

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2020FL002
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Name of Service:	Just Like Home
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Address of Service:	Unit 2 Block B, Post Office Road, Lusk, Dublin 15, Co. Dublin
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Eircode:	K45 E290
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Name of Registered Provider:	Natalia Baczek
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Service type:	Full Day, Part Time, Sessional
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Date of Inspection:	12/06/2023
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No of pre-school children:	AM	13	PM	11
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Address of the Early Years Inspectorate:	180-189 Lakeshore Drive, Airside Business Park, Swords, Co Dublin K67 Y5C6
Inspection undertaken by:	AM Coyle & S Taaffe
Title:	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
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Description of service

Just like Home is an early years' service located in Lusk, Co Dublin and is registered to accommodate pre-school children from 1 to 6 years of age on a sessional, part-time and full day care basis. The service is registered to operate from 7.15am to 6pm each weekday, with eligible pre-school children facilitated to participate in the Early Childhood Care and Education (ECCE) scheme from 9.00am – 12.00pm daily for 38 weeks annually. The service is located in a ground floor converted commercial property with 3 care rooms in operation, namely the Wobbler room, the Toddler room and the Preschool room.

Staffing

The service employs 7 staff members which includes a service manager who coordinates the day-to-day operational management of the service. Six staff members work directly with the children and one staff member is involved in the preparation and cooking of food. The registered provider is not rostered to work in the service but is present regularly in a supportive capacity.

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, premises, and facilities. The inspections 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.

Additional Information

This unannounced inspection was carried out in response to feedback and concerns received by the Early Years Inspectorate.

An immediate action notice was issued to the registered provider on the 12/06/2023 in relation to the unavailability of Garda vetting disclosures for 2 staff members in the service. A response was received within 24 hours confirming that neither staff member would be present in the service until Garda vetting was available for them. A Garda vetting disclosure was received for 1 staff member on the 14/06/2023.

An immediate action notice was issued to the registered provider on the 12/06/2023 as there was no staff member present in the service on the day of inspection who held in-date First Aid Response (FAR) training. One member of staff in the service has FAR training. A prompt response was received from the registered provider within 24 hours confirming that 2 staff members have been enrolled in FAR training, scheduled to take place in June 2023.

An immediate action notice was issued to the registered provider on the 13/06/2023 in relation to the safety and welfare of the children attending the service. A response was received from the registered provider on the 14/06/2023.

A regulatory compliance meeting was held with the registered provider on August 4th, 2023.

Acknowledgments

The inspectors wish to acknowledge the cooperation of the registered provider, 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.
- (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;

Compliance Information

(1)(a) The deputy person in charge was the designated person in charge of the service and there was a named person available to deputise as required.

(b) The deputy person was present and in charge of the service when the inspectors arrived unannounced on the morning of the inspection. The registered provider arrived in the service during the inspection and remained in the service for the duration of the inspection.

The files for 7 staff and the registered provider were reviewed, six staff work directly with the pre-school children attending the service.

(2)(a) &(b) Two written references were available for the registered provider and 1 member of staff.

Two written and appropriately validated references were available for 3 members of staff.

(c) Garda vetting disclosures were available for the registered provider and 5 staff members whose files were reviewed.

(d) International police vetting was available for 2 staff members who had lived outside the Irish state as adults for more than 6 consecutive months.

(4) Documentary evidence was available to confirm that 6 of the staff members whose files were reviewed and who work directly with children in the service held an appropriate childcare qualification at Level 5 or higher on the National Framework of Qualifications or a qualification deemed by the Minister to be equivalent.

Non-Compliance Information

(2)(a) &(b) Three staff members had no validated written references on file.

The references that were on file for one staff member had not been validated with the person who provided the reference.

(c) Garda vetting disclosures were not available for 2 staff members, one of whom was working directly with the children.

(d) International police vetting was not available for 1 staff member who had lived outside the Irish state for more than 6 consecutive months as an adult.

(3) Following a review of the staff files it was apparent that 4 staff members who work directly with the children had commenced working in the service in advance of Garda vetting procedures being available.

(4) Documentary evidence was not available to confirm that 1 of the staff members whose file was reviewed and who works directly with children in the service held an appropriate childcare qualification at Level 5 or higher on the National Framework of Qualifications or a qualification deemed by the Minister to be equivalent.

(7) On discussion with staff members it was confirmed that whilst staff members were provided with the service's policies on their commencement of employment there was no system in place to ensure that staff had read the policies and were familiar with the content of the policies.

Corrective & Preventive Action submitted by the Registered Provider

Corrective Action

(2)(a) & (b) All staff files have been checked to ensure that all required documents are in place. The three of staff members has provided references. All references have been validated with the person who provided them.

(c) Garda vetting application for one staff member is already on file. The other application was sent immediately after inspection. One staff member without garda vetting is not permitted in the creche.

(d) International police vetting has been provided by the staff member and is now available in the file.

(4) There is a letter provided by staff member stating she has finished a course of level 5,6 and 7. The document was available on the day of inspection. The staff member is currently completing stage 4 (level 8) of the academic year. Staff member was on the notice period and her last day was 23/06/2023.

(7) Staff members will have an opportunity to familiarised themselves again with all policies and procedures. There will be a training provided to all staff members to discuss all policies and procedures. All policies and procedures are available at any time for staff members in the creche's office.

Preventive Action

The staff files will be checked on the quarterly basis, or earlier, if necessary, to ensure that all necessary documents as required are held in files. Management will ensure new staff members have all relevant documentation before commencing work at our service. There is system in place for training regarding policies and procedures, required documentations for new and current employees.

Policies and procedures will be followed and reviewed on the regular basis – every three months. Staff will have regular trainings regarding policies and procedures and access at any time, if requested.

There is a system in place for every staff member commencing work and during employment to update staff on policies and procedures. Management have created checklists for staff members commencing work and during employment. (*Checklist for staff team member and Induction checklist for new staff team members*).

Policies and procedures will be reviewed by management every three months and also will be brought to staff member's attention on regular staff meetings.

Supporting documentation submitted

Validated written references for 4 staff members.

Garda vetting for 2 staff members.

International police vetting for 1 staff member.

Qualification for 1 staff member.

Summary Comment

The evidence submitted by the registered provider in relation to regulation 9 – Management and recruitment has been reviewed and accepted.

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 period of inspection there was an adequate number of adults working directly with the children attending the pre-school children.

(2) On the day of inspection, the following adult to child ratios were observed when the service was operating at capacity:

In the Wobbler room there were 2 children aged 18 months to 2 years being cared for by 2 adults.

In the Toddler room there were 5 children aged 2 years 5 months to 3 years 5 months being cared for by 2 adults.

In the Preschool room there were 6 children aged 3½ years to 5 years being cared for by 1 adult.

Non-Compliance Information

(8) The registered provider did not ensure that there were 2 adults present in the service at all times. The staff roster indicated that one staff member only is present in the service from 7am to 8am or 8:30am on a daily basis. This non-compliance was identified at the last inspection of the service on the 07/05/2021 and the registered provider provided written assurances in the corrective and preventative actions that the non-compliance had been addressed; however, these actions have not been sustained.

Corrective & Preventive Action submitted by the Registered Provider

Corrective Action

(8) The staff roster has been reviewed to ensure that there are 2 staff members present in the service at all times.

Preventive Action

(8) The staff roster will be checked on a daily basis. This will be implemented and monitored by the service manager.

Supporting documentation submitted

Copy of staff roster confirming 2 adults are in the service at all times.

Summary Comment

The evidence submitted by the registered provider in relation to regulation 11 - Staffing levels has been reviewed and accepted.

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;

(g) the policies, procedures and statements the service is required to maintain in accordance with Regulation 10;

Compliance Information

(1) The information detailed in sub-section (1)(a) of this regulation were maintained in 2 of the 8 files reviewed in the service.

Non-Compliance Information

(1)(a) There was no recorded history of past employment and relevant experience available for inspection for 6 out of the 8 files reviewed in the service. Therefore, it was not possible to determine whether the available references had been obtained from their most recent employers or whether police vetting from other jurisdictions was required, in accordance with Regulation 9(2)(a), (b) and (d).

(g) Following an incident that occurred in the garden of the service on the 07/06/2023 the steps in the services Accident and Incident policy were observed not to be followed as evidenced by the following:

- An incident report detailing the information regarding the incident was not completed.
- An incident report was not shared with the child's parents and staff members confirmed that the parents were not informed of the incident when they collected the child from the service on the 07/06/2023 or subsequently.

Corrective & Preventive Action submitted by the Registered Provider

Corrective Action

(1)(a) Staff members have provided relevant documents and are now available in the file.

(g) An incident report detailing the information regarding incident on the 7/06/23 has been completed and shared with child's parents.

Preventive Action

The staff folders will be reviewed on an annual basis, or sooner, if necessary, to ensure that all necessary documents as required are held in files. This will be monitored by service management. Policies and procedures will be reviewed on the regular basis. Management will make sure all policies and procedures are followed.

Supporting documentation submitted

Six curriculum vitae.

Summary Comment

The evidence submitted by the registered provider in relation to regulation 16 – Record in relation to pre-school service has been reviewed and accepted.

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

(3) A registered provider shall ensure that no practices that are disrespectful, degrading, exploitive, intimidating, emotionally or physically harmful or neglectful are carried out in respect of a pre-school child whilst attending the service.

Compliance Information

(1)(a) The following observations were made on how each child's learning, development and well-being was facilitated within the daily life in the service:

Basic needs:

- The service provides all meals and snacks to children attending the service on a full day care basis. The children throughout the service were encouraged to be independent with eating with assistance and support provided as required.
- Nappy changing occurred at scheduled times and more frequently as required throughout the day. Staff members engaged positively with the children during this time using it as an opportunity for one-to-one interactions with the children. Children who were toilet trained were encouraged to use the toilet independently with support provided as required.

- The children in the Wobbler room were placed to sleep in cots which were located in a designated area of the care room and the children attending the Toddler room were placed to sleep on sleep mats on the floor of the Wobbler room after lunch. The staff member in the Wobbler room stated that if children required sleep at other times this would be facilitated.
- The children attending the Toddler room and the Pre-school room were facilitated in spending time in the outdoor area on the day of inspection once it stopped raining in the late afternoon.

Supporting relationships around children:

- The staff members in the Wobbler room and Preschool room demonstrated warmth and sensitivity in the interactions with the children. The staff member in the Wobbler room was observed sitting on the floor and supporting the children's play through using gentle tones and chatting to the children as they played.
- A daily record of the children's feeding, nappy changes, activities and sleep is maintained for the children and shared verbally with parents when the children are being collected.
- Parents and guardians were welcomed to the service at collection time. Staff members took the opportunity to update parents and children on the children's day in the service.

Physical and material environment:

- The tables and chairs provided throughout the care rooms were suitable to the age and stage of the children attending the individual care rooms.
- In all rooms, materials provided were accessible to children on low level shelves allowing children to easily choose toys and activities.
- The Preschool room was equipped with play materials to support fine motor development. These included jigsaws, threading equipment, blocks, pegs and peg boards, and a small range of wooden Montessori equipment.
- A suitable number of books were provided and accessible to the children in the Preschool room and the Toddler room.
- The outdoor play area located to the rear of the premises was fully enclosed by the walls of the premises and tall fencing. The surface consisted of artificial grass and play equipment included self-propel cars, tricycles, portable rocking toys, a plastic playhouse, two wall mounted sensory boards with a range of tactile squares and switches, and a wooden outdoor kitchen positioned under a small lean-to structure covered by rigid plastic sheeting.

Non-Compliance Information

Basic needs:

1. The children attending the Wobbler room had their nappies changed at 10:35am with their vests and upper body clothing only replaced afterwards. The children did not have their footwear or other clothes replaced. The staff member stated that this was done in preparation for the children going to bed after their dinner at 11am. This practice does not afford children dignity and respect.

Physical and material environment:

2. The interest areas in all three care rooms were poorly resourced. For example, the kitchens had no associative equipment such as play crockery or cooking utensils for the children to extend their play. With the exception of the play kitchens there were no further areas of interest provided in the care rooms.
3. There was a lack of sensory or wooden materials available for the children to use, there were no sand, water or other materials provided for the children to enjoy hands on sensory play experiences either in the care rooms or in the outdoor area of the service.
4. There was no chair available in the Wobbler room for the staff member to nurture and comfort the children.

Programme of Activities and its Implementation:

5. The inspectors were informed that an individualised care plan had not been developed for a child who may at times require additional support from staff members when in attendance in the service, taking account of the child's strengths, interests and preferences in order to facilitate meaningful interactions and activities.

(3) During the inspection one staff member did not clearly demonstrate knowledge of effective strategies to promote children's positive behaviour. When asked by the inspectors to describe how a child might be supported in the event that they became emotionally dysregulated, this staff member outlined that supportive physical contact such as hand holding or hugging would be withheld in these situations, even if actively sought by the child during an outburst or when they settled afterwards, in order to avoid 'rewarding bad behaviour'. This does not display warmth and collaborative engagement with all children and particularly when a child is clearly displaying that they need reassurance and comforting.

This practice is at variance with the service's behaviour management policy which states that staff will always comfort an upset child and that staff show empathy to the feelings which the child maybe experiencing.

Corrective & Preventive Action submitted by the Registered Provider

Corrective Action

Basic needs:

1. Wobbler and toddler staff members were advised to start nappy changing routine after dinner time and to follow their daily routine.

Physical and material environment:

2. The service provider will provide all rooms with relevant toys and materials, different type of open – ended, sensory materials will be provided also in cooperation with parents.
3. Staff members were advised to use more sensory materials for children – water/sand play, playdough and many other on daily basis. There will be sensory play corners/materials available in each room and in the garden area.
4. There will a chair provided in the wobbler room.

Programme of Activities and its Implementation:

5. Care plan for a child who may at times require additional support from staff members has been created in collaboration with parents.

(3) Staff member was advised to follow children's needs and demonstrate good practise towards children.

Preventive Action

Management will make sure each room's routine is followed. Manager of the service will ensure that all practices afford children well-being and safety. Service management will ensure there are different types of toys and materials provided to follow children's interest and needs. Management will ensure children's needs are met. Key person and service manager will cooperate with parents. The service provider and manager have organized a meeting to discuss children's wellbeing and development. Staff members will be offered trainings to support children's needs.

Supporting documentation submitted

Photographs of interest areas and resources in care rooms.

Photograph of adult chair in Wobbler room.

Care plan for child.

Summary Comment

The evidence submitted by the registered provider in relation to regulation 19 - Health, welfare and development of child has been reviewed and accepted.

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 doors leading into the service were appropriately secured. The service was accessed through a call bell which was operated by staff members.
- Cleaning agents were stored safely out of the reach of children.
- Emergency exits were unobstructed.

Infection Control:

- Thermostatically controlled warm water, liquid soap and paper towels were available at the wash hand basins throughout the service to support hand hygiene.
- Overall, the service was maintained in a clean and hygienic condition.

Administration of Medication:

- Medication was not required to be administered during the inspection. Medication was stored safely out of reach of the children.

Safe Sleep:

- All children less than 2 years of age in the service had access to a standard cot to sleep in.

Non-Compliance Information

General Safety:

1. A child attending the Wobbler room was placed to sleep drinking a bottle of milk. This is a choking hazard.
2. The kitchen door was propped open throughout the inspection allowing a child to potentially access the area which contains unsafe objects and is also a fire safety risk in the event of a fire starting in the kitchen.

Infection Control:

3. Hand washing practices were found to be inadequate and a source of cross contamination, the following are examples of poor hand washing practices were observed on inspection:
 - The children in the Wobbler room did not have their hands washed before eating.
 - Some children did not have their hands washed after they had their nappies changed.
 - Staff members were observed wiping children's noses without washing their hands afterwards.
4. The nappy changing mat was not cleaned in between the children having their nappies changed or on completion of nappy changing.
5. The nappy changing mat was torn with foam exposed which did not facilitate effective cleaning of the mat. The area beneath the nappy changing mat was dusty and dirty.
6. Seamed polytene gloves were used for nappy changing which are unsuitable to the increased risk of the gloves splitting.
7. The nappy changing area was not adequately ventilated on the day of inspection resulting in a foul smell in the area. The ventilation in the area was not activated and furthermore the air vents were observed to be congested with dust.
8. In the Preschool room the children's morning snacks which they brought with them from home and contained perishable items including meat and dairy products were stored in the children's bags and not placed in the fridge on arrival to the service. This increased the risk of bacteria multiplying to levels which could result in food poisoning.
9. Children's play equipment including a number of pop-up tents and boxes of toys were stored in the staff toilet. This was unhygienic and posed a risk of cross-infection.

Safe Sleep:

10. In the Wobbler room the children's sleep mats were not positioned 50cm apart which is required for infection control purposes and to allow safe access to sleeping children, the sleep mats were located between 25cm to 40 cm apart.
11. Two children attending the Wobbler room were placed to sleep at 11am and the sleep checks were not commenced in a timely manner. At 12:05pm the sleep checks had not commenced. Sleep checks are required to be carried out at 10-minute intervals from the time that children are placed to sleep.

Action submitted by the Registered Provider

Corrective Action

General Safety:

1. The staff member was advised to put children to sleep with safety manners. Milk will be given to children before sleep time.
2. The kitchen door will be kept closed at all the time. Staff working in the kitchen was advised to follow procedures.

Infection Control:

3. The staff members were advised to follow hand washing routine.
4. Staff members using nappy changing room will ensure that mat is clean after each use.
5. The owner will provide new changing mat. Staff members using nappy changing room will ensure that the area is kept clean at all the time .
6. The owner will provide appropriate gloves.
7. Service provider will ensure there is adequate ventilation in nappy changing room. The air vents were cleaned.
8. Snacks brought from home will be placed in the fridge immediately after children's arrival.
9. All equipment were removed from staff toilet area.

Safe Sleep:

10. The mats were positioned at the recommended distance 50cm apart.
11. Staff members were reminded to check and mark children's sleeping charts at 10 minutes intervals. This will be monitored by service manager.

Preventive Action

Manager of the service will ensure safety of children and that the policies are being followed. Staff members were reminded to follow safe sleep policy and infection control. There was a new place created to storage all the toys (entrance hall/office).

Supporting documentation submitted

Photograph of new changing mat.

Photograph of gloves.

Photograph indicating staff bathroom is no longer used for storage.

Photograph indicating sleep mats positioned 50 cm apart.

Summary Comment

The evidence submitted by the registered provider in relation to regulation 23 - Safeguarding health, safety and welfare of child has been reviewed and accepted.

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

(2)(a) and (b) The first aid boxes were suitably equipped and safely stored in readily accessible positions on the premises, out of the reach of children.

Non-Compliance Information

(1) A staff member was not present in the service with First Aid Responder (FAR) training on the day of inspection. Only one staff member is trained in FAR and this staff member is not scheduled to work in the service at all times when the children are present.

Corrective & Preventive Action submitted by the Registered Provider

Corrective Action

(1) Far training will be provided for two staff members on the 24/07/2023.

Preventive Action

(1) The staff roster will be reviewed to make sure that a person trained in first aid for children is available at all the time.

Supporting documentation submitted

Confirmation of booking for FAR training.

Summary Comment

The evidence submitted by the registered provider in relation 25 - First aid to regulation has been reviewed and accepted.