our policy to treat all children with respect and uphold and preserve their rights to ensure that their feelings and wishes are taken into account. Children should be given the opportunities to make choices and develop a sense of responsibility. The Staff Member concerned had only joined Little Rainbows that week and acting on the observations of the Tusla Inspectors, we implemented a week of intense supervision on a one-to-one basis in the classroom. Following on from this, it was decided to continue her probation under strict monitoring while working daily with a supervisor in the classroom to ensure that she learns the proper communication skills required.

There will be weekly meetings with the creche manager to get feedback from the staff member and monitor the staff member's progress during the probation period. A new Staff Induction Checklist has been introduced.

2. Staff will ensure prompt serving of meals after play with mealtime being coordinated to coincide with finish of activities. This will avoid children waiting and becoming restless. Staff were reminded at a staff meeting on 22/03/24 that children are entitled to expect that all adults will respect, uphold and preserve their rights regarding access to the toilet. The staff were referred to the Services Supervision policy and the need to talk children through all their activities and ensure that they have access to age-appropriate toilet facilities at all times. This was highlighted at a staff meeting on 22/03/24 as was the requirement to serve the children their meals promptly.

3. While we have found fruit puree and yoghurt a great way of ensuring that Wobblers receive necessary nutrients, we acknowledge the inspector's observation that chopped up fruit should be provided in an age-appropriate fashion. We now provide chopped up fruit for all age categories but still provide smoothies for individual children who may have difficulty digesting it.

4. Staff were reminded at a staff meeting on 22/03/24 that alternative food has always been an option for children. The services inhouse chef always offers alternatives at mealtimes. New staff were reminded that alternative food is always available for children.

#### Supporting documentation submitted

- Staff Induction Checklist.
- Staff Supervision Policy.

## Summary Comment

The actions taken by the registered provider in the corrective and preventive action plan have addressed the non-compliances identified on 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 leading into the premises was appropriately secured to prevent the children from exiting unsupervised and to restrict unauthorised persons from gaining access to the premises.
- Medication was stored safely out of the reach to the children.
- Blind cords were secured safely out of reach of the children.

### Infection Control:

- Water bottles were individually labelled for each child. The children were observed drinking water throughout the day.
- Windows were opened throughout the day to allow fresh air to circulate in the care rooms.

### Safe Sleep:

During Day 1:

The following safe practices were observed during sleep time:

- Room temperatures were maintained at the required levels between 18-22 °C while children over 1 years of age slept evidenced as by the following.
  - The cot room temperature was recorded as 19.5°C at 11.40pm while ten children slept.
  - The Wobbler 2 room was recorded as 20.2°C at 11.45pm while eight children slept.
  - The Wobbler 3 room was recorded at 20.4°C while six children slept.
- Shoes and clothing were removed from children before sleep time.

- Children were provided with an individually labelled cot to sleep in and were monitored while sleeping at intervals of 10 minutes or less and staff recorded the breathing, position, and colour of each child at each check.

### Fire Safety:

During Day 1 & Day 2:

The emergency exit doors were clear from obstruction. This helps ensure the safe effective evacuation of children and staff in the event of an emergency.

### Non-Compliance Information

#### General Safety:

1. Garda vetting was available for 23 adults. However, the vetting disclosures for one adult was not dated within the previous three years in adherence to with the Early Years Inspectorate Regulatory Notice 'EYI-RN12.3 Renewal of Garda Vetting'.
2. Flexes and cables were observed to be accessible to the children.
  - Two trailing flexes in the Wobbler 3 Room.
  - One trailing flex from a speaker in the Junior Montessori room.
  - One trailing flex from a phone charging cradle in the hallway outside ECCE 1.
  - One trailing flex from a phone in ECCE 1.
  - One trailing flex behind a cot in the sleep room. It is acknowledged that the children in the cot room were supervised at all times by two staff members during sleep time and the flex was removed on Day 2 of inspection.
3. Cleaning agents were not stored safely out of the reach to the children, which posed a risk of injury. Evidenced as follows:
  - In an unlocked press under the sink in the Senior Montessori room.
  - On the floor in Toddler 2 sanitary accommodation.
  - On low shelving accessible to children in ECCE 1.

It is acknowledged that cleaning agents were stored safety out of reach to the children on Day 2 of the inspection.
4. There were three wooden parts off a broken radiator cover with prodding nails accessible to children in one of the Wobbler Care rooms. This posed a risk of injury. It is acknowledged this was removed on Day 1 of inspection when the inspector brought it to the attention of the registered provider.

5. There were no visibility strips on a window in Wobbler 2 room which was at the children's level. This posed a risk of injury.

### Infection Control:

6. Sleep mattresses were observed to be stored with their bed linen on them beside the nappy changing unit and touching off the pedal operated bin in the downstairs sanitary area, this is an infection control risk.
7. The bin in the downstairs sanitary area was observed to be full at 10.55am and was overflowing at 2.46pm. The bin was also observed to be full on day 2 of inspection at 11.33am. This is an infection control risk.
8. The counter by the sink area in the Senior Montessori room was damaged, leaving a surface that was not effective for cleaning. This increased the potential risk of cross contamination.
9. Toilet rolls were either not available or hygienically dispensed in the Junior and Senior Montessori rooms. For example:
  - The toilet roll was stored on the windowsill which was out of reach of the children in the Junior Montessori room.
  - The toilet roll was wet in one of the cubicles in the Senior Montessori room, there was no other toilet roll available in the cubicle.
10. The facilities available for handwashing did not support effective hygienic practice. For example:
  - There was no hand paper towel or toilet roll in the sanitary area downstairs at 10.55am and when the inspector checked again at 3.45pm.
  - There was no liquid soap available in the Junior Montessori room.
  - Paper towels were not hygienically dispensed. In both the Junior and Senior Montessori rooms, the paper towels were not available in the sanitary accommodation. Children had to leave the sanitary accommodation to dry their hands, increasing the potential for cross contamination.
11. There was a hole in one of the tables in the Junior Montessori room, this table appeared visibly dirty. There was a build-up of dirt and debris in the hole, which increased the potential risk of contamination.
12. An adult's coat and children's blankets were observed to be stored in the sanitary accommodation off Toddler 2 room. The blankets were observed to be on the floor behind the door. Only items for use in the sanitary accommodation area should be stored there.

### Safe Sleep:

The following unsafe sleep practices were observed:

13. The registered provider did not follow Tusla's "Guidance for the Early Learning and Care sector on sleep provision for children under 24 months". On Day 1, in the Senior Wobbler Room five children under 2 years of age were not provided with a mattress with a minimum depth of 6cms to sleep on but was observed to sleep on a low-level stackable bed at nap time. An individual sleep plan was not available for the five children. Sleep plans should include an assessment of the individual child's sleep routines and sleep requirements, to be determined and agreed in collaboration with parents/guardians and consideration of the child's developmental readiness to move from a cot to a floor bed.
14. On Day 2 there was a bottle observed to be left in a child's cot while the child slept during sleep time. This is at variance to the service policy which states that bottles will be removed during sleep time.

### Fire safety:

15. The details of the attendance of the children were not accurately recorded in the attendance book in the Wobbler, Junior and Senior Montessori rooms. Contemporaneous accurate attendance logs must be maintained to support the safe evacuation of children in an emergency. The following was observed;
  - Staff were not consistently aware of what was the correct record to use for fire evacuation purposes. Some staff reported using the handover sheet, other staff reported they would use the attendance book. For example, in the Wobbler 3 care room the attendance book had not been completed. The staff member in Wobbler 3 room reported that the handover sheet which was filled in correctly is used for fire evacuation purposes. The attendance book was not filled in the Junior and Senior Montessori room. A staff member reported that attendance books are used for fire evacuation purposes.
  - The handover sheet in a care room, which a staff member reported was used for fire evacuation purposes, was prefilled with the departure times of all the children at 12.38pm on Day 1, yet there were still ten children present in the room.

### Action submitted by the Registered Provider

#### Corrective & Preventive Action

General Safety:

1. The one Garda Vetting which needed updating has been updated and attached. Garda Vetting Disclosures for all members of staff will be checked regularly in future to ensure that they are all in date.

2. All Rooms were checked by staff for trailing flexes, and all were either removed or secured safely. Regular checks of classrooms to be made by staff and the creche manager or person in charge to ensure that there are no trailing flexes.

3. A new lock has been fitted to the press in the Senior Montessori room. Staff were reminded that all cleaning agents were to be stored safely out of reach of children at staff meeting on 22/03/24.

4. The broken radiator cover has been replaced. All fixtures and fittings in the rooms to be checked by the creche manager or person in charge on a regular basis using the risk assessment forms provided.

5. A visibility strip has been put on the window in Wobbler Room. All windows to be checked by the creche manager or person in charge on a regular basis.

### **Infection Control:**

6. The staff were reminded at a staff meeting on 22/03/24 that mattresses and bed linen, as per service infection control policy, should be appropriately stored away from the nappy changing unit or bathroom areas. Staff were reminded at a staff meeting on 22/03/24 about the importance of infection control and to be constantly vigilant regarding storage.

7. All staff instructed at a staff meeting on 22/03/24 to ensure that all bins are emptied three times a day and not allow them to get full. Our cleaner was also asked to closely monitor the bins daily. All Staff were reminded at a staff meeting on 22/03/24 about the importance of infection control and to be constantly vigilant regarding the monitoring of refuse bins.

8. The sink counter in the Senior Montessori area has been repaired. All fixtures and fittings in the rooms to be checked by the creche manager or person in charge on an ongoing regular basis.

9. New Toilet roll holders were placed in all upstairs bathrooms that are within easy reach of children. All staff were reminded at a staff meeting on 22/03/24 to constantly monitor the bathrooms to ensure that adequate supplies of toilet roll are available.

10. New Paper towel dispensers have been installed in every bathroom and liquid soap levels are to be monitored daily.

11. The table referred to has been disposed of and replaced by a brand-new table purchased. All fixtures and fittings in the rooms to be checked by the creche manager or person in charge on a regular basis.

12. All items not directly required for sanitary use were removed from bathrooms. All staff were reminded at a staff meeting on 22/03/24 that all non-essential items such as coats, bags etc. are not to be stored in bathrooms.

### Safe Sleep:

13. A new Safe Sleep Plan has been drawn up for children between 15 and 24 months. The creche manager or person in charge will take responsibility for checking that parents have signed the attached form. New mattresses which comply with regulations have been purchased. We have updated our safe sleep policy. The staff have been informed of this at a staff meeting on 22/03/24 and a copy of the policy has been placed in the staffroom for the attention of all staff. New mattresses were purchased that meets the required standards.

14. Staff were reminded at a staff meeting on 22/03/24 that bottles should be given before children are placed in a cot. The creche manager or person in charge will take responsibility for checking that this procedure is followed and that no bottles are put in cots in future.

### Fire Safety:

15. The staff were informed at a staff meeting on 22/03/24 that random checks by the creche manager or person in charge will be performed on the attendance books to ensure they are in order and that these books will be used for fire drills. Staff were informed not to prefill attendance books but only at the designated times of arrivals and departure. The creche manager or person in charge will ensure that all children and staff members are signed in or out according to the attendance record. The staff have been reminded the attendance book is used for the fire drill.

### Supporting documentation submitted

#### General Safety:

- Garda Vetting Disclosure
- Photographic evidence of the new lock on press.
- Photographic evidence of broken radiator cover replaced.
- Photographic evidence of visibility strip.

#### Infection Control:

- Photographic evidence of the sink repaired.
- Photographic evidence of the new table.

#### Safe Sleep:

- Invoice for new mattresses.
- Photographic evidence of new mattresses.

### Summary Comment

The actions taken by the registered provider in the corrective and preventive action plan have addressed the non-compliances identified on inspection.

### 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.
- (2) The record referred to in paragraph (1) shall be open to inspection by-
- (a) a parent or guardian of a pre-school child attending or proposing to attend the pre-school service,
  - (b) an employee, and
  - (c) an authorised person.
- (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) Documentation was available to demonstrate that fire drills were practiced monthly. The last fire drills took place on 2 February 2024.
- (b) The number, type and maintenance record of the firefighting equipment was up to date. Fire extinguishers were last serviced in June 2023 and the smoke detection system in June 2023.
- (2)(c) Records were open to inspection by an authorised person. All records requested by the inspector were available for review.
- (4) A procedure to be followed in the event of a fire was on display in prominent positions at the premises.

### Part VI - Safety

#### Regulation 27 – Supervision

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

#### Non-Compliance Information

The children were not observed to be appropriately supervised throughout the inspection at all times.

1. At 10.21am on Day 1 a child aged between 2 to 3 years from one of the care rooms on the first floor was observed to be at the top of the staircase on the first floor unattended. There was no staff present in the hallway. The inspector took the child back to their care room. It is acknowledged that children were getting ready to go outdoors for play at this time. Children must be appropriately supervised at all times.

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

#### Corrective and Preventive Action

1. Staff were reminded at a staff meeting on 22/03/24 of the importance of the supervision of children.  
Children should always be always accompanied by an adult outside the classroom.

#### Summary Comment

The actions taken by the registered provider in the corrective and preventive action plan have addressed the non-compliance identified on inspection.

### Part VI - Safety

#### Regulation 28 - Insurance

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

#### Compliance Information

The registered provider ensured the service was adequately insured. The insurance certificate provided for review showed cover for up to 99 children with an expiry date 27 March 2024.