

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2023FL003		
Name of Service:	Charlies Childcare (Donabate)		
Address of Service:	17/19 Rahillion Walk, Donabate, Co. Dublin		
Eircode:	K36 P267		
Name of Registered Provider:	Ronnie Carroll		
Service type:	Full Day		
Date(s) of Inspection:	13/09/2024		
No of pre-school children:	AM	62	PM 62
Address of the Early Years Inspectorate:	180-189 Lakeshore Drive, Airside Business Park, Swords, Co Dublin K67 Y5C6		
Inspection undertaken by:	S. Cully & S. Mc Kenna		
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		

Description of service

Charlie's Childcare (Donabate) is one of eight early years services owned by the registered provider. This service is conducted from a recently constructed purpose-built 2-storey premises located a newly developed housing estate in north Co. Dublin. There are 6 care rooms provided on the premises. The Wobbler 1 room, the Wobbler 2 room and the Toddler Room are located on the ground floor. The Preschool 1 room, Preschool 2 room (the pink room) and Preschool 3 room are located on the 1st floor. A sleep room is located on the ground floor as well nappy changing facilities, a wheelchair accessible toilet, kitchen, a separate laundry room and an office. On the first floor there is a dedicated staff room. A fully enclosed outdoor play area is provided to the rear of the premises. A set down area is available for parents at the front of the service.

Staffing

On the day of inspection there were 17 members of staff employed and working in the service including the manager and deputy manager. Fourteen staff were working directly with the children and one staff member worked in the kitchen carrying out catering duties. One staff members post is part funded through the Access and Inclusion Model (AIM) scheme to reduce the adult to child ratio and if necessary to work with a child with additional needs during the ECCE sessions. One staff member was on leave. The manager and deputy manager provide support in the care rooms when required. The company's regional manager and chief operating officer were present in the service following the inspectors arrival and for the remainder of the inspection.

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, 19, 20, 23 and 25; however, on inspection additional non-compliance was identified under Regulation 29. 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 inspectors wish to acknowledge the cooperation of the person in charge, deputy manager, chief operating officer, regional 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,

(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

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

(b) The service manager, deputising as person in charge, was present and in charge of the service when the inspectors arrived and for the duration of the inspection.

Following discussion with management the staff files for staff who began employment since the previous inspection were requested for review. A total of 14 new employee files were reviewed including the service manager, 13 staff who worked directly with the children and 1 staff member who carried out kitchen duties. The files in relation to the regional manager and chief operating officer have been reviewed on previous inspections.

Outstanding international police vetting in relation to a staff member employed since the previous inspection was also reviewed.

(2)(a)&(b) There were 28 written and validated references available for the 14 adults whose files were reviewed on the day of inspection.

(c) Garda vetting disclosures had been obtained for 14 staff members whose files were reviewed on this inspection. 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 10 adults whose files indicated that they had resided outside of the Irish jurisdiction for more than 6 consecutive months as adults, including the previously outstanding international police vetting.

(4) Documentary evidence was available to confirm that 11 employees whose files were reviewed and who work directly with the children in the service, including the service manager, held an appropriate childcare qualification at Level 5 or higher on the National Framework of Qualifications or a qualification deemed by the minister to be equivalent.

Non-Compliance Information

(d) International police vetting in relation to two staff members was not available for review.

- One staff members curriculum vitae indicated that they had resided in 2 international jurisdictions for more than 6 consecutive months as an adult, therefore requiring second international police vetting disclosure.
- International police vetting on file for a second staff member not available in English/Irish as required.

(4) Two staff members who work directly with children in the service did not have documentary evidence to demonstrate that they held a major award in childcare at Level 5-8 on the National Framework of Qualifications (NFQ) or a qualification deemed by the Department of Children, Equality, Disability, Integration and Youth (DCEDIY) to be equivalent. Documentation on file for one staff member suggested a third level qualification had been obtained, but it was not translated to English/Irish therefore it could not be determined that this qualification met the regulatory requirements.

Corrective & Preventive Action submitted by the Registered Provider

The registered provider provided the following response to the non-compliance.

Corrective Action

(9)(d) International police vetting from a second jurisdiction in relation to one staff member has been obtained. In relation to the vetting disclosure not translated, this staff member left the service days after the inspection and no longer works there.

(9)(4) Both staff members were qualified on the day, however a letter of qualification recognition had not been obtained. This is now on file. The second staff members qualification had not been translated to English. This has been translated and is now on file.

Preventive Action

(9)(d) This was an oversight on HR's behalf and going forward there will be additional checks of CV's by area managers to ensure all police clearance is obtained and translated.

Supporting documentation submitted

Copy of second international police vetting
Evidence of qualification recognition from the DCEDIY
Copy of translated qualification

Summary Comment

The actions and evidence submitted have been reviewed by the inspector. The non-compliance in relation to Regulation 9 (d) and (4) has 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.

(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) On the day of inspection there were an adequate number of staff members working directly with the children attending the service.

(2) The adult to child ratios were correct in the service when the Inspectors arrived unannounced and remained so throughout the inspection. The following adult to child ratios were observed when the service was operating at capacity during the inspection:

- In the Wobbler 1 room there were 9 children aged between 12 months and 1 year 4 months being cared for by 2 staff members.
- In the Wobbler 2 room there were 10 children aged between 1 year 4 months and 1 years 9 months being cared for by 2 staff members.
- In the Toddler room there were 10 children aged between 1 year 10 months and 2 years 5 months being cared for by 2 staff members.
- In the Preschool 1 room there were 13 children aged between 2 year 6 months and 3 years 5 months being cared for by 4 staff members. One staff member present in this room was employed to support children with additional needs, when necessary, as part of the Access and Inclusion Model scheme in the Preschool 3 room but was not observed to work in Preschool 3 room during the inspection.
- In the Preschool 2 ‘pink’ room there were 7 children aged between 2 years 11 month and 3 years 4 months being cared for by 1 staff member.

- In the Preschool 3 room there were 13 children aged between 3 year 4 months and 4 years 6 months being cared for by 2 staff members.

The service manager and deputy manager were available to cover staff breaks and support with the care of the children in the six care rooms when required.

(8)(a) The registered provider ensured that 2 adults were always present on the premises, verified by staff rosters and staff attendance records maintained at the service

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) The following observations are examples of how each child's learning, development and well-being was facilitated within the daily life of the service:

Basic needs:

- The staff members were observed engaging positively with the children during the inspection, frequently initiating conversations, singing songs, using warm tones of voice and appropriate body language. Appropriate language and practices were observed being used by staff when supporting children's social behaviours or supporting resolution of minor conflicts.
- The children appeared to be comfortable and familiar with their caregivers and within their environment. They looked to the staff members for comfort or support and moved freely around their play spaces.
- Nappy changing occurred regularly and as required. Staff were observed to engage with children in a caring manner while carrying out nappy changing duties. Children who were toilet trained were supported to use the toilet independently with assistance provided as required.
- Mealtimes were a social and relaxed experience for the children as they chatted together and with the staff and were given time to finish their meals. All meals and snacks are provided by the service including breakfast, morning snack, dinner and afternoon lunch.

On the day of the inspection children were served a morning snack of peach and breadsticks. For dinner children were served sausages, potato cubes and vegetables in lieu of the cod and mashed potato dinner which was listed on the menu. A lunch of ham and cheese wraps and blueberries was listed on the menu.

- The staff in the Baby/Wobbler 1 room supported children’s individual sleep needs and were responsive to children’s indicators of tiredness. Children were placed to sleep in the cot room as per their routine or when required. The other children in the service who required sleep were facilitated to sleep after midday dinner time.
- Individual care plans for children who required additional support to participate in their day or settle into the service were created and available.
- Children in the service were observed spending time outdoors on the day of the inspection.

Physical and material environment:

- The Baby/Wobbler 1 room had ample floor space for young children to move freely and make use of the push along toys made available in the care room.
- The toys and play equipment that was available were mostly available within children’s reach on open low-level shelving.
- The children in the Wobbler 2 and Toddler room had access to sensory play activities on the day of the inspection.
- The outdoor area was spacious with a surface of artificial grass. Equipment was available such as bikes, scooters, ride along cars, seesaw, slides, children’s shopping trolleys, large building blocks, goalposts and balls.

Non-Compliance Information

Physical and material environments:

1. The environments of the Toddler room and Wobbler 2 room did not support children’s opportunities to engage in self-directed and meaningful play experiences leading to mostly adult led activities on the day of inspection.
 - The Toddler room lacked organisation and identifiable interest areas, and the selection of materials available were limited in range and variety. For example, a damaged play kitchen was available with no supporting play materials, other than a dolls crib, to encourage home life and imaginary play.

Most materials that were available were stored in large fabric storage boxes which were not organised or labelled impacting on a children's opportunities to plan for play. One storage unit with 8 shelving spaces had 6 empty shelves.

- Materials in the Wobbler 2 room, such as the kitchen play equipment, were stored in large fabric storage boxes on raised shelving which was difficult for the children to access independently relying on the staff to create opportunities for play.
2. There was a reliance on plastic toys in the Wobbler 1 room. Although the staff member explained they had made sensory bottles before that they plan to make again, young children should have an opportunity to access natural and sensory materials on a daily basis.

Supporting relationships around children:

3. The family wall in the Wobbler 1 room was on display high up the wall out of children's direct eyeline limiting opportunities for interaction with family photographs alone or with peers. There was no provision of a family wall/photos/book in the Toddler room.

Corrective & Preventive Action submitted by the Registered Provider

The registered provider provided the following response to the non-compliance.

Corrective Action

1. Additional resources have been purchased for the Toddler Room to create more identifiable interest areas. We are still awaiting some of the items to be delivered to finish this. Kitchens have been replaced in Wobbler 2 and Toddler room. The toys have been moved from fabric boxes to clear boxes on lower-level shelving to be more accessible.
2. Additional sensory items and resources have been created and implemented in the room.
3. Family books have now been completed.

Preventative Actions

1. Area Managers will assist Managers to ensure the classrooms are set up with defined areas and appropriate resources. We have also self-referred to Better Start Quality Development Service for help with this. Staff engaged in training on Aistear and Siolta to support child-led practice.

2. We are engaging with Better Start for help with layout and resources.

3. The inspection took place early September when we were two weeks into the new term, the team had requested photos and was in the process of gathering them for the family walls. The team will request family photos in advance of start date from parents in order to have them in as soon as possible.

Supporting documentation submitted

Proof of purchase of additional equipment and resources as stated

Photographic evidence of new materials available in the Toddler room

Photographic evidence of improved storage of materials in Wobbler 2 and Toddler room.

Photographic evidence of Family Book on display.

Evidence of Better Start QDS referral

Evidence of staff engaging in Aistear and Síolta training

Copy of training materials

Summary Comment

The actions and evidence submitted have been reviewed by the inspector and demonstrate on-going efforts to improve environments and child-led practices including a self-referral to the Better Start Quality Development Service. The corrective and preventive actions have been accepted and implementation of stated actions will be reviewed at the next inspection. Therefore, the non-compliance in relation to Regulation 19 (1)(a) has been adequately addressed.

Part V - Care of Child in Pre-school Service

Regulation 20 – Facilities for rest and play

(1) Subject to this regulation, a registered provider shall ensure that-

(b) there are adequate and suitable facilities for a pre-school child to rest during the day, and in the case of an overnight pre-school service, during the day and the night.

Compliance Information

(1)(b)

- There were 5 standard cots available to the children attending the Wobbler 1 room. These were located in the sleep room adjacent to the Wobbler 1 room.

- Cocoon floor beds were available for the 10 children present in the Wobbler 2 room who were aged under 24 months as per the Tusla sleep guidelines. Completed sleep plans were in place as required under Tusla guidance on safe sleep provisions for children under 24 months for 8 of these children.
- Children over the age of 24 months had access to stackable floor beds.
- In each care room there was space available for children to rest during the day or take a break from play through the provision of soft mats, floor mats, child-sized sofas and cushions.

Non-Compliance Information

(1)(b)

1. In the Toddler room there were 3 children aged 22 months who were observed sleeping on stackable floor beds which is at variance to Tusla guidance on safe sleep provisions for children under 24 months. There were sleep plans in place and available for 2 of these children, but these were completed for the use of cocoon beds only.
2. Two children in the Wobbler 2 room were sleeping on cocoon beds without a completed sleep plan in place which is required under Tusla guidance on safe sleep provisions for children under 24 months when children move from sleeping in a cot to a floor bed.

Corrective & Preventive Action submitted by the Registered Provider

The registered provider provided the following response to the non-compliance.

Corrective Action

1. Additional cocoon beds have been ordered.
2. Sleep plans have been completed now for these children. These children had just transitioned onto cocoon beds and were awaiting on signed plans.

Preventive Action

1. Managers and staff have been reminded of the safe sleep policy and it was addressed at a staff meeting.
2. Sleep plans will be completed in advance of children transitioning. This was addressed at staff meeting.

Supporting documentation submitted

Proof of purchase of 2 additional cocoon beds
Completed sleep plans as required
Copy of staff meeting agenda.

Summary Comment

The actions and evidence submitted have been reviewed by the inspector. The corrective and preventive actions have been accepted. Implementation of stated actions will be reviewed at the next inspection. The non-compliance in relation to Regulation 20 (1)(b) has been adequately addressed.

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 to prevent the children from exiting unsupervised and to restrict unauthorised persons from gaining access to the service. The service had an intercom system in use to identify visitors to the main door and authorise their access.
- The staircase was adequately lit, in good condition and suitable handrails were provided.
- The windows on the first floor in the children's care rooms, were observed to be open on the day of inspection with window restrictors in place.
- The garden was safe and enclosed.
- Highchairs in use in the Wobbler room 1 were in good condition and fitted with safety harnesses which were used when children were seated in the highchair.
- The furniture, toys and play equipment appeared in good condition.

Infection Control:

- Thermostatically controlled running warm water, liquid soap and paper towels were provided at the wash hand basins in the sanitary accommodation of the service.
- A pedal operated bin was in place in the Baby/Wobbler nappy changing area.

Administration of Medication:

- No children were observed having medication administered on the day of inspection.

Safe Sleep:

- Staff carried out 10-minute physical sleep checks of sleeping children. Records of these sleep checks were maintained on the mobile application noting the child's position, colour and breathing pattern.

Fire Safety:

- The designated emergency exit doors were clearly identifiable and unobstructed.

Non-Compliance Information

General Safety:

1. On the day of inspection children in the Wobbler 1 and 2 room and the Toddler room were served sausages for dinner which were not cut appropriately to minimise the risk of choking, mainly cut diagonally and in 1 room were served whole before the inspector advised the staff member to cut the sausage. It is recommended that, to reduce the risk of choking, cooked sausages should be cut lengthways before cut into smaller pieces.
2. A choking hazard was identified when a child in the Wobbler 2 room was observed to have food from dinnertime remaining in their mouth while being placed down to sleep on a cocoon bed after dinner. The Inspector brought this to the staff members attention, who then retrieved the piece of food.

Safe Sleep:

3. During the transition to bedtime in the Wobbler 2 room, three children were observed to be given bottles of milk while being placed to sleep on cocoon beds. This practice is in variance to the services Safe Sleep policy where it states "all bibs, bottles and toys to be removed" before children are placed in cots/beds.

Infection Control:

4. Infection control procedures were not always followed in the service.
 - During an observation of nappy changing, the staff were observed to wear the same pair of gloves and apron for the changes of three individual children. No handwashing was observed after nappy changing procedures by adults or children.
 - Children in the Wobbler 1 and Wobbler 2 rooms were not facilitated to wash their hands before morning snack or midday dinner. Staff were observed to wear disposable gloves when serving food, which does not mitigate the requirement of handwashing practises
 - In the Wobbler 2 room the tables were not cleaned after play and prior to food being served.
5. On review of the soother sterilisation policy on display in the care rooms and following discussion with staff current practices it was discovered that staff were following the procedures of the previous policy which was deemed inadequate at the last inspection.

The soother sterilisation policy and procedure which was submitted as a corrective action to the previous non-compliance was not in place and implemented in the service.

Action submitted by the Registered Provider

The registered provider provided the following response to the non-compliance.

Corrective & Preventive Action

General Safety:

1. All staff were retrained on the food/feeding safety at a training day held on October 19th. This matter was also addressed at the staff meeting held September 23rd.
2. Staff were reminded and retrained on this at staff meeting and training day. Training on safe sleep is included in induction process.

Safe Sleep:

3. Staff were reminded that this practice is not in our Safe Sleep policy and were retrained on this at staff meeting and training day.

Infection Control:

4. Infection control procedures addressed at the staff meeting and included in the training day content carried out October 19th. This included nappy changing procedures, handwashing policy and procedures and general infection control practices. Going forward Managers will demonstrate the nappy changing policy and hand washing procedures to all new staff members upon starting. They will also be provided with training on this at the offsite training days which take place throughout the year.
5. The old policy was removed immediately from the centre and replaced with the correct one. This was an oversight. The correct policy has been circulated to all locations and is visible in each classroom. The Area Managers have checked it is on display and staff are aware of it. It was also covered at the training day.

Supporting documentation submitted

- Copy of October training day presentation
- Copy of company induction training presentation
- Staff meeting agenda
- Evidence of correct sterilisation procedure on display in care rooms
- Evidence that correct policy circulated to all centres.

Summary Comment

The actions and evidence submitted have been reviewed by the inspector. The corrective and preventive actions have been accepted and implementation of stated actions will be reviewed at the next inspection. The non-compliance in relation to Regulation 23 has been adequately addressed.

Part VI - Safety

Regulation 25 - First aid

(1) A registered provider shall ensure that a person trained in first aid for children is, at all times, immediately available to the children attending the pre-school service.

(2) A registered provider shall ensure that a suitably equipped first aid box for children-

(a) is safely stored in an easily accessible and conspicuous position on the premises, and

(b) is available to the children attending the pre-school service at all times.

Compliance Information

(1) Following review of staff files and the staff roster, it was evident that the registered provider ensured that there was a member of staff trained in First Aid Response (FAR) on the premises at all times.

(2)(a)&(b) Suitably equipped first aid boxes were available on the premises and these were stored in accessible and conspicuous locations out of the reach of children.

Part VII - Premises and Space Requirements

Regulation 29 - Premises

A registered provider shall ensure that the premises of the service are-

(c) kept adequately lit, heated and ventilated

Non-Compliance Information

(c) The lighting in the Wobbler 1 room could not be dimmed or turned off. On the day of inspection, children in this room were observed looking to rest in the cosy soft area provided in the room. As the lighting could not be dimmed or turned off, it was not conducive to creating a more relaxed environment within the care room to support casual resting. The staff members also agreed that having more suitable lighting would help them when settling new children within the room who are transitioning to sleeping in a cot room.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The lighting in the centre operates on sensors. This issue had already been identified and an electrician was due to change it. This work has been completed. All classrooms now have controls to either dim/turn off lighting.

Supporting documentation submitted

Photographic evidence of lighting controller available in the care room.

Summary Comment

The inspector has reviewed and accepted the actions and evidence submitted. The non-compliance in relation to Regulation 29(c) has been adequately addressed.