

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2023DL006
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<b>Name of Service:</b>	LMNO Childcare
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<b>Address of Service:</b>	Unit 2 Railway Court, Pearse Road, Letterkenny, Co. Donegal
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<b>Eircode:</b>	F92 C62C
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<b>Name of Registered Provider:</b>	Eileen Gill, Kieran McWilliams
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<b>Service type:</b>	Full Day, Part Time, Sessional
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<b>Date of Inspection:</b>	19/11/2024
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<b>No of pre-school children:</b>	AM	22	PM	20
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<b>Address of the Early Years Inspectorate:</b>	Donegal Early Years Inspectorate, St. Conal's Campus, Letterkenny, Co. Donegal. F95 XK94
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<b>Inspection undertaken by:</b>	L Mc Glynn
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<b>Title:</b>	Early Years Inspector
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### 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

LMNO Childcare is a privately owned and operated preschool service located in the centre of Letterkenny. The service is registered to provide full day, part time and sessional care to children aged 1-6 years. The operating hours are from 7.30am to 6.00pm each weekday. The service operates from a converted commercial unit on the ground floor of an apartment building. There is a small outdoor play area to the rear of the premises.

### Staffing

There are two registered providers and six staff members working in the service. Both registered providers were in the service on the day of inspection. One staff member is currently off on an extended period of leave.

### 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 announced and focused on the area of governance/ health, welfare and development of child/ safety. The inspection may also focus on other areas as required.

The inspection focused on an examination of compliance under regulations 9, 11, 19 and 23; however, on inspection additional non-compliances which posed a risk were identified under Regulation 8, 16, 22 and 27. These findings are outlined within the relevant regulations within this report.

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 inspector wishes to acknowledge the cooperation of the registered provider, staff and children who were present on the day of the inspection.

## Part II - Registration and Register

### Regulation 8 - Notification of change in circumstances

*(1) A registered provider of a pre-school service other than a temporary pre-school service shall, subject to paragraph (3), notify the Agency in writing of any proposed change in the details in relation to the pre-school service contained in the register pursuant to section 58C(2) of the Act or Regulation 7(2) at least 60 days before it is proposed that the change would take effect.*

### Compliance Information

- (1) The service failed to notify the Agency of the change to the person in charge. It was noted on inspection that the person in charge as notified to the Agency was on an extended period of leave and not due to return to the service until early 2025.

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

#### **Corrective and Preventive Action**

The person in charge has returned from her period of temporary leave.

As the person in charge's leave was on a temporary basis, we did not realise that we would have to submit a change of circumstance as we had deputies in place. However we are now aware and should a similar situation arise, we will submit the change of circumstances.

#### **Supporting documentation submitted**

No supporting documentation submitted.

### Summary Comment

The assurances given by the registered provider in the CAPA response have been accepted, this regulation has now been addressed.

### Part III – Management and Staff

#### Regulation 9 – Management and recruitment

*(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*

### Compliance Information

The vetting files for the six staff members and two registered providers were reviewed on this inspection and the following to deemed to be compliant.

- (2) (a) (b) There were two references on file from a past employer or a source other than a past employer in where relevant, for four staff members.
- (c) Garda vetting disclosures had been obtained for all eight staff members. The service also demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years.
- (4) Evidence of completion of a major award in Early Childhood Care and Education at level 5 or above on the National Framework of Qualifications or a qualification deemed by the Minister to be equivalent was on file for five staff members.

### Non-Compliance Information

- (2) (a) (b) 1. Four of the references on file for four staff members could not be accepted for the following reasons:
  - One was from a work colleague and not a past employer.
  - Two were from a source other than a past employer, however both staff members had numerous past employers listed on their records.
  - It could not be determined in what capacity a fourth reference was known to the staff member.
- 2. There were two references on file for one staff member, however neither of the references were from the staff members most recent past employer.
- (d) The requirement for international police vetting could not be determined from the information provided for three of the staff members.
- (4) The documentation presented on inspection did not adequately demonstrate that three of the staff members had completed a major award in Early Childhood Care and Education at level 5 or above on the National Framework of Qualifications.

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

#### Corrective and Preventive Action

- (2) (a) (b) 1. 2. One staff member has resigned her position. We have collected the references from the most recent past employers. Management will ensure that references submitted by staff are from their two most recent employers when they are submitting documents during the hiring process. Management will also review staff files quarterly to ensure all documents are up to date and available for review.

- (d) Staff members have amended their CV's to include dates, reflect periods of unemployment or when they were stay at home parents to indicate that they were not living out of the country. One adult has explained that the CV on file for them was incorrect in its details of dates and has amended it to reflect the dates of work more accurately. Management will ensure that all staff CV's have dates to provide details of where and when they have previous employment to indicate whether vetting from other countries is required.
- (4) One staff member has resigned their position. We have attached a letter from DCEDIY recognising the qualification of one staff member whose certificate was outstanding. The third staff member lost their certificate and is unable to obtain a new one due to it being obtained pre-2011. The person has requested it from both the ETB and QQI however, it was unable to be reissued. The transcript is available for review along with correspondence from ETB confirming same.

In the future the service will ensure copies of staff certs as well as transcripts are available and will ensure that CVs reflect period of unemployment where relevant. We will also ensure that both references are from the most recent employers.

**Supporting documentation submitted**

References, correspondence, images and certificates were submitted.

**Summary Comment**

The inspector has reviewed the actions and evidence submitted. The non-compliances identified under Regulation 9 (2) and (4) have been adequately addressed.

### 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) There was an adequate number of adults caring for the children throughout the inspection.

When the inspector arrived at the service, 22 children were being cared for by 5 staff members in two care rooms.

(2) In the caterpillar room, eight children aged 1-2 years were being cared for by two adults.

In the butterfly room, 14 children aged 2-3 years were being cared for by three adults.

### 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:*

*(i) details of staff rosters on a daily basis;*

#### Non-Compliance Information

(i) There was no documented staff roster on file including start and finish times for each staff member and allocated cover for breaks. Staff members were not observed to have a break for the duration of the inspection. When asked by the inspector, some staff stated that they, for the most part, have their lunch break in the room with the children.

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

##### Corrective and Preventive Action

(i) The roster for the next few weeks has been submitted to show when/where staff are working on each day. This roster is available on the app the service uses and is also printed and displayed in the office for review. RP will be submitting a change in circumstance to remove herself as PIC from second service. The roster will be printed weekly as well as posted on the app for staff so that it is readily

available for review. The roster will detail breaks/cover and what rooms staff are intended to work in each day.

### **Supporting documentation submitted**

A four-week roster was submitted.

### **Summary Comment**

The inspector has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 16 (i) has been adequately addressed.

## 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*

### **Compliance Information**

(1) (a) Children were supported to be independent in their environment including using the toilet independently, tidying up following mealtimes and play and washing hands before meals. Personal care needs were tended to by staff where appropriate. There was space within the rooms for children to move around and explore their environment. Children in the butterfly room were brought outdoors to play on the morning of inspection. Staff used respectful language during interactions with the children and were observed to be responsive to children's individual care needs.

### **Non-Compliance Information**

- The individual sleep needs of young children were not met by the service. Children were placed to sleep in the caterpillar room at a scheduled time. There were no opportunities for children to sleep outside of these times or for children to continue to play if they did not sleep at the scheduled time. The following practice was observed.
  - At approximately 11.25am there were children in the caterpillar room who were notably tired and in need of sleep. Children were observed rubbing their eyes, crying, seeking comfort from staff

and at times, falling over. The children were not placed to sleep until the scheduled sleep time which was approximately 12.50pm.

- At the scheduled sleep time, the play equipment and materials in the caterpillar room were pushed up against the walls and cleared away to make room for the nine cots to be brought in. The room was then used as a sleep room making it inaccessible as a care room for children who did not sleep.
2. The quantity and range of play equipment and materials in both rooms was inadequate to meet the learning and development needs of the children attending the service. There was an inadequate provision of challenging, diverse, creative and enriching experiences for children which promotes all areas of development. For example;
- Sensory materials such as sand, water or paint were not readily available.
  - There was a lack clearly defined interest areas in both rooms, and there was little evidence of open ended or natural learning materials being provided.
  - Dress up items were stored in a low-level drawer restricting children's ability to see what was available and select items of their choosing.
  - There was no adult chair for staff to sit comfortably when holding and comforting children.

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

#### Corrective and Preventive Action

1. We have opened our sleep room for use which allows us to meet the sleep needs of all the children when they feel tired and need a rest.
2. We have increased the level of toys available to the children in both rooms and amended the room layouts so that interest areas are more clearly defined and sensory materials are available throughout the day. An adult chair has been provided for the baby room. We will ensure that the adult chair is always available for comforting/bottle feeding children. The rooms are currently being rearranged by staff based on the children's interest in each area to find what works best for the group of children in each room. The service will ensure that sensory activities are provided daily and that any toys that are broken are replaced as soon as possible. We will also be engaging with Better Start regarding the environment and the promotion of an emergent curriculum. We will be auditing the room and materials available using the Aistear toolkits for self-evaluation on a monthly basis as part of ongoing reflection.

#### Supporting documentation submitted

Images of both care rooms were submitted.

### Summary Comment

The inspector has reviewed the information submitted by the registered provider. The declarations made in the CAPA response have been accepted as addressing the non-compliances identified under Regulation 19 (1) (a) however the practice will be subject to review on the next inspection.

### Part V - Care of Child in Pre-school Service

#### Regulation 22 – Food and drink

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

### Non-Compliance Information

1. The main meal served to the children was not adequate, suitable or nutritious and was at variance with the menu plan that was in place in the service. The meal consisted of small sections of potato waffles and a spoonful of baked beans. There was no consistency with the portion sizes given to children with some children being served one quarter of a potato waffle with a small spoon of baked beans. Children were heard asking for more however there was not enough food to provide additional portions to everyone.
2. There was an overreliance on processed foods on the menu plan including, fish fingers, fries, chicken nuggets and sausages. There was little evidence of fresh meat or vegetables included on the menu plan or in storage in the service for staff to cook.

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

#### Corrective and Preventive Action

1. and 2. We have amended the menu. A copy of the rolling menu is attached. As some of the children in the creche are vegetarian, Quorn meat or a meat free option is made available to them during mealtimes (substitutes listed on menu). The rolling menu will be reviewed quarterly and input from staff, children and parents on what the children are enjoying and what they are not which will be taken into account. There will be details of alternative options to accommodate the dietary requirements of the children in the service available for review as well as the main menu. An unannounced HSA inspection was also carried out which found that safe food and hygiene practices are being adhered to. Staff have been retrained on portion sizes through the use of the HSE guidelines. HACCP training is being undertaken by staff. The service will ensure that the staff that are preparing food are provided with HACCP training regularly and that they are trained on the appropriate portion sizes for meals in line with HSE guidelines. Weekly food orders will be overseen and reviewed by management to ensure that a sufficient quantity of food is available each week for the number of children attending and that the food includes appropriate healthy options that do not rely heavily on processed options.

### Supporting documentation submitted

Images and menu plans were submitted.

### Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 22 has been adequately addressed. The practice around food provision and supply will be reviewed on the next inspection.

### Part VI - Safety

#### Regulation 23 - Safeguarding health, safety and welfare of child

*A registered provider shall ensure that all reasonable measures are taken to safeguard the health, safety and welfare of a pre-school child attending the service and that the environment of the service is safe.*

### Compliance Information

#### General Safety:

- The main entrance into the premises was safely secured with a buzzer system at the main gate. The perimeter of the outdoor play area was fully enclosed. It was bounded partially by the outer wall of the pre-school building, with the remaining sections of the perimeter enclosed by fencing which incorporated gates with closing mechanisms.
- The emergency evacuation route from the pre-school rooms were identified by emergency exit signage. All designated emergency exits were observed to be clear and unobstructed.
- Internal doors were appropriately secured to prevent children accessing unsafe areas.
- Risk assessments were completed daily and on display in the care room.

#### Infection Control:

- Thermostatically controlled warm water, liquid soap and paper towels were available at the wash hand basins in the service's sanitary accommodation.
- All toys and play resources available on the day of inspection were noted to be clean, in good repair and appropriate for the age range of children proposed to attend the service. The service's cleaning agents were stored safely out of reach of the children. Cleaning records were maintained.
- There were openable windows in each room and mechanical ventilation in the sanitary accommodation to allow ventilation.

#### Safe Sleep:

- Children aged two years and under were placed to sleep in a standard cot. There was adequate spacing between cots and staff members remained physically present in the room when children were sleeping.

### Non-Compliance Information

#### Infection Control:

1. Children's soothers were not managed in a clean, hygienic condition to prevent the risk of cross infection and ensure effective infection control practices. A child was observed to have a soother in their mouth when brought to the sanitary area to have their nappy changed. When removed from the child, staff were observed to place the soothers in the children's bag and not in sterile container.
2. A staff member was observed in the kitchen preparing and serving food with no protective apron, hair net or gloves to prevent the risk of contamination.
3. The wall of the nappy changing area in the caterpillar room was constructed with wood that did not have a protective coating or varnish applied therefore could not be adequately cleaned.
4. Waste was not disposed of appropriately in the nappy changing areas. Soiled nappies were placed in bins that were not self-sealing, leak proof foot pedal bins.
5. The door to the nappy changing area in the caterpillar room was left open while children's nappies were being changed. As a result, other children were walking in and out of the area. The doors to the sanitary accommodation in the butterfly room were also propped open throughout the day. This poses a risk of cross infection.
6. There was inadequate storage of cleaning equipment in the caterpillar room posing an infection control risk to children. Cleaning equipment including a floor brush and paddle was stored in the lobby area between the playroom and the nappy changing area.

#### Safe Sleep:

7. An appropriate sleep log was not maintained recording all of the required details of physical observations made every 10 minutes for each child who slept in the service. When recording the physical check carried out, staff record the colour breathing and position of the child at the end of the child's sleep time. Only the time of the check was recorded on each occasion before that.
8. One child was placed to in a cot sleep with a bottle of milk. As a safety precaution, children are required to be held while bottle-feeding.

### Action submitted by the Registered Provider

#### Corrective & Preventive Action

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

1. Every child that has a soother now has two on site stored in a labelled box. Staff have also been retrained on the need for sterilising sooters after each use or if the child drops it etc. Management will regularly review the practice of correct storage and sterilisation of soothers with staff. Any parent who wishes their child to use a soother will be asked for one to be kept in the creche which can be stored appropriately.
2. Staff have been retrained on the need for hairnets and aprons while working in kitchen areas. Hair nets and aprons are readily available at all times. Management will ensure all staff are trained and aware of the need for hairnets and aprons in the kitchen area at all times and spot check this on a daily basis.
3. The wall in the nappy room has been painted ensuring it can be cleaned. Management will inspect that walls are kept clean in line with the weekly cleaning schedule and walls will be painted when required.
4. The bins have since been replaced.
5. Staff have been retrained to assist children in making sure that doors to sanitary areas are kept closed at all times whether in use or not. Management will spot check that doors are closed. and floor brushes are stored in the utility area on a daily basis. Staff work with the children to teach them to keep these doors closed as part of their learning about self-care and hygiene when using the toilet.
6. Staff have been instructed not to store floor brushes in nappy room lobby area and management spot checks this daily. Management will spot check that floor brushes are stored in the utility area daily. Staff work with the children to teach them to keep these doors closed as part of their learning about self-care and hygiene when using the toilet.

##### **Safe Sleep:**

7. The sleep log has been amended to include room temp, child's breathing, colour and position and staff have been retrained on how to complete the form correctly. Management will spot check during sleep time to ensure staff are recording sleeps correctly and at regular 10min intervals.
8. Staff have been retrained on safe sleep practices including what can/can't be in a cot with a child such as bottles. Management will review the safe sleep policy annually and conduct training on safe sleep practice with staff on a bi-monthly basis. Management will also be conducting spot checks during sleep times to ensure safe sleep practices are being adhered to.

The service will ensure all staff are aware of the need to inform management of any maintenance issues immediately and having regular training sessions for all staff of health and safety and infection control policies in place.

**Supporting documentation submitted**

Images, videos and documents were submitted.

**Summary Comment**

The inspector has reviewed the actions and evidence submitted. The non-compliances identified under Regulation 23 have been adequately addressed. The practice will be reviewed on 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.*

**Non-Compliance Information**

The registered provider did not ensure that children were adequately supervised at all times while attending the service. There were two staff members assigned to work in the caterpillar room with eight children aged 1-2 years. For a period of approximately 45 minutes from 11.25am to 12.10pm, one staff member was engaged in nappy changing with individual children. As a result, the other staff member was caring for seven children. During this time, there were a number of children seeking comfort and attention from the staff member. An additional staff member was required in this room during that period to care for the children.

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

**Corrective and Preventive Action**

Additional staff have been hired to ensure there is support for staff during nappy changing and sleep times, as well as lunch cover etc. We now have enough staff to ensure cover throughout the day in all rooms as well as annual leave/sick days

**Supporting documentation submitted**

No evidence submitted

**Summary Comment**

The inspector has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 27 has been adequately addressed. The practice will be reviewed on the next inspection.