

# Early Years Inspectorate Regulatory Report

## Pre School

<b>ATUSLA Identifier:</b>	TU2018MN500
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<b>Name of Service:</b>	Carrickroe Community Childcare
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<b>Address of Service:</b>	Deravoy, Carrickroe, Emyvale, Co. Monaghan
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<b>Eircode:</b>	H18 PW06
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<b>Name of Registered Provider:</b>	Rosemary Coyle
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<b>Service type:</b>	Full Day, Part Time, Sessional
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<b>Date of Inspection:</b>	17/04/2025
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<b>No of pre-school children:</b>	AM	32	PM	31
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<b>Address of the Early Years Inspectorate:</b>	No.18 The Grange Plantation Walk Monaghan
<b>Inspection undertaken by:</b>	S. Skinnader and M. Flood
<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>	Not Applicable
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### Description of service

Carrickroe Community Childcare have been operating as a community run childcare service since 2018. They provide full day care, part-time and sessional education and care to pre-school children aged from 0 - 6 years of age. The service is open from 07.30am to 6pm each weekday and caters for a maximum of 48 children. The service currently has 3 care rooms in operation namely: Baby and Waddlers Room, Toddler Room and Preschool Room. There is 1 sleep room off the Baby and Waddler Rooms and 1 off the Toddler Room. There are nappy changing and sanitary accommodations and a kitchen area. The service has 2 outdoor areas to the side and back of the service. There is an office located in a separate cabin in the outdoor area.

### Staffing

There were 19 staff members employed in the service. One member of staff employed as administrator, 2 to work only with school children, one of which was a student and 16 including the service manager who work directly with the preschool children.

### Methodology

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

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

The findings on inspection are based on:

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

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

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 named deputy person to deputise as required. The person in charge was on the premises when the inspectors arrived and was present throughout the inspection.

The 19 staff files were reviewed.

(2)(a) & (b) There were

- 2 written and validated references from a past employer or an alternative source available for 18 members of staff in the service.
- One staff had 2 written references.

(c) Documentary evidence of a processed Garda Vetting Disclosure was available for each of the 19 staff members. However, the registered provider 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) Following a review of the staff files presented for inspection documentary evidence of international police vetting was available for 2 out of 3 adults who had lived outside the Irish jurisdiction for a period of 6 months or more as an adult.

(4) Documentary evidence was available to confirm that the 16 staff members had a childcare qualification which met the minimum Level 5 qualification required to enable them to work directly with the preschool children.

### Non-Compliance Information

(2a) and (b) Two written references were not validated.

(2)(d) Documentary evidence of international police vetting was not available for 1 member of staff who had lived outside the Irish jurisdiction for a period of 6 months or more as an adult.

(3) From the documentary evidence available for inspection two staff members had commenced working in the service prior to written and validated references being obtained for both and Garda vetting documentation being obtained for 1 staff member.

## Corrective & Preventive Action submitted by the Registered Provider

### Corrective and Preventive Action

(2)(a)and(b) Written references were validated by the register provider through contacting the employees previous employer.

(2)(d) International police vetting was requested and received from the said staff member who had lived outside the Irish jurisdiction for a period of 6 months or more as an adult.

(3) This staff member had an error in their Garda Vetting application which has now been rectified, the staff member has been removed from the rota while the Garda Vetting is in process.

Internal Governance Structures have been and are continuing to be reviewed and clear roles and responsibilities have been put in place. This will continue throughout the service, appointing more distinct roles and responsibilities to ensure good practice and governance throughout the service. The office administrator has been officially assigned the Maintenance and upkeep of Records and Staff Files ensuring Garda Vetting/Training etc is kept up to date and reviewed periodically. Their Job Description has been updated to include these responsibilities. Training has been undertaken by Management and Office Administrator from the Tusla Quality and Regulatory Framework eLearning Programme Module 2: Governance. The staff will continue completing this eLearning Course ensuring a clear understanding of the QRF and Regulatory Framework.

### Supporting documentation submitted

Copy of international police vetting and validated references.

## Corrective & Preventive Action submitted by the Registered Provider

The Inspectorate have reviewed the registered provider's response and supporting documentation. The non-compliances in Regulation 9 have been addressed. Sustainment of corrective and preventative actions detailed will be assessed at the next 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.*

*(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) During the inspection there were an adequate number of adults working directly with the children attending the pre-school service.

(2) The child: adult ratios were correct during the inspection. The following adult: child ratios were observed in the care rooms when the inspectors arrived at the premises:

##### **Baby and Waddler Room:**

- There were 7 preschool children (aged 1 year to 1 year and 9 months) attending this room with 3 childcare staff.

##### **Toddler Room:**

- There were 8 preschool children (aged 1 and 11 months to 3 years and 4 months) being cared for by 3 adults.

##### **Preschool Room:**

There were 17 preschool children (aged 3 - 5 years) attending this room with 3 childcare staff and 1 student. One other adult was available to cover breaks, and the service manager was on the premises.

(8)(a) Following a review of the available documentation e.g. staff rotas and children's attendance records this information demonstrated that the registered provider ensured that there were at least 2 adults on the premises at all times.

### 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

There were 3 rooms in operation on the day of the inspection namely the Baby/Waddler Room, the Toddler Room and Preschool Room which was spread over 2 rooms.

(1)(a) The following examples demonstrate how the registered provider facilitated each child's learning and development:

#### Basic Needs:

- The children's lunches in the morning were provided by the parents, with breakfast, hot dinner and pm snack provided by the service. The staff were observed to sit with the children at mealtimes and this time was also used to encourage conversations between the children. Assistance was given to the children who required help with opening lunches and certain foods and to the younger children who required feeding. Bibs were put on the younger children before meals plus hands and faces cleaned appropriately after the meals.
- Powdered infant formula was sent into the service made up by the parents and stored appropriately in the fridge.
- All children were dressed appropriately to go outside and suncream was applied as necessary.
- The children were facilitated with taking some chosen toys and art supplies outside to play with.
- Nappies were changed regularly and in a timely manner with pleasant interactions observed between children and staff. Any children who were toilet trained were encouraged to be independent with toileting and discreet supervision also provided by staff as required.
- Individual child led sleep needs were followed, and dinners were saved for any child who was sleeping in the Baby Waddler Room.
- Soft tones, positive and respectful language were observed in interactions between the children in all the rooms. The staff were observed to use positive supportive language with the children to encourage them to complete a task e.g. "thank you good listening", "gentle hands", "can we not run inside it is dangerous" and "remember inside voice... is trying to sleep".

## Non-Compliance Information

1. In the Toddler Room at nappy changing the door to the nappy changing area was left open into the care room. This does not protect the dignity and privacy of the children.

## Corrective & Preventive Action submitted by the Registered Provider

### Corrective and Preventive Action

1. This issue was highlighted at the Service's Team Meeting held after the inspection. It was discussed with staff to ensure that children's dignity and privacy is paramount at all times. A notice has been placed in the room beside the Changing Area as a reminder that the door is to be kept closed at all times during Nappy Changing/Toileting. Staff collaborated to review the Nappy Changing/Toileting Policy. A newly Updated Nappy Changing/Toileting Policy is on display in the rooms.  
A small Notice was placed on the wall as a reminder to make sure doors are kept closed at all times.

### Supporting documentation submitted

Photographic evidence and copy of Nappy Changing Policy

## Summary Comment

The Inspectorate have reviewed the registered provider's response and supporting documentation. The non-compliance in Regulation 19 has been addressed.

## 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:

- In the Baby Waddler Room all highchairs observed were in good condition and were fitted with a safety harness.
- The external doors were appropriately secured to prevent children from exiting the service unsupervised.
- There was written documentary evidence of daily risk assessments in the service.
- Cleaning equipment was stored out of reach of the children.
- Low level furniture had rounded edges or corner protectors.
- Radiator surfaces were cool to touch as they were off during the inspection.

##### Infection Control:

- There were individual lidded storage boxes for the storage of the children's soothers.
- There was a constant supply of thermostatically controlled hot water, liquid hand soap and single use paper hand towels available to support effective hand washing throughout the service.
- Nappy changing practices observed were good with staff adhering to best practice guidelines when changing nappies.
- Tabletops were wiped down prior to lunch, snack times and after activities.
- Pedal operated bins were observed in use in the service and were appropriately maintained.
- Plastic covered furniture was in good condition with no tears to allow for effective cleaning.
- Staff when questioned were familiar with the cleaning procedures for the service in accordance with the services cleaning policy and best practice guidelines.

##### Safe Sleep:

- Ten-minute physical safe sleep observations were carried out as per best practice guidelines. These were also documented appropriately.
- Cot frames and cot mattress were clean and did not appear in a defective condition on visual inspection.
- The cot rooms were not used as storage areas.

#### Non-Compliance Information

## General Safety:

1. 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 7 staff members.

## Safe Sleep:

2. The service did not have an adult present at all times with children who were sleeping on daybeds in the sleep room off the Toddler Room which is at variance with safe sleep guidance.

## Corrective & Preventive Action submitted by the Registered Provider

### Corrective & Preventive Action

#### General Safety:

1. Applications were submitted to the Garda Vetting Bureau for the 7 staff members highlighted on inspection and were re-vetted along with all other members of the service ensuring that review dates will be the same for each member of staff and this will assist in keeping documents up to date in a time effective manner in line with the 3-year renewal period.

Internal Governance Structures were looked at and clear roles and responsibilities have been put in place. This will continue throughout the service, appointing more distinct Roles and responsibilities to ensure good practice and governance. Our Office Administrator has been officially assigned the maintenance and upkeeping of Records and Staff Files ensuring Garda Vetting/Training etc is kept up to date and reviewed periodically. Their job description has been updated to include these responsibilities.

#### Safe Sleep:

2. A staff member remains in the sleep room when there are children sleeping on daybeds. A staff meeting was held and Safe Sleep Practices were discussed highlighting the Tusla Inspectorate Guidance for Early Learning and Care Sector on Sleep Provision for Children Under 24 Months. The registered provider has reviewed the guidance from the Early Learning and Care Sector Sleep Provision Document and the Service Policy has been updated in collaboration with the room staff. Updated Policies are now displayed in the Rooms along with the Guidance Documents for Safe Sleep referenced above. This information was also emailed to all staff.

### Supporting documentation submitted:

Updated Garda vetting disclosures x 7 submitted.  
Copy of updated Safe Sleep Policy and evidence of policies emailed to staff.

## Summary Comment

The Inspectorate have reviewed the registered provider's response and supporting documentation. The non-compliances in Regulation 23 have been addressed. Implementation of corrective and preventative actions detailed will be assessed at the next inspection.

## 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) The registered provider ensured that there was a person trained in First Aid Response (FAR) for children, on the premises at all times. Five FAR certificates were reviewed.

(2)(a) and (b) A first aid box was available to the preschool children.