

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2022LH002
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Name of Service:	Dun Dealgan Childcare
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Address of Service:	13 Demesne Road, Dundalk, Co. Louth
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Eircode:	A91 E516
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Name of Registered Provider:	Irenaeus McCaffrey
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Service type:	Full Day
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Date of Inspection:	04/12/2024
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No of pre-school children:	AM	27	PM	24
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Address of the Early Years Inspectorate:	Early Years Inspectorate Child Wellbeing Centre Castleblayney Co. Monaghan
Inspection undertaken by:	M. Flood & S. Skinnader
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

Dun Dealgan Childcare is a privately operated service that provides full day, part-time and sessional care and education to children aged 2-6 years. The service is registered to operate from 8.00am – 6pm Monday - Friday and caters for a maximum of 39 pre-school children.

The service is located in a purposely renovated building in a residential area of Dundalk, Co. Louth. The premises consists of 3 playrooms, each with adjoining sanitary accommodation. A kitchenette, small office area and staff toilet are located off the hallway. A small enclosed outdoor area is available to the front of the building

Staffing

The service employs 11 childcare staff including the registered provider and the designated person in charge who work directly with the pre-school children attending the service. Two additional adults are also employed in the service and are engaged in administrative, cleaning and catering duties for the preschool service.

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. The inspection may also focus on other areas as required.

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

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 inspection was carried out following receipt of information from the service.

An Immediate Action Notice was issued in respect of 1 staff member who did not have documentary evidence of a processed Garda Vetting disclosure. The registered provider gave written assurances of appropriate immediate actions undertaken in the service to control the risk to children.

Acknowledgments

The inspectors wish to acknowledge the cooperation of the registered provider, service manager, 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) & (b) The service had a designated person in charge and a named deputy person to deputise as required. The designated person in charge who is the service manager was on the premises when the inspectors arrived unannounced to the service at 11.00am.

(c) When questioned staff were familiar with the management structure within the service and the roles and responsibilities of the various staff members.

(2) Sixteen staff files were reviewed including; the registered provider, service manager, 9 childcare staff, 2 ancillary staff and 3 students. The following were observed:

(a) & (b)

- There were 2 written and validated references from a past employer or an alternative source available for 13 members of staff and 1 student.

(c) A processed Garda Vetting Disclosure was available for fifteen members of staff, including the registered provider, service manager, 8 childcare staff, 2 ancillary staff, and 3 students. The service also adhered to the re-vetting timeframes as outlined in the Early Years Inspectorate Regulatory Notice, requiring services to renew Garda vetting every three years

(d) International police vetting was available for 3 staff who had resided outside the Irish jurisdiction for a period of 6 months or more as an adult.

(4) Documentary evidence was available to demonstrate that 11 members of staff, who work directly with the pre-school children held at least the minimum required level 5 Childcare Qualification

(7)(a) Documentary evidence was available to demonstrate that following notification of a recent feedback and concern in the service, staff received additional training for which 3 staff attended. The registered provider and service manager also confirmed that further training is also planned for those staff who did not attend this training.

Non-Compliance Information

The registered provider did not ensure that appropriate vetting procedures had been completed for all staff. The following documents were not available and were not in place prior to the staff members and students commencing in the service;

(2) (a) and (b)

Documentary evidence of 2 written and validated references were not available for 2 students who were present in the service.

(c) Documentary evidence of a processed garda vetting disclosure was not available for one staff member observed working with the preschool children during the inspection. An immediate action notice was issued in respect of this staff member to which an acceptable response was received.

(d)

1. Documentary evidence of a processed international police vetting was not available for 1 staff member who had resided in a 2nd country outside the Irish jurisdiction for a period of 6 months or more as an adult.
2. Documentary evidence of international police vetting was not available for 1 student who had resided outside the Irish jurisdiction for a period of 6 months or more as an adult.

These are recurring non-compliances from the previous inspection which was carried out on 03/10/2023. This practice is also at variance to the corrective and preventative actions previously submitted by the registered provider, to address similar non-compliances which stated that “@references and international vetting will be confirmed” before employees commence their positions within the service”.

(3) Following a review of the staff files it was observed that all staff members did not have vetting procedures carried out by the registered provider prior to the staff being employed or having contact or access to the preschool children in the service.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Actions

Two written and validated references were provided to the inspectors.

Garda vetting was applied for. This staff member was asked to leave the business until the Garda vetting was processed.

The staff member in question now has documentary evidence of international police vetting for 2 countries. They have also applied for an English translation.

International Police vetting has been applied for by the student. The placement with Dun Dealgan Childcare has been put on pause until the police vetting is processed.

Going forward the registered provider has taken over the duty to obtain written and validated references, Garda vetting and to ensure all international vetting is in place prior to commencement of employment or student placements. The registered provider will also make sure that all police vetting is in English translation if required.

Supporting documentation submitted

Written and validated references

A processed Garda vetting disclosure

International police vetting's and the required English translation.

Summary Comment

Following the inspection an Immediate Action Notice was issued in respect of 1 staff member who did not have documentary evidence of a processed Garda Vetting disclosure available. The registered provider responded to this notice and gave written assurances of appropriate immediate actions undertaken in the service to control the risk to children.

The registered provider then submitted details of the corrective and preventative actions taken in the service to address each of the non-compliances together with some documentary and photographic evidence. Further information was requested to determine that the areas of non-compliance had been adequately addressed. Based on the information submitted the non-compliances identified under Regulation 9 have been adequately addressed. Implementation and sustainment of the actions detailed will be assessed at the next inspection.

Part III – Management and Staff

Regulation 11 - Staffing levels

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

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

(8) Without prejudice to paragraphs (2) to (7)-

(a) a registered provider of a pre-school service other than a child-minding service or a sessional pre-school service shall ensure that there are at least 2 adults on the premises at all times,

Compliance Information

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

(2) The following adult: child ratios were observed in the three care rooms when the inspectors arrived unannounced to the service:

The Discovery Room: There were 6 preschool children (aged 3-4 years) attending this room with 2 childcare staff.

The Cherry Blossom Room: There were 8 preschool children (aged 2-3 years) attending this room with 2 childcare staff members.

The Aqua Room: There were 13 preschool children (aged 3-4 years) attending this room with 2 childcare staff and 3 students.

Two additional adults, which included the service manager and 1 staff member who was engaged in catering duties were also present. The registered provider arrived on the premises at approximately 11.35am and was present for the remainder of the inspection.

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

Part 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:

- (g) the policies, procedures and statements the service is required to maintain in accordance with Regulation 10;*
- (h) details of attendance by each pre-school child on a daily basis;*
- (i) details of staff rosters on a daily basis;*
- (k) details of any accident, injury or incident involving a pre-school child attending the service.*

Compliance Information

(1) (g) The following policies were available and reviewed:

- Health and Safety Policy
- Outdoor Play Policy
- Accident / Incident Policy
- Employee Handbook Staff Induction/training and Supervision Policies

(h) An electronic record was available of the arrival and departure times for the children attending the service. Each room recorded their own attendance on the tablet-based system. The manager and staff also confirmed that some staff also use documentary records of arrival and departure times which were also available in the service.

(i) A staff roster was available and was reflective of the staff present in the service.

(k) No accident and incidents were observed by the inspectors on the day of the inspection. A sample of 10 accident and incident records were reviewed. All required information was included on the forms when reviewed. Included was a parental signature to confirm that the parents had been informed of the incident, staff details and a manager's signature.

Part V - Care of Child in Pre-school Service

Regulation 19 - Health, welfare and development of child

(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

There were 3 rooms in operation on the day of the inspection: namely The Discovery Room, The Cherry Blossom Room and The Aqua Room.

(2) The use of corporal punishment was not observed during the inspection. The Behavioural Management Policy for the service also stated that “corporal punishment was not to be used “and the staff were familiar with the policy. The person in charge and staff also informed the inspectors that 3 members of staff had recently completed a behaviour management training course. Further training has also been planned for the other staff members.

(3) Soft tones and positive language were observed in interactions between the children and staff. Positive and supportive language was heard for example; “*would you like me to help you...no that’s right you can do it yourself...!*” “*yes honey*” “*what pet?*” Minor behavioural issues were also appropriately addressed and not allowed to escalate with staff positively engaging with the children by saying “*..oh you’re very gentle with the baby...I love it...we all have to be kind and share.*” Clear instructions were given to children to support transitions between activities, outdoor play and when meeting care needs. Children who did not wish to engage in an activity were supported and facilitated in this choice.

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.

Non-Compliance Information

The Inspectorate is not assured that adequate steps have been taken to ensure the health, safety and welfare of the pre-school children attending the service. The following observations were made:

General Safety:

1. On arrival to the premises the inspectors were able to walk directly into the service as the front door was unlocked.
2. The registered provider and service manager when questioned were not familiar with some of the procedures contained within the services child welfare and protection policy.

Infection Control:

3. At 1.30pm there was no running hot water available in the sanitary areas when the inspectors checked the water temperatures.

Action submitted by the Registered Provider

Corrective & Preventive Actions

1. This has been addressed to all staff to keep the doors on lock at all times to avoid this from happening again. Also, a notice has been fixed to the door as a gentle reminder to staff. The door is checked all the time and staff have been made aware from a health & safety & welfare of all the children that the door must remain on lock at all times to ensure the safety of the children.
2. The registered provider is familiar with procedures contained within the child welfare and protection policy for the service. A review of the procedures in the child welfare and protection policy will be reviewed in the next staff meeting by all the staff team. This will be scheduled at the end of January for a staff meeting.
3. The thermostat temperature has been moved up to help with that problem going forward. Periodic checks take place throughout the day to make sure that the water is hot at all times for usage of staff and children for infection control.

Supporting documentation submitted

Photographic evidence of door signs

Documentary evidence of staff training

Documentary evidence of the minutes the staff meeting.

Summary Comment

The registered provider submitted details of the corrective and preventative actions taken in the service to address each of the non-compliances together with some documentary and photographic evidence. Further information was requested to determine that the areas of non-compliance had been adequately addressed. Based on the information submitted the non-compliances identified under Regulation 23 have been adequately addressed. Implementation and sustainment of the actions detailed will be assessed at the next inspection.

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

Adequate supervision of children was observed throughout the inspection for example during outdoor play, when transitioning from inside to the outdoors and on return, head counts were carried out. Adequate staff were available to provide relief in the care rooms during break times

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.*

Compliance Information

(1) A complaints policy was available for inspection. When questioned staff were familiar with the policy and demonstrated an understanding of their role and responsibility in relation to the implementation of the complaints policy.

(2)&(3) On review of documentation received on the day of the inspection and subsequent information submitted to the inspectorate by the registered provider, all complaints in the service have been addressed in accordance with the services Complaints policy.