

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2021DY006
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Name of Service:	The Nest Charlestown
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Address of Service:	Unit 2006 Charlestown Park, Charlestown, Co. Dublin
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Eircode:	D11 XW6H
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Name of Registered Provider:	Colm Bowers
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Service type:	Full Day, Part Time, Sessional
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Date of Inspection:	08/01/2024
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No of pre-school children:	AM	62	PM	50
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Address of the Early Years Inspectorate:	Early Years Inspectorate, Child and Family Agency, Unit 4&5 Nexus Building Block 6A, Blanchardstown Corporate Park, Dublin 15.
Inspection undertaken by:	E Hosford and C Harte
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

The Nest Charlestown is a private service, one of five early years services operated by the registered provider. It provides sessional, part time and full day care to children aged between 1-6 years of age. The service operates from 7:30am to 6:30pm Monday to Friday and participates in the Early Childhood Care and Education (ECCE) scheme which operates from 9:15am to 12:15pm in the three Montessori care rooms.

The service operates from a two-storey purpose-built facility situated in a retail development on the north side of Dublin city and consists of five care rooms. On the ground floor are the Tweenie room (1-2 years) and the Toddler room (1-3 years), a reception area, a cot room, a service kitchen, and an outdoor area. On the first floor are three care rooms, namely the Montessori ECCE room (3-4 years), Pre Montessori room (2-3 years) and the Senior Montessori room (3-6 years) which all have access to a first-floor outdoor area. All the care rooms were open on the day of inspection.

Staffing

The service employs 16 staff members to include, the registered provider, designated person in charge, deputy person in charge, a cook, a cleaner and 11 childcare staff, one of whom was employed under the Access and Inclusion Model. The files of 15 staff members and 2 students present in the service on the day of inspection were reviewed. The registered provider was not present during the inspection and the designated person in charge and deputy person in charge were not assigned to a care room but available to assist staff and children if required.

On the day of inspection there were 11 staff and 2 students working directly with the children in attendance.

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 and safety. This inspection focused on.

Regulation 9 Management and recruitment (2)(a)(b)(c)(d), (4),(6A), (7)(a),

Regulation 11 Staffing Levels (1)(2)(8)(a),

Regulation 15 Record of a pre-school child (f),(i),

Regulation 16 Record in relation to a pre-school service (h),(i), (j) and (k),

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

Regulation 21 Equipment and Materials,

Regulation 23 Safeguarding Health, Safety and Welfare of child,

Regulation 31 Notification of Incidents and

Regulation 32 Complaints.

During the inspection the inspectors assessed practices in the Tweenie room and the Toddler room. The files for the staff working in the service and the two students present were reviewed and the adult child ratios were assessed across the five care rooms during the 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.

Acknowledgments

The inspectors wish to acknowledge the cooperation of the designated person in charge, deputy 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*
- (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.*

(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 service had a designated person in charge and a named person to deputise as required.

(b) The designated person in charge was on the premises when the inspectors arrived unannounced and was present for the duration of the inspection.

(2) The files of 15 staff members and 2 students present during the inspection were reviewed to assess compliance under Regulation 9 Management and recruitment.

(a) The following references were from a past employer.

- Two validated written references for 14 members of staff employed.

(b) The following references were from a source other than a past employer.

- Two validated written references for one staff member.
- Two validated written references for the two students.

(2)(c) Garda Vetting disclosures were available for 15 staff members and the two students in the service.

(d) International police vetting was available from five countries in respect of seven staff members who had resided outside of the jurisdiction for more than 6 months as an adult.

(4) Thirteen staff members employed within the service and working directly with the children had evidence to confirm they held a major award in Early Childhood Care and Education at Level 5 or above on the National Framework of Qualifications.

(7)(a) Documentary evidence available demonstrated that staff members had received training on the policies and procedures of the service prior to commencing work. The service held quarterly staff meetings and records available from a meeting in November 2023 demonstrated that issues such as health and safety, communication with parents, code of behaviour for staff and parents, recording children’s attendance, fire drills, key person policy review and curriculum were discussed and covered with staff members by the person in charge.

Non-Compliance Information

(7)(a) Documentation was not available to demonstrate that the service had conducted yearly staff appraisals and staff supervision as per their service policy on staff supervision. On review of the available information six staff members had supervision in 2022 and one staff member had supervision in 2023. Four staff had evidence to demonstrate that they had staff supervision in 2022.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(7)(a) In response to the non-compliance the service responded that the manager and deputy manager conducted staff appraisal meetings with all staff members. All meetings were conducted in 3 steps to make sure all staff appraisals were processed within our policy regulations. All appraisal forms are filed in a designated folder. We have scheduled the appraisal meetings for the month of January every year to make sure they are being conducted regularly and to avoid any delays.

Supporting documentation submitted

(7)(a) Documentation submitted to support the corrective and preventive actions.

Summary Comment

The registered provider has addressed the non-compliance as documented.

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) There were an adequate number of adults working directly with the children as there were 11 adults and 2 students working with 62 children in the morning and 9 staff and 2 students working with 50 children in the afternoon. Two additional staff were available to cover breaks and lunches in the care rooms throughout the inspection.

(2) The adult to child ratios were maintained on the day of inspection as outlined below.

Tweenie room-

- At 11am there were 2 adults caring for 8 children aged between 1-2 years.
- At 3:29pm there were 2 adults caring for 8 children aged between 1-2 years.

Toddler room-

- At 11:02am there were 3 adults and 2 students caring for 16 children aged 1-3 years.
- At 3:30pm there were 3 adults and 2 students caring for 16 children aged 1-3 years.

Montessori ECCE room-

- At 11:04am there were 3 adults caring for 20 children aged 3-4 years.
- At 3:35pm there were 2 adults caring for 14 children aged 3-4 years.

Pre Montessori-Room

- At 11:06am there were 2 adults caring for 8 children aged 2-3 years.
- At 3:36pm there was 1 adult caring for 5 children aged 2-3 years.

Senior Montessori-Room

- At 11:09am there was 1 adult caring for 10 children aged 3-4 years.
- At 3:38pm there was 1 adult caring for 7 children aged 3-4 years.

(8)(a) A weekly staff roster available demonstrated that two adults were always present on the premises.

Part IV – Information and Records

Regulation 15 – Record of pre-school child

(1) A registered provider of a pre-school service other than a pre-school service in a drop-in centre or a temporary pre-school service shall ensure that a record in writing is kept in respect of each pre-school child attending the service containing the following particulars:

- (f) details of any illness, disability, allergy or special need of the child, together with all the information relevant to the provision of special care or attention;*
- (i) written parental consent for appropriate medical treatment of the child in the event of an emergency.*

Compliance Information

(i) Written parental pre consent for the administration of a required medication to a child in the event of an emergency was available.

Non-Compliance Information

(f) A detailed care plan was not available to staff in the care room to adequately identify and provide the appropriate provision of care to a named child with a food allergy that required medication in the event of a reaction.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(f) In response to the non-compliance the service has responded that they have displayed on the wall (in child's allocated room) the Medication Form which gives the consent to administer the medication in case of an allergic reaction.

We updated our list for children's allergies and displayed the list in all rooms including the symptoms and the measures to take in the event that the allergic reaction occurs.

Supporting documentation submitted

(f) Documentary and photographic evidence submitted to support the corrective and preventive actions.

Summary Comment

The registered provider has addressed the non-compliance as documented.

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;

(j) details of any medication administered to a pre-school child attending the service with signed parental consent;

(k) details of any accident, injury or incident involving a pre-school child attending the service.

Compliance Information

(i) Weekly staff rosters were available to demonstrate the details of staff present in the service daily.

(j) On review of 10 administration of medication records the required information to include parental consent was recorded.

Non-Compliance Information

(h) The arrival of a child to the service at 10:05am to the Toddler room was not recorded by staff until 1:10pm when it was identified by the inspector. This reduced the effective evacuation of the child in the event of an emergency.

(k) On review of 10 accident and incident records the name of the staff member who witnessed the incident and the name of the staff member who completed the form was not included.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(h) In response the service has stated that staff were reminded about signing in /out children at the correct times. We updated our next staff meeting (01/02/2024) Agenda with the above reminder to further inform the staff how important it is in case of emergency evacuation.

Large signs are displayed in the rooms to remind the staff about signing in /out children at the correct times.

(k) The service has stated that the operational manager was informed, and the Accident and Incident Form and Accident and Incident Policy were updated with the appropriate information including a witness of the accident/incident, a person who completed the form, and a person who informed the parents.

A new Accident/Incident forms was introduced to our staff and the new policy will be introduced at our upcoming staff meeting on 01/02/2024.

Supporting documentation submitted

(h) and (k) Documentary and photographic information submitted to support actions as stated.

Summary Comment

The registered provider has addressed the non-compliances as documented.

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

(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.

(2) A registered provider shall ensure that no corporal punishment is inflicted on a pre-school child whilst attending the service.

(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)

Basic Needs:

- Nappy changing was carried out when required and at set times.
- The children from the Toddler room spent time in the outdoor area throughout the inspection with appropriate clothing and footwear provided.
- Staff in the Tweenie and Toddler room used an electronic application to communicate with parents daily and update them on their child's meals, sleeps, activities, and nappy changes.
- The children were observed to be relaxed and free to move from activity to activity with supervision and support provided when needed.
- The children were free to choose where they sat for their meals. Dinner prepared by the chef was chicken curry with rice and vegetable. It was brought to the room with curry, rice, and vegetables in separate serving dishes. Each child was asked what they would like to eat, and their choice was served. Mealtime was relaxed and staff helped, supported, and provided adequate supervision. Additional food was available if requested.
- There were several areas of interest which were supplied with appropriate toys and equipment to facilitate role play and creativity.

Supporting relationships

- Staff were observed helping children solve minor issues and learn about turn taking. Staff listened to the children's requests and were clear and concise in giving instructions and guidance.
- Children's first names were used when staff were chatting with them and when they were asking the children to prepare for outdoor play.

(1)(b)

- The transitions between activities such as mealtimes and getting ready for outdoor play were observed to be calm and relaxed with additional staff available to care for the individual needs of the children. Mealtimes were a sociable occasion with staff sitting with the children while assisting them with eating if required and promoting their independence when needed.
- While the children moved from the care room to the outdoor area, staff were observed to provide supervision, support, and assistance as needed.

(1)(b)

- Appropriate and suitable care practices were in place in the care room. Staff spoke in gentle tone of voice while supporting the children with their activities which were age appropriate and in keeping with the needs of the children. The children enjoyed outdoor play with staff helping them with games and staff were observed to provide adequate supervision while they used the activity centre.

(2)

- During the observation of practice in the Tweenie room and Toddler room no evidence of corporal punishment was inflicted on a child.

(3)

- Staff advised the inspection team of an incident that had occurred. Documentation was reviewed which demonstrated that the incident was managed appropriately in line with the services policy and procedures.

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

Tweenie and Toddler rooms:

- Tables and chairs used by the children in the Tweenie, and Toddler rooms were appropriate to their ages and were available throughout the day to enable the children to carry out tabletop activities between snacks and meals.
- Rest areas were available in the care rooms to enable children to rest and take a break from activities, they consisted of soft matting, cushions, and soft toys.
- The enclosed ground floor outdoor play area was resourced with toys and activities such as a climbing frame with slide, ride on cars, moveable see saws, sheltered area with play kitchen, balls, trucks, cars and an activity wall with pipes and balls.

Non-Compliance Information

1. The Tweenie room lacked well equipped age-appropriate defined areas of interest, for example.
 - Four shelving spaces at the children's level were observed empty with no resources.
 - Photos labelling the shelving did not match the resources available. Correctly labelling the resources promotes independence for children and supports their understanding of the environment.
 - Labels for defined areas did not match available resources. For example, the area labelled home corner had a table but no other themed resources.
 - The construction area contained one small tray of blocks limiting the children opportunity for creative free play.
 - Books were observed to be torn and damaged.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

1. To address the non-compliances the service has responded as follows.
 - The care room has been rearranged making age-appropriate corners with appropriate toys and resources.
 - New materials have been purchased and all boxes were updated with new picture labels.
 - The home corner area is an extension to the kitchen area with new equipment purchased to make the environment more welcoming and more age appropriate.
 - The construction area was extended with magnetic tiles, building blocks, stickle bricks, and more.
 - New books were purchased and placed at the child's level in the cosy/book corner. New sensorial boards were attached to the wall to define our sensorial area.

Supporting documentation submitted

1. Supporting evidence to include receipts, invoices, and photographs.

Summary Comment

The registered provider has addressed the non-compliances as documented.

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 internal and external doors were secured by an entry phone and fob system to prevent a child from exiting the service unsupervised and to prevent an unauthorised person from entering the building.
- Cleaning agents were stored on high shelves out of children's reach in the care rooms and sanitary facilities.

Infection Control:

- Warm water, liquid soap and paper towels were available at all wash hand basins used by the staff and children in the toilet facilities. Active mechanical ventilation was provided in the nappy changing facility

used by the children. Foot operated pedal bins were provided for the disposal of waste paper in the care rooms and sanitary facilities.

- Nappy changing was carried out according to the service policy and procedures.
- Children's soothers were sterilised daily and stored in individually labelled containers.

Safe Sleep:

- Staff maintained ten-minute sleep checks on all sleeping children to include colour, breathing and position. The temperature of the sleep room and the Toddler care room was recorded and maintained between the recommended temperature of 18-22°C while children slept. Children were suitably dressed at sleep time with any excess clothing removed.
- At sleep time in the Toddler room suitable blinds were available to darken the room when children were going to sleep. Two children that did not sleep from the Toddler room were facilitated to engage with activities in the Tweenie room during this time.

Non-Compliance Information

General Safety:

1. During sleep time in the Tweenie and Toddler rooms, the children's movement between the cot room and care rooms was not reflected in the electronic application. This reduced the effective evacuation in the event of an emergency.

Infection Control:

2. During sleep time four children were positioned with less than the recommended 50cms between each bed, this increased the potential risk of cross infection and reduced the ability of staff to access the children in the event of an emergency.

Safe Sleep:

3. Two children aged between 20 to 21 months slept on low stackable beds at sleep time. Records were not available to demonstrate that the service had engaged with each child's parent and completed an individualised sleeping plan which included the parents written consent. This is at variance with the service safe sleep policy and Tusla guidance issued to the sector.

Fire Safety:

- While children slept in the Toddler room it was observed that the designated fire exit from the care room to the outdoor area was obstructed with an art easel and a sleeping child. It is acknowledged that when this was brought to the attention of the person in charge the area was immediately cleared to ensure unobstructed access in the event of an emergency.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

- The service has stated that staff were shown how to record the movement of children between the rooms on the tablet in the services electronic application. Each time the child moves between rooms, the child's name is recorded on the attendance list of the room that the child is currently in. Each care room has a sign displayed reminding staff about recording children's movements between the rooms.

Infection Control:

- To address the non-compliance the service has updated their sleep risk assessment checklist with the information on the 50cms distance between beds during sleep time. Staff needs to fill in the sleep assessment form on a daily basis.

Safe Sleep:

- In response to the non-compliance the service has stated that meetings were scheduled with parents and risk assessment forms needed to support transition from cot to bed were completed. They will be always on file when needed and all staff will be aware of where they can find it in the office. In addition, the service has purchased 2 floor beds for children under 2 years to ensure that children under the age of 2 years who do not sleep in cots will be facilitated to sleep on appropriate beds.

Fire Safety:

- To address the non-compliance staff were reminded about keeping the fire always exit clear. The obstacle was removed immediately and moved it to the opposite end of the room. We have displayed a big sign on the garden door informing about keeping the fire always exit clear.

Supporting documentation submitted

General Safety:

1. Documentary and photographic information submitted to support actions as stated.

Infection Control:

2. Documentary and photographic information submitted to support actions as stated.

Safe Sleep:

3. Documentary and photographic information submitted to support actions as stated.

Fire Safety:

4. Documentary and photographic information submitted to support actions as stated.

Summary Comment

The registered provider has addressed the non-compliances as documented.

Part VI - Safety

Regulation 27 – Supervision

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

Compliance Information

While assessing care practices in the Tweenie and Toddler rooms it was observed that staff supervised and provided support to each other and supervised the children during indoor and outdoor activities; during meal and sleep times; and nappy changing.

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) and (c).

Documentation was available for inspection to demonstrate that the service complaints policy specified the procedures to be followed by a person when making a complaint, how the complaint would be dealt with, and the procedures and processes involved in keeping the complainant informed of how it would be dealt with.

(2)(a) and (b)

A written complaints log was available to demonstrate that the service kept a record of any verbal or written complaint made to the provider and that it was dealt with in accordance with the service policy, which stated a complaints procedure and process to be followed by staff. On review of a complaint made against the service it was clearly evidenced that staff recorded the details of the complaint, the communication between the service and the complainant, the review of the complaint and the actions taken by the service to address the complaint.

(3)(a) and (b),

Documentation relating to one complaint made to the service was available for inspection and included the following:

- Nature of the complaint,
- Action taken by the service to address the complaint,
- Follow up with complainant,
- and the agreed outcome.