

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2021DS003
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<b>Name of Service:</b>	Play and Learn Childcare & Education
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<b>Address of Service:</b>	Ground Floor, Block B3, The Quarter, Citywest Avenue, Citywest, Dublin 24, Co. Dublin
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<b>Eircode:</b>	D24H7XP
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<b>Name of Registered Provider:</b>	Allison Farrell
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<b>Service type:</b>	Full Day
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<b>Date of Inspection:</b>	08/10/2024
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<b>No of pre-school children:</b>	AM	67	PM	62
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<b>Address of the Early Years Inspectorate:</b>	Floor 7, Brunel Building, Heuston South Quarter, Kilmainham, Dublin8
<b>Inspection undertaken by:</b>	F Carty and R Brien
<b>Title:</b>	Early Years Inspectors

### Authority to Inspect

The Tusla Early Years Inspectorate carries out inspections of Early Years Services under Section 58(J) of the Child Care Act 1991 (as inserted by Section 92 of the Child and Family Agency Act 2013).

<b>Conditions if applicable</b>	Not applicable
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### Description of service

Play and Learn Childcare and Education is registered to provide full day care to children aged 1 to 6 years. The service is one of five services operated by the registered provider. The service operates from four rooms in a purpose-built crèche facility on the ground floor of an apartment complex in Citywest, Dublin 24. A separate sleep room and sanitary accommodation is provided together with an outdoor area which is located at the rear of the building. The service opens from 7:30am to 6:30pm Monday to Friday.

### Staffing

On the day of inspection there were fourteen staff members working directly with the children. The manager and deputy manager of the service together with an area manager arrived following the inspector's arrival. There was also one student present.

### 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 and premises and facilities. The inspection may also focus on other areas as required.

The inspection focused on an examination of compliance under regulations 9, 11, 16,19, 23, 27and 32, these findings are outlined within the relevant regulations within this report.

A sampling process was used to assess compliance under Regulation 16.

A sampling process was used to assess compliance under Regulation 19(1) and Regulation 23. As a result, the focus of the inspection included the Junior Preschool and Senior Preschool rooms.

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 inspection was triggered by receipt of information which was furnished to the Early Years Inspectorate on the 1<sup>st</sup> October 2024.

## 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-

(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

(2)

Documentation was reviewed in respect of nine adults who commenced employment in the service following the last date of inspection and one student who was present. Documentation relating to 9(2)(c) was also reviewed for a further three staff members who were present in the service on the day of inspection to ascertain compliance with the Regulatory Notice to renew Garda vetting every three years. The following records were available for the adults:

(a)(b)

There were fourteen references from a past employer and six references available from a source other than a past employer for ten adults.

- (c)  
Garda vetting disclosures were available for all adults in the service. The service also demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years.
- (d)  
International Police vetting was available for six adults who lived outside the State for over 6 months.
- (3)  
The procedures specified in paragraph (2) were completed prior to six staff members commencing in the service.
- (4)  
Eight staff members held at least a major award in Early childhood Care and Education at Level 5 on the National Qualifications Framework.

### Non-Compliance Information

- (1)(b)  
On the inspectors arrival to the service at 10.00am the designated person in charge and the named deputy were not present. During discussions with staff they were unsure of who was in charge. The designated person in charge arrived to the service at 10.38am. The named deputy arrived from another service operated by the registered provider at 11.25am.
- (3)  
The procedures specified in paragraph (2) were not completed prior to three staff members and one student commencing in the service as follows:
- Seven past employer references and one reference from a reputable source for three staff members and one student were not validated prior to them commencing in the service.
  - Two Garda vetting disclosures for two staff member was not sought or reviewed prior to the staff members commencing employment in the service. Documentation reviewed stated the first staff member commenced working in the service on 2<sup>nd</sup> April 2024 and the second staff member commenced working in the service on the 19<sup>th</sup> January 2024 and Garda vetting was obtained on 19<sup>th</sup> January 2024.
- The above Regulation was found non-compliant on the last inspection dated 6<sup>th</sup> November 2023. The corrective and preventive actions submitted by the registered employer did not prevent the reoccurrence of the non-compliance.

(4)  
There was no evidence that one staff member held a qualification at minimum level 5 on the National Framework of Qualifications.

## Corrective & Preventive Action submitted by the Registered Provider

### Corrective and Preventive Action

(1)(b)

We will ensure that the designated person in charge or the deputy person in charge will be in the building at all times. If the designated/deputy person in charge is not going to be in the building, this will be communicated beforehand and a separate person in charge will be appointed.

(3)

We will ensure that all references are validated prior to the employee commencing in Play and Learn.  
We will ensure that new employees will commence employment after we have received their completed garda vetting.

(4)

We have a letter stating that this staff member met minimum qualification requirements from their college. We were unaware that this letter expired on the 2nd of September. This staff member has made an application to get her qualification properly recognised by the DCYA and she will not work here until we receive official confirmation of her qualification.

### Supporting documentation submitted

No supporting documentation received.

## Summary Comment

The corrective and preventive actions submitted by the registered provider have addressed the non-compliance under Regulation 9.

## Part III – Management and Staff

### Regulation 11 - Staffing levels

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

*(2) Subject to paragraphs (4) and (5), a registered provider of a full day care service or a part-time day care service shall ensure that at all times the minimum ratio of adults to children specified in column (3) of Part 1 of Schedule 6 opposite a particular reference number specified in column (1) of that Part in respect of the age range of the children specified in column (2) thereof at that reference number is satisfied.*

### Compliance Information

(1) An adequate number of adults were working directly with the children at all times during the inspection.

(2) The minimum ratio of adults to children for full day care services was adhered to at all times during the inspection. There were sixty three children attending the service being supervised by ten adults on the day of inspection.

## Part IV – Information and Records

### Regulation 16 – Record in relation to pre-school service

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

- (h) details of attendance by each pre-school child on a daily basis;*
- (i) details of staff rosters on a daily basis;*

#### Compliance Information

(h) Records were available detailing the attendance of children on a daily basis. These included the time the children arrived at the service and the time they left.

#### Non-Compliance Information

(i) A staffing roster was available and given to inspectors on arrival, however it did not detail the correct hours of work for each staff member on the day of inspection. The person in charge was rostered to be on the premises from 8.00am to 5.00pm and the deputy was rostered to be in on the premises from 7.30am to 4.30pm however, neither person was onsite on the inspectors arrival.

This Regulation was found non-compliant on the last inspection dated 6<sup>th</sup> November 2023. The corrective and preventive actions as stated by the registered provider did not prevent recurrence of this non-compliance

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

##### Corrective and Preventive Action

(i)  
The roster will now reflect any changes that might happen throughout the working week. We have added extra lines at the bottom of the roster to reflect these changes.

##### Supporting documentation submitted

No supporting documentation submitted.

#### Summary Comment

The requirements of Regulation 16 have been met.

### 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*

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

*(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

The service had a weekly meal plan which detailed a range of nutritious meals and snacks served to children at regular intervals throughout the day. These were prepared on site and provided by the service. On the day of inspection drinking water was always available to the children, in all rooms. Children in each of the rooms observed were seated in an age appropriate manner at low level tables and chairs or in high chairs to enjoy their meal. Children were encouraged and supported to feed themselves and staff were observed offering help to younger children if required. The personal care provided by the staff of the service met the needs of the children, who were encouraged to use the toilet independently, look after their own belongings and make their own choices within the preschool environment.

Children's rest areas were available in both rooms.

In all care rooms there was a mixture of adult initiated and child led play and activities. The children were able to move freely around the care rooms and engage in different types of activities of their choosing. Outdoor play was facilitated for children in all rooms.

Adults were observed to be kind and warm to the children and minor disagreements between children were managed promptly by distraction and positive behaviour methods. The adults demonstrated positive regard for the children by using gentle tones when communicating and showing a keen interest in their activities. The adults supported children during group and individual play activities.

Parents of younger children were communicated to daily both verbally and an online application was used to update the children's care and activities in real time which parents can access at all times.

All care rooms were laid out with identifiable interest areas including a home corner, construction materials, a quiet corner incorporating a book area, low level shelving containing age-appropriate toys.

## Non-Compliance Information

(1)(b)

There were no documented individual education and care plans to inform practice and support staff to meet the specific care needs of four children who attend the service. Through discussion with inspectors, staff confirmed that these children require additional supports and that there was no documentation regarding the children's individual personal needs and preferences.

## Corrective & Preventive Action submitted by the Registered Provider

### **Corrective and Preventive Action**

We have since completed an inclusion profile for each of the children. We have completed this with the children's keyworkers to ensure that the individual needs of each child are clearly explained and met. Going forward, we will use the inclusion profile to help us to support children with additional needs in the service.

### **Supporting documentation submitted**

No supporting documentation submitted.

## Summary Comment

The requirements of Regulation 19 have been met.

### 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 inspectors found by observation of practice, review of documentation, discussion with staff and inspection of the premises that the registered provider had taken the following steps to safeguard children attending:

##### General Safety:

External gates and doors were secured to prevent children from exiting the service unsupervised and to prevent unauthorised persons from gaining access to the service. Heavy equipment was secured to prevent tipping and injury. Cleaning products and hazardous materials were stored securely out of reach of the children. Toys and play equipment observed in use by children on the day of inspection were safe and in working order.

##### Infection Control:

Appropriate measures were taken to reduce the risk of infection spreading as outlined below:

Children were supervised washing their hands after outdoor play, after using the toilet and before eating in the Junior Preschool room. Staff washed their own and children's hands after nappy changing. Individual bed linen was provided. Cleaning schedules were in place.

##### Administration of Medication:

Staff adequately detailed the procedures for administering medication when required during discussions with the inspectors.

##### Safe Sleep:

Low-level beds were available for sleep and were used in accordance with children's ages and developmental needs.

##### Fire Safety:

Staff were aware of the procedure to be followed in the event of a fire. Regular fire drills were conducted in the service. All emergency exits were kept clear of obstruction.

#### Non-Compliance Information

##### General Safety:

1. There was no risk assessment in place for use of climbing equipment in the garden. A preschool child was observed to jump off a climbing frame which measured 1.2 metres five times in the space of five minutes. Staff

were observed trying to discourage the child from jumping off the climbing frame. During this time, one staff member was observed providing one to one care to this child. There were 41 children in the garden at this time with four staff present as detailed under Regulation 27.

In discussion with the inspector, staff stated that the child had been doing this for the last two weeks when playing in the garden, however there was no documented risk assessment available to demonstrate how this risk was being managed to ensure the safety of the child.

2. Through discussion with the inspector staff detailed an incident that took place in the service however, there was no record of the incident and no evidence that the information had been passed on to the parent of the child. Failure to record incidents and to ensure that parents have been informed of an injury to their child may pose a risk to the continuity of care of the child.

#### **Infection Control:**

3. A child in the senior Montessori room was observed leaving the toilet without washing their hands.
4. Children in the junior preschool room were observed handling the lid of the bin. This poses a risk of cross contamination.
5. The pedal was broken on the two bins in the sanitary accommodation of the Senior Preschool room. This poses a risk of cross contamination as adults and children are required to handle the lid when disposing of rubbish.

#### **Administration of Medication:**

6. Procedures and practices in place for children attending the service requiring medication were inadequate and at variance with the service policy, posing a potential risk to the health and safety of children as follows:
  - Medication for two children in the Senior Preschool room was not stored in its original packaging and was not clearly labelled.
  - There were two children who required emergency medication. Both medications were stored loosely, were not in their original packaging or labelled with names or dosage requirements. This was at variance with the service policy and can affect the care given to the children as no information was available for the prescribed medication.

7. A sample of eleven written records of administration of medication to preschool children were available in the service and reviewed, however, no parental pre-consent for administration of medication was available for two records reviewed and five records did not detail the date the medication was administered documented. Failure to accurately complete medication administration forms may affect the continuity of care a child receives.

### Action submitted by the Registered Provider

#### Corrective & Preventive Action

##### **General Safety:**

1. A risk assessment is now in place for the climbing frame in the garden. This risk assessment has been communicated with staff. To ensure the safety of all children, we will teach the children how to use the equipment appropriately, in line with our risky play policy.
2. We have ordered and received the accident/incident book from Early Childhood Ireland. We will use this going forward as opposed to ChildPaths as it is easier to ensure that parent's sign off on any accidents/incidents. Any future incidents will be documented in our incident book which will then be communicated back to parents and will require their signature.

##### **Infection Control:**

3. New handwashing signs have been displayed in all the children's toilet areas. A personalised notice has been displayed in the children's toilet to inform and remind all staff working with children who require assistance to give help when needed.
4. We will encourage children to use the pedal bin properly and not to touch the lid of the bin. We will encourage children to use the pedal bin properly and not to touch the lid of the bin.
5. Pedal bins have been disposed of and replaced. We will carry out regular checks to make sure the bins are in working condition.

##### **Administration of Medication:**

6. Each child now has an individual storage box for their medication, clearly labelled with name and expiry date. Going forward, for any child that needs medication, we will store medication in an individual storage box, clearly labelled with name and expiry date.
7. We are now using the Early Childhood Ireland administration of medication book to document all medication administered in the service. Management will make sure to ensure that parental consent is signed properly.

## **Supporting documentation submitted**

### **General Safety:**

1. A copy of the risk assessment was submitted to the inspector.
2. No supporting documents attached.

### **Infection Control:**

3. A copy of handwashing signs.
4. No supporting documents attached.
5. Photos of two new bins.

### **Administration of Medication:**

6. Photos of the individual storage boxes submitted.
7. No supporting documentation submitted.

## **Summary Comment**

The corrective and preventive actions have been reviewed by the inspector and are deemed to meet the requirements of Regulation 23.

### Part VI - Safety

#### Regulation 27 – Supervision

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

#### Non-Compliance Information

- Between 11.10am and 11.50am the children from the junior preschool and senior preschool room were in the garden. A total of forty one children were present with four staff members supervising. During that period two staff members were required to supervise two children on a one to one basis leaving two staff members to supervise thirty nine children. Adequate supervision was not provided as children were observed jumping from the climbing frame, running into other classrooms and trying to run through doors leading back into the service from the outdoor area during this time. This is at variance with the service policy which states that 'staff are in constant supervision and all children are in sight of at least one staff member'. The policy also states that a number of considerations will be made in regard to supervision including individual care needs of children, staffing levels and adult to child ratios.
- At 1.20pm whilst observing children in the garden, the inspectors asked the two staff supervising how many children were present, they were unaware of how many children were in their care and told staff there were fourteen children present, however inspectors counted sixteen children. This is at variance with the service policy which states regular head counts will take place when children are in the garden.

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

##### Corrective and Preventive Action

- In light of the inspector's observations on the day of inspection in the garden, we will ensure to have a 3rd staff member in the garden as much as is practically possible to monitor areas of risk such as the climbing frame.
- We have facilitated a staff meeting since the inspection to discuss and rectify this issue. All staff know the importance of headcount protocols and completing a garden roll when entering or exiting the garden. The creche supervisor will monitor this every day to make sure it is being done.

##### Supporting documentation submitted

No supporting documentation submitted.

#### Summary Comment

The corrective and preventive actions submitted by the registered provider are deemed to meet the requirements of Regulation 27.

## 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.*

### Compliance Information

- (1) There was a comprehensive complaints policy available for the service.
- (a) The management of complaints was outlined in detail through different stages. Complaints are made in the first instance to the manager of the service and if not resolved then a formal written complaint is made.
  - (b) The complaint is acknowledged and a plan for how it will be dealt with is made including a timeline for when it will be resolved and keeping records of all interactions regarding the complaint.
  - (c) The policy outlines that the person making the complaint will be informed of the outcome and will have the opportunity to have the complaint referred to a third party for resolution if required.