

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier: TU2019DY002

Name of Service: Hyde & Seek Childcare

Address of Service: 7-9 Prospect Avenue, Glasnevin, Dublin 9, Co. Dublin

Eircode: DO9 RFN4

Name of Registered Provider: Siobhan Davy

Service type: Full Day

Date(s) of Inspection:	05/09/2023
Day 1 of Inspection	
Day 2 of Inspection	6 September 2023
Day 3 of Inspection	10 October 2023

No of pre-school children:	AM	76	PM	65
Day 2	AM	71		
Day 3	AM	77	PM	66

Address of the Early Years Inspectorate:	Early Years Inspectorate 2 nd Floor, Unit 4/5 The Nexus Building Blanchardstown Corporate Park Ballycoolin Dublin 15 D15 CF9K
Inspection undertaken by:	Day 1 and 2: T. Nelson and E. Finnegan Hayes- Early Years Inspectors

	<p>Day 3: I. Cronin, S. Murray, T. Nelson</p> <p>National Inspection Manager, Inspection and Registration Manager, Early Years Inspector.</p>
--	---

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

Hyde and Seek Childcare is a full day care service located in Dublin 9 and is one of four service operated by the registered provider. The service is registered to provide early childhood education and care to a maximum of 111 children aged 0 to 6 years Monday to Friday from 7.30am to 6.30pm. The service participates in the Early Childhood Care and Education (ECCE) programme, which is delivered on a sessional basis in the morning from 9.15am to 12.15pm and offers a part-time and full-time service. The service also provides for school age childcare in the afternoon. Hyde and Seek operates from a single story purpose built premises with six care rooms to include the Baby Room (0 to 18 months), Tiny Tots 1 Room (1 to 2 years), Tiny Tots 2 (1 to 2 years), Toddler Room (2 to 3 years), ECCE Room (2.5 to 4 years) and Montessori Room (3 to 5 years). There are sanitary facilities located off the care rooms and a cot room located between the Baby Room and Tiny Tots 1. Other facilities include an office, kitchen and staff room. Fully enclosed outdoor areas are located off each of the care rooms.

Staffing

There are currently 27 staff employed by the service including the registered provider, the deputy person in charge, 20 childcare staff who work directly with the children, 2 relief staff members, a cook, an administration staff and a cleaner. The registered provider is supernumerary and manages oversight of the service. There were 23 staff present throughout each day of the inspection including the registered provider, the deputy person in charge, the cook and 20 childcare staff. In addition, directors of the company and an administration worker from another service within the company were present on Day 2 and 3 of the inspection.

Methodology

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

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

The findings on inspection are based on:

- Information obtained through examination of documentation
- Direct observation
- Discussion with relevant staff, the registered provider and company directors.

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

The inspection focused on an examination of compliance under:

- Regulation 9(1)(2)(a)(b)(c)(d)(3) (4) (7) Management and Recruitment
- Regulation 11(1)(4) Staffing Levels
- Regulation 16(1)(h)(i)(j)(k) Records in relation to Children
- Regulation 19(1)(b) Health, Welfare and Development of the Child
- Regulation 21 Equipment and Materials
- Regulation 22 Food and Drink
- Regulation 23 Safeguarding the Health, Safety and Welfare of the Child
- Regulation 32 Complaints

However, on the inspection of 5 September 2023 an additional non-compliance which posed significant risk was identified under Regulation 29 Premises. These findings are outlined within the relevant regulations within this report.

A sampling process was used to assess compliance under the following:

- Regulation 9(1),(2)(a)(b)(c)(d),(3) (4) (7) Management and Recruitment
- Regulation 16(1)(h)(i)(j)(k) Records in relation to Children
- Regulation 19(1)(b) Health, Welfare and Development of child
- Regulation 21 Equipment and Materials
- Regulation 23 Safeguarding the Health, Safety and Welfare of the Child

As a result, the scope of the inspection over three days included the Tiny Tots 1 and the Toddler Room on Day 1. Tiny Tots 1 and the Montessori Room on Day 2. The Baby room, Tiny Tots 1 and the Toddler Room only were inspected on 10 October 2023 which was day 3 of inspection. Regulation 11 was inspected across all rooms on all three days of inspection.

Inspection findings are documented in the inspection report which is first issued in draft format to the service with an opportunity to respond to any findings. Where statutory requirements are identified as not being met, the registered provider must demonstrate how they have rectified the non-compliance and will prevent any non-compliance from re occurring. The Corrective Action and Preventive Action plan (CAPA) will be used to inform decisions about compliance with regulatory requirements. Where the registered provider fails to meet the statutory requirements an escalation process may be commenced.

The inspectorate reserves the right to edit responses received for reasons including clarity, completeness and compliance with administrative and legal processes.

The contents of the report are compiled by the inspectorate body.

Additional Information

The first inspection was triggered by information received by the Inspectorate and was carried out over two days, on 5th and 6th September 2023.

A significant risk was identified under Regulation 23 on day one of inspection, on 5th September 2023 in relation to the temperature in rooms whilst children were sleeping. As the risk was deemed to pose a safety concern, an Immediate Action Notice was issued to the registered provider under Regulation 23 on 5th September 2023. This was responded to on the day of the inspection with additional actions and responses provided to the Inspectorate on 6th and 7th September 2023. The Inspectorate deemed this to be an adequate response to ensure safety of children.

It is acknowledged that at the time of the inspection in September, the Dublin region was experiencing unusually high temperatures for that time of the year which influenced the temperatures within the rooms. Providers are required to respond appropriately to these events.

Subsequent to the inspection of 5th and 6th September 2023, a review of information received by the inspectorate in relation to this service was completed and additional information was identified which triggered a third day of inspection. This was carried out on 10th October 2023. Practice areas relating to the information received, which triggered the inspections, were assessed under Regulation 9(7)(c), 16,19,22,23. In line with the Inspectorate's regulatory function, where appropriate, the information received was considered when observing practices and reviewing information provided. Any findings identified are demonstrated under the relevant regulations.

On day 3 of inspection a non-compliance was identified in relation to the recording of children's attendance in the service. This non-compliance was recorded under Regulation 23 as a safety concern existed in the event the premise needed to be evacuated and there was not an up-to-date record of who was present on site. This non-compliance in relation to the recording of children's attendance was identified on previous inspections on 26th September 2022 and 10th November 2022. This demonstrated an inability to maintain and sustain compliance as the previous corrective and preventive action plan submitted by the registered provider from the inspection of 10th November 2022 had failed.

Acknowledgments

The inspectors wish to acknowledge the cooperation of the children, registered provider, directors of the company and staff 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

On the inspection of 6th September 2023 the files of 18 staff were reviewed who were new to the service since the last inspection held on the 10th November 2022. On day 3 of inspection on 10th October 2023 the files of 2 new staff members who had just commenced employment were reviewed. The registered provider had completed the following checks:

- (2)
- (a) Twenty-eight validated written references were available from recent past employers.
 - (b) Twelve validated written references were available from a source other than a past employer.
 - (c) Completed Garda vetting disclosures were available in respect of the 20 staff members.
 - (d) Twenty adults who had lived outside of the state for six months or more as an adult had international police vetting from that state available for inspection.
- (3) There was documentary evidence in place that the checks were carried out prior to any person being appointed, assigned or allowed access to or contact with a child attending the pre-school service.
- (4) The 20 staff-who worked directly with children attending the service 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.
- (7)(a)(c) On day 1 and 2 of the inspection, the registered provider provided documentary evidence to show that staff were provided with appropriate information and training. For example:
- A sample of 19 files were reviewed for induction training, which included topics such as health and safety, fire safety information, respect for the child, child protection, policies and procedures, accidents, and complaints, policies and procedures.

Non-Compliance Information

(7)(a)(c) On Day 3 of the inspection, the inspectors found evidence that appropriate ongoing support and supervision was not consistent throughout the service. For example:

- Information reported by staff was inconsistent across the rooms sampled by inspectors. One staff member was not aware of the procedures in relation to alternative food provision at mealtimes. One staff member told an inspector that no alternative was available for children while another said there was.

- The training manager told an inspector that all staff received training in Children First however knowledge of this training was not evident when the inspector posed specific questions to a staff member which posed as a potential risk of safety to children in the event of any incident occurring. One staff member out of four in a room told an inspector that she had not completed training on the policies and procedures of the service and also had not completed training in relation to safeguarding of children.

Corrective & Preventive Action submitted by the Registered Provider

Corrective Action

Evidence was produced that the staff member in question had indeed completed training in Children's first (certificate shown to the inspection team) and our policies and procedures. It should be noted, staff member in question had previously worked as a room leader in a major Childcare service and is familiar with childcare policies and procedures.

The service believe the language barrier between the inspector and the staff member along with the terms used may have led to some confusion.

The service did offer to have the inspection team interview the staff member with the HR manager present. He spoke fluent Spanish and could have ensured the staff member understood the questions if there was any doubt.

This offer was declined by the inspection team.

Preventive Action

The staff member has left the service.

Our training procedures constantly evolve. The service have updated the healthy eating and nutrition policy to include a section on what to do in cases where children refuse food.

Supporting documentation submitted

No evidence submitted.

Summary Comment

The corrective and preventive action taken has 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.

(4) Subject to paragraph (5), where a registered provider contemporaneously provides-

(a) a sessional pre-school service, and

(b) a full day care service or a part-time day care service, or both, the minimum ratio of adults to children applicable for the duration of the sessional pre-school service in respect of the children attending that service shall be the ratio specified in paragraph (3).

Compliance Information

(1) Over three days of the inspection there were an adequate number of staff working with the children to provide for their care needs. In addition to the staff working directly with the children, there was a relief staff member, the registered provider, deputy person in charge, and an administration staff member available to provide support across the rooms were needed.

(4) The correct adult/child ratio was observed in the service throughout the inspection at all times, with a breakdown as follows on the morning of Day 1:

- Baby room - 2 adults to 7 children aged between 10 to 18 months.
- Tiny Tots 1 - 3 adults to 10 children aged between 1-2 years.
- Tiny Tots 2 - 3 adults to 15 children aged between 1-2 years.
- Toddler room - 5 adults to 18 children aged between 2 -3 years.
- ECCE room - 1 adult to 9 children aged between 2.5 and 4 years.
- Montessori room – 2 adults to 17 children aged between 3 -5 years.

The adult child ratios on the morning of Day 2 were maintained as follows;

- Baby room - 3 adults to 8 children aged between 10 to 18 months.
- Tiny Tots 1 - 4 adults to 10 children aged between 1-2 years.
- Tiny Tots 2 - 2 adults to 10 children aged between 1-2 years.
- Toddler room - 4 adults to 18 children aged between 2 -3 years.
- ECCE room - 1 adult to 9 children aged between 2.5 and 4 years.
- Montessori room – 2 adults to 16 children aged between 3 -5 years.

The adult child ratios on the morning of Day 3 were maintained as follows;

- Baby room - 3 adults to 7 children aged between 9 to 18 months.
- Tiny Tots 1 - 4 adults to 11 children aged between 1-2 years.
- Tiny Tots 2 - 3 adults to 15 children aged between 1-2 years.
- Toddler room - 4 adults to 18 children aged between 2 -3 years.
- ECCE room - 1 adult to 9 children aged between 2.5 and 4 years.
- Montessori room – 2 adults to 17 children aged between 3 -5 years.

Part IV – Information and Records

Regulation 16 – Record in relation to pre-school service

(1) A registered provider shall ensure that a record in writing is kept of the following information in relation to the service:

- (h) details of attendance by each pre-school child on a daily basis;*
- (i) details of staff rosters on a daily basis;*
- (k) details of any accident, injury or incident involving a pre-school child attending the service.*

Compliance Information

- (1)
- (h) Attendance records detailing the arrival and departure of the children on a daily basis were maintained.
- (i) A record was maintained of the staff roster and both current and retrospective rosters were reviewed by inspectors and found to be in line with regulation.
- (k) Inspectors reviewed all accident and incident reports from January to September 2023 all of which had been adequately documented. Accident and incident reports were sent to parents via the online application which parents were also requested to sign electronically to ensure that they are aware of the incident.

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,

(b) appropriate and suitable care practices are in place in the pre-school service, having regard to the number of children attending the service and the nature of their needs.

Compliance Information

- (1)
- (a) The child's learning, development and wellbeing was facilitated through the following:
- Information on the child's day such as sleep, food, toileting and nappy changing and other relevant information was communicated via an online software application. Staff reported that conversations could be facilitated with the parents and the care room leader at drop off and collection. Parents who spoke with inspectors on the third day of inspection were satisfied with the care provided by the service.
 - The service had recently held a grandparent's day where grandparents came to visit, and photographs of this activity were displayed in the rooms. Posters inviting parents to a movie night in the service were displayed at the entrance of the service.
- (b) Care practices were observed, as evidenced by the following:
- Routines were displayed in the rooms which were observed to be reflective of the practice in the rooms on the days of inspection. For example, practices around feeding and nappy changing were observed to be timely and supportive. Policies in relation to nappy changing, feeding and behaviour management were reflective of inspectors observations over the three days of inspection.
 - Activities provided to the children in the rooms were suitable to the age and stage of development of the children. For example, tabletop activities, painting, bubble play and access to outdoor play.
 - Transitions were observed to be timely. For example, after sleep time in the Toddler room on day 1, children were observed to be given the time to wake up at a pace which suited their needs and spend time sitting on their low beds before nappy change time.

- Children were supported to regulate their behaviour. For example, on the first day of inspection when a child in the Montessori room was upset, a distraction strategy was used and the child was taken outside with a staff member where they were observed to engage in conversation with the staff member after a few minutes.

Part V – Care of Child in Pre-school Service

Regulation 21 – Equipment and materials

A registered provider shall ensure that there is adequate and suitable furniture, play and work equipment and materials available on the premises of the pre-school service.

Compliance Information

The following were examples of the adequate and suitable equipment and materials available:

- The tables and chairs were at a height suitable for the age and stage of the children in the rooms and the toys and equipment were displayed on open shelves which were visible to the children.
- The furniture and equipment were observed to be well maintained, durable and easy to clean.
- There was a range of equipment and play materials available to the children according to their age and stage of development including role play, creative play and constructive play experiences and equipment to support their fine and gross motor skills and physical development.

Non-Compliance Information

On the inspection of 5th September 2023, the selection of books which were accessible to the children in the Toddler room were observed to be maintained in poor condition, for example torn or missing pages. This could potentially impact engagement of children in early language and literacy experiences.

Corrective & Preventive Action submitted by the Registered Provider

Corrective Action

Given that children of this age group are very tactile in their learning, books in the Toddler room will experience tears as the books are at the children's level and accessible to them at all times. The children may use them as early literacy tools and also as objects of play causing them to get some tears. As seen on the day of inspection there is a large open storage shelf within the toddler room containing a variety of new books that the staff can use to replenish the bookshelf when required. The staff in the room have been reminded to monitor the books in the bookshelf and replace them with the books from the wall shelf as required

Preventive Action

The service have added a bookshelf check to our daily check list in the toddler room. The service health and safety officer will review the books and renew any torn books monthly.

Summary Comment

The corrective and preventive action taken have addressed the non-compliance identified on inspection.

Part V - Care of Child in Pre-school Service

Regulation 22 – Food and drink

A registered provider shall ensure that adequate and suitable, nutritious and varied food and drink is available for each pre-school child attending the pre-school service.

Compliance Information

This regulation was not inspected on day one and two of the inspection. The following examples were found on Day 3 of the inspection:

- The service followed a four-week menu plan and prepared all meals in the service kitchen in line with the service Healthy Eating and Nutrition policy. A review of the supply of food available in the kitchen was reflective of the menu plan.
- Food offered throughout the day included breakfast on arrival, a morning snack at approximately 10.00am, a hot meal at approximately 12.00pm, a tea at approximately 3.00pm. On the third day of inspection, inspectors observed that the children were given toast for morning snack, beef chilli con carne with rice for lunch and fresh berries with yogurt for tea. Additional portions were available.
- Drinking water was freely available in the care rooms sampled throughout the inspection.
- Appropriate utensils for the age and stage of the children were provided, and staff were observed to support children to self-feed. Children that required assistance from staff received support.

Non-Compliance Information

On Day 3, the management of alternative food options was found not to be consistent throughout the service.

For example:

1. The service did not ensure the consistent, accurate, contemporaneous recording and sharing of information with parents when children did not eat the food provided. Inaccurate recording in relation to dietary intake created a potential risk of children not receiving an adequate nutritional intake for their day in the service as some children were present from 7.30am up until 5.30/6pm. For example,
 - Recorded information sent to the parent for a child who had not eaten any lunch outlined they had eaten some lunch.
 - In another room it was recorded via the online application submitted to the guardians that a child had ate all of the chilli con carne served for lunch which did not reflect the alternate meal that was given to the child which comprised of 2 plain crackers followed by berries and yoghurt for tea. A staff member, who spoke with inspectors in relation to what action is taken should a child refuse to eat the hot meal informed the inspector that the meal would be offered 30 minutes to an hour later. This corresponded with the Healthy Eating and Nutrition policy of the service but was not carried out in practice as observed by inspectors. Children in Full Day Care should have at least two meals and two snacks offered to them, one of which is a hot meal. If a child does not want the food offered for any reason, a healthy alternative should be offered.

Corrective & Preventive Action submitted by the Registered Provider

Corrective Action

- Both children had been offered a dinner, an alternative dinner and one child a bottle and the other a snack, it has always been our guideline, since discussions with Tusla staff, to get something into the children rather than nothing. The staff have been reminded to individually log each child's meal intake rather than grouping them to ensure accurate food logs.

Preventive Action

- Retraining regarding logging children's records individually and added to the Healthy eating policy.
- The service have some children who prefer a plainer diet and their parents are aware of this, as seen on the application during the inspections the parents were made aware of what they had eaten, the service will always encourage children to eat the main lunch or alternative lunch provided.

Supporting documentation submitted

No evidence submitted.

Summary Comment

The corrective and preventive action taken have addressed the non-compliance 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

The following measures were observed to be in place to safeguard the health, safety and welfare of the children:

General Safety:

- The main entrance to the service was operated by an electronic door release system and was managed and monitored by staff restricting unauthorised persons from gaining access and preventing children from exiting the service unsupervised.
- All cleaning agents and sharp equipment were stored out of reach of the children in locked presses or on high shelves.
- Toys, furniture and equipment were in a good state of repair.

Infection Control:

- The premises were in a clean and hygienic condition and documented up to date cleaning records were available and displayed in the premises.
- Liquid soap, thermostatically controlled warm water and single use hand towels were available at all wash hand basins used by the children and the staff members.
- Nappy changing procedures were observed to be carried out in accordance with appropriate infection control practice, with children's creams, nappies and clothing individually labelled and stored in the child's labelled box. This was observed in three care rooms sampled by inspectors.
- Children were observed to handwash following a period of outdoor play and before meals.

Safe Sleep:

- A log was maintained where the temperature of the room and the colour, breathing and position of sleeping children were checked every 10 minutes.

Non-Compliance Information

Infection Control:

The potential risk of infection was increased as a result of the following:

1. Whilst nappy changing procedures were adequate the nappy disposal system in the Toddler Room and the Montessori Room did not support appropriate infection control practice. For example:
 - Soiled nappies were observed in an unsealed plastic bag hanging from the nappy change unit in the Montessori sanitary accommodation on both days of the inspection. This was not in line with the service infection control policy.
 - The nappy disposal system in the Toddler room required repeated hand contact with the unit to dispose of the nappy. On the first day of inspection, this waste disposal unit was observed to have no lid in place while it contained soiled nappies which created a potential risk of cross infection.

On the third day of inspection, it was observed that the nappy disposal system in the Toddler room had been replaced with a foot pedal operated disposal system which was deemed adequate.

2. Two unlabelled soothers were observed to be stored on an open shelf in Tiny Tots 1. Staff confirmed these soothers were in use by two of the children in the room. Soothers should be stored in labelled, lidded containers to prevent cross contamination.

Safe Sleep:

3. During the inspection of 5th and 6th of September 2023 the temperature of two rooms was not in line with current safe sleep recommendations and was not maintained between 16-20°C for children under one year, and 18-22°C for children over one year whilst children were sleeping. This was not in line with the service safe sleep policy which stated the rooms must be maintained between 16-20°C whilst children were sleeping.

The inspectors recorded the following temperatures on Day 1:

Room	Time	Temperature in °C	Required Temperature °C
Montessori Room	12.57pm	27.1°C	18-22°C
Toddler Room	12.55pm	24.8 °C	18-22°C

An Immediate Action Notice(IAN) was issued to the registered provider in respect of the high temperature of the Montessori Room on the 5th September 2023 due to the risk of hyperthermia while children were

sleeping. This was issued under Regulation 23 Safety. A response was received to the inspectorate on the 6th September 2023 detailing the measures the service would take to reduce the risk to children in high room temperatures including the removal of outer or heavy clothing, and no use of blankets for sleep time.

On 6th of September the room temperature in the cot room while children were sleeping was recorded at 25°C at 12.30pm and the following was observed:

- 2 children were observed to be sleeping in sleep bags.
- 7 children were observed to sleep wearing long leg bottoms.
- 5 children were observed to sleep wearing long sleeved tops.

The IAN remained in place and a further request for measures to mitigate risks identified was issued to the registered provider on the 6th September 2023. Evidence was submitted on 7th September 2023 which was deemed adequate by the Inspectorate.

It is acknowledged that the weather was warm for Autumn, and staff took steps to cool the rooms. On 6th September 2023, staff were observed to remove clothing from sleeping children in order to cool them down.

Fire Safety:

4. The details of the attendance of the children in Tiny Tots 1 room and the Montessori Room were not accurately recorded in the attendance log on the 5 of September 2023. For example:
 - A child who had been present in the service since 9.15am had left Tiny Tots 1 room for an appointment outside the service at 10.30am and returned to the service at 11.45am. This child had not been marked as absent for this time.
 - In the Montessori room, three children who staff had said left at 12.15pm, 12.35pm and 12.40pm respectively were still marked as present when the inspector reviewed the attendance log at 14.09pm.
 - A child who had arrived to the Montessori Room at 12.30pm was not marked as present when the inspector reviewed the attendance log at 14.09pm.

It is acknowledged the attendance log was updated in the Montessori when brought to the attention of staff.

Contemporaneous accurate attendance logs must be maintained to support the safe evacuation of children in an emergency given the potential risk of children being unaccounted for in the event of an emergency.

Action submitted by the Registered Provider

Corrective & Preventive Action

Infection Control:

1. **Corrective action:** New changing units have been purchased. Staff forgot to dispose of the nappy bag in the bin that was available the toilet, staff were reminded to always directly dispose of nappies/nappy bags after nappy changing.

Preventive action:

Retraining on infection control policy.

2. **Corrective action:** The two soothers have been labelled and placed in their soother boxes on the soother shelf.

Preventive action: Soother checks has been added to the daily health and safety checklist for each room.

Safe Sleep:

3. **Corrective actions and preventive action** for Immediate action notice on 6 September 2023: the steps to be taken in extreme warm weather is as follows:
 - No blankets to be used for sleep time.
 - Outer clothing to be removed for sleep time.
 - Outer/heavy clothing to be removed in the care rooms.
 - Children will be given additional drinks.
 - To increase air circulation by opening windows, doors, blinds, use of fans.

Further corrective and preventive action submitted on the 7th September 2023 detailed that children would no longer use sleep suits for sleep during warm weather. Staff have been updated with these new procedures.

Fire Safety:

4. **Corrective action:** A child will only enter or leave their room once the child's attendance has been marked in or out on the app, to ensure the app is updated immediately.

Preventive Action: Training on the above has been completed with the staff and a message has been sent to parents informing them of the new procedure which was provided to the inspectorate.

Supporting documentation submitted

Infection Control:

1. No evidence submitted.
2. Evidence of soother checks on updated daily health and safety checklist.

Safe Sleep:

3. Evidence of messages to parents regarding new sleep updates in warm weather.
Evidence of staff sign-off on memo regarding sleep updates in warm weather.

Fire Safety:

4. Evidence of message to parents regarding new drop off and collection update.
Evidence of staff sign-off on memo regarding updates regarding attendance log.

Summary Comment

The inspector has reviewed the actions taken and evidence submitted. The non-compliances identified under Regulation 23 have been addressed

Part VII - Premises and Space Requirements

Regulation 29 – Premises

A registered provider shall ensure that the premises of the service are-
(c) kept adequately lit, heated and ventilated

Non-Compliance Information

(c) The temperature of care rooms on 5th of September 2023 exceeded the recommended ambient temperature of 18-22 °C in a care room as follows:

Room	Time	Temperature in °C	Required Temperature °C
Tiny Tots 1	12.13pm	24.5°C	18-22°C
Montessori Room	11.22am	26.3 °C	
	12.57pm	27.1°C	
Toddler Room	11.50am	25.4°C	
	12.55pm	24.8°C	

High room temperatures created an uncomfortable play space for young children and potentially increased the risk of dehydration and a risk of hyperthermia for young children.

Corrective & Preventive Action submitted by the Registered Provider

Corrective Action

- No blankets to be used for sleep time.
- Outer clothing to be removed for sleep time.
- Outer/heavy clothing to be removed in the care rooms.
- Children will be given additional drinks.
- To increase air circulation by opening windows, doors, blinds, use of fans.

Preventive Action

The registered provider has engaged the services of a company to survey to premises for the purposes of plans for air conditioning to be installed at a future date.

Summary Comment

The inspector has reviewed the actions submitted. The non-compliances identified under Regulation 29 has been addressed.

Part VIII - Notifications and Complaints

Regulation 32 – Complaints

- (1) A registered provider shall ensure that the complaints policy of the service specifies-
- (a) the procedure to be followed by a person for the purposes of making a complaint in relation to the service,
 - (b) the manner in which such a complaint shall be dealt with, and
 - (c) the procedures for keeping a person who makes such a complaint informed of the manner in which it is being dealt with.
- (2) A registered provider shall ensure that-
- (a) a record in writing is kept of a complaint made to the provider in respect of the pre-school service, and
 - (b) the complaint is duly dealt with in accordance with the provider's complaints policy.
- (3) A record in writing referred to in paragraph (2)(a) shall-
- (a) include the nature of the complaint and the manner in which the complaint was dealt with, and
 - (b) be open to inspection on the premises by an authorised person.

Compliance Information

(1) (a)(b)(c) The registered provider had a complaints policy.

Non-Compliance Information

(2)(a)(b) Following discussions with the registered provider and following review of documentation, the inspectors found that the manner in which complaints were dealt with required improvement in order to provide evidence of the response to the complaint. On day 3 of the inspection records were requested of all complaints received from January 2023 to the date of inspection and any associated investigation reports. Three files were made available, and inspectors were told that any other complaints were verbal and are not recorded as per the complaints policy of the service.

- Three documented complaint files were made available to support the review of these particular complaints received by the service which required a formal resolution. Whilst there was evidence of meetings held with the parents and statements from staff, there was no documentation to demonstrate that the complainants were informed of the outcomes of internal investigations held or what action they could take if they were dissatisfied with the outcome of the investigation. Failure to inform the complainant formally of the outcome of the complaint can lead to ambiguity between the service and the complainant.

(3)(a)(b) A complete record in writing was not maintained of the nature of the complaint and the manner in which the complaint was dealt with. Records reviewed did not demonstrate that complaints made had been closed out as there was no evidence of investigation outcomes having been provided to parents.

The complaints policy reviewed by inspectors outlined that a register of complaints will be maintained for two years. This register was not provided to the inspection team.

Corrective & Preventive Action submitted by the Registered Provider

Corrective Action

(2)(a)(b) It is the intention that informal complaints are not documented and only become formal when there is a written complaint. Informal complaints are noted in our compliment and complaints book for reference in all services, the purpose behind this is to ensure the manager is aware in case a parent gets in contact.

The complaints were from parents who did not keep to their signed contractual agreement which laid out the terms and conditions of the service. The complainants had left the service and therefore there was no rationale in continuing to engage further.

(3)(a)(b) This appears to be a rewording of the non-compliance (2)(a)(b) with the addition of a statement that “this register was not provided to the inspection team”.

This register was never requested during the inspection, it was not on the list of requested documents nor the supplemental list. Tusla agree it was not asked for so we cannot accept this non-compliance.

Preventive Action

Added a section, closing summary, to the complaints log to note the how or if required, why the complaint is closed off.

Supporting documentation submitted

No supporting evidence submitted.

Summary Comment

Information received following the inspection demonstrated that the service hold a register/log of formal complaints made. This regulation will be reviewed at the next inspection.