

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2024DS005
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Name of Service:	Once Upon a Time
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Address of Service:	The Oaks, The View, Barnoaks Citywest, Dublin 24, Co. Dublin
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Name of Registered Providers:	David McCormack, AnneMarie McCormack
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Service type:	Full Day
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Date 1 of Inspection:	03/03/2025
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Date 2 of Inspection:	04/03/2025
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No of pre-school children day 1:	AM	58	PM	43
No of pre-school children day 2:	AM	58	PM	55

Address of the Early Years Inspectorate:	Early Years Inspectorate, Suite 7, Vista Primary Care, Ballymore Eustace Rd, Naas, Co Kildare.
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Inspection undertaken by:	R. Brien & E. Mulhern
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Title:	Early Years Inspectors
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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).

Conditions if applicable	N/A
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Description of service

Once Upon A Time is a full day care service provided by the registered providers who operate 10 childcare services in Dublin. A full day care service is provided for children from 1 to 6 years. The service is registered to operate from 07:30 to 18:30, Monday to Friday.

The premises is located in a purposely adapted unit in an urban, residential area of Citywest, south Dublin. It is located over two floors. On the ground floor, there are seven care rooms and two cot rooms, an office and a kitchen. There is one care room located on the first floor.

On the first day of inspection, four care rooms were open on the ground floor. The Wobbler 1 and Wobbler 2 rooms cater for children aged 1 year. The Toddler 1 room caters for children aged 1 to 2 years. The Toddler 3 room caters for children aged 2 to 3 years. The Montessori room, which is located on the first floor, caters for children aged 3 to 4 years. On the second day of inspection, an additional care room, Wobbler 3 was open on the ground floor. This room caters for children aged 1 year.

There is a fully enclosed outdoor area to the side of the premises.

Staffing

The service currently employs 18 staff including a manager. There were 17 adults working directly with the children on both days of inspection including the operations manager and the training and development manager who arrived following the inspectors' arrival on the first day. The service also employs a staff member who carries out domestic duties.

The registered providers do not work directly in the service and were not present during the inspection. An additional manager from the company attended the closing meeting on the second day of 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/records/ health, welfare and development of child and safety. The inspection may also focus on other areas as required.

The inspection focused on an examination of compliance under the following regulations:

- 9 (1)(a)(b),(2)(a)(c)(d),(4),(7)(a)(c) – Management and recruitment,
10 – Policies procedures etc. of a pre-school service,
11 (1),(2),(8)(a) – Staffing levels,
15 (1)(f) – Record of a pre-school child,
16 (1)(h)(i)(k) – Record in relation to a pre-school service,
19 (1)(b) – Health, welfare and development of child,
22 – Food and drink,
32 (1)(a)(b)(c), (2)(a)(b), (3)(a)(b) – Complaints.

However, on inspection additional non-compliance was identified under the following regulations:

- 20 (1)(b) – Facilities for rest and play,
23 – Safeguarding, health, safety and welfare of child,
27 – Supervision.

These findings are outlined within the relevant regulations within this report.

A sampling process was used to assess compliance under the following regulations;

- 16 (1)(h) – Record in relation to a pre-school service,
19 (1)(b) – Health, welfare and development of child.

As a result, the scope of the inspection included the Wobbler 1, Wobbler 2 and Toddler 1 rooms.

A sampling process was used to assess compliance under the following regulations;

- 10 – Policies Procedures etc. of a pre-school service,

15 (1)(f) – Record of a pre-school child,

16 (1)(k) – Record in relation to a pre-school service.

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 triggered by information received by the Early Years Inspectorate on 21st February 2025.

The last inspection of this service took place on 9th December 2024 which was also triggered by information received by the Early Years Inspectorate.

Non-compliance was identified during this inspection relating to regulations 9(7)(a), 19(1)(b) and 23 where practices observed were not in line with service policies and procedures and regulatory requirements. Practices and procedures relating to these regulations were found to be non-compliant on the last inspection on 9th December 2024.

An immediate action notice was issued on the second day of inspection for non-compliance identified under Regulation 23 – Safeguarding, health, safety and welfare of child. Further information regarding this is included under Regulation 23. The registered providers submitted a response on 5th March 2025 which should address the risk identified on inspection.

Acknowledgments

The inspectors wish to acknowledge the cooperation of the person in charge, managers, staff and children who were present during 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

(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,
- (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;
- (c) these Regulations.

Compliance Information

(1)
(a)(b)
The service had a designated person in charge and a named person to deputise as required who were both on the premises throughout the inspection.

(2)

The inspection focused on the recruitment records for seven staff employed since the last inspection on 9th December 2024 and three adults from the company head office who were present during the inspection. Documentation was reviewed in respect of these adults and met regulatory requirements as follows;

(a)

Twenty written, validated references were available from a past employer.

(c)

Garda vetting disclosures from the National Vetting Bureau of An Garda Síochána were available for 10 adults. The service also demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years.

(d)

Police vetting was required for eight staff members and was available for these staff members who had lived outside the State for a period exceeding six months as an adult.

(4)

Of the 10 members of staff whose files were examined, 9 were working directly with children. Records were available evidencing that these nine staff members held the required qualification or equivalent.

(7)(a)(c)

A review of documentation demonstrated that induction records were available for staff members in line with the service policy on staff training.

Non-Compliance Information

(7)(a)(c)

The registered providers have not demonstrated effective governance measures to ensure that all employees were provided with appropriate information and training to safeguard the health, safety and welfare of children attending the service and to comply with the regulations.

It was not evident that management and staff had received appropriate training in relation to ensuring there were appropriate and suitable care practices in place in the service to meet the needs of children attending. Further information regarding this is outlined under regulations 11, 16, 19, 23 and 27.

Repeat non-compliance was found during the inspection relating to regulations 9(7)(a), 19(1)(b) and 23. Practices observed were not in line with service policies and procedures and regulatory requirements.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The area manager and operations manager have been onsite regularly since the inspection, we provided evening training and on-site training, observing and directing the staff in the classrooms.

We've hired a new manager who has more experience with the company and understands all our policies and procedures and has proven to be extremely effective in communication, organisation and compliance.

All staff have been retrained in all regulations. The area manager and operations manager will provide more consistent support and training.

Supporting documentation submitted

Written evidence was presented to demonstrate the corrective and preventive actions submitted by the registered providers.

Summary Comment

The corrective and preventive actions as stated by the registered providers have been deemed to address this non-compliance.

Part III – Management and Staff

Regulation 10 - Policies, procedures etc. of pre-school service

A registered provider of a pre-school service shall ensure that the written policies, procedures and statements specified in Schedule 5 are in place for the service.

Compliance Information

The inspection focused on policies relating to accidents and incidents, risk management, staff training, supervision of staff, healthy eating (nutrition), settling in, transitions and complaints.

Accidents and incidents

The accidents and incidents policy included information relating to the following:

- Procedures to be followed when an accident or incident involving a child occurs.
- The steps that are to be taken to contact parents/guardians of the child or emergency services if necessary.
- How information is recorded, documented and stored regarding accidents and incidents.

Risk management

The risk management policy included information relating to the following:

- Procedures to assess potential risks to children’s safety and measures to eliminate or mitigate the risks.
- How risk assessments are conducted and documented.
- The length of time risk management records will be kept.

Staff training

The staff training policy included information relating to the following:

- How staff training needs are identified and addressed.
- What resources are provided for training.
- Induction training.
- The availability of ongoing training and professional development.

Supervision of staff

The supervision of staff policy included information relating to the following:

- Staff are supervised and supported in relation to their work practices.

- The format, duration and frequency of supervision including induction and ongoing supervision.

Nutrition policy

The nutrition policy included information relating to the following:

- Healthy eating is promoted, and unhealthy foods are discouraged from being sent from home.
- Staff will sit with children during mealtimes.
- Information about the external company providing the main hot meal and how it is stored and prepared.
- How food brought from home is stored.
- Additional food is available if children are still hungry after mealtimes.
- Water is always available to drink throughout the day.

Settling in and transitions policies

The settling in and transitions policies included information relating to the following:

- How children's transitions into the setting are supported through spending shorter periods of time in the service initially.
- How children's transitions to school are supported.

Complaints

The complaints policy included the required information as outlined under regulation 32 (1).

Non-Compliance Information

The registered providers did not ensure that the healthy eating (nutrition) policy and settling in and transition policies contained the required information as follows;

Nutrition policy

1. The policy stated that any special dietary requirements or preferences can be met on request. However, apart from managing nut allergies on special occasions the policy did not specify the way the service ensures that food and drink provided complies with the dietary requirements of children.

2. The policy did not make any reference to ensuring food is appropriate to each child's age and stage of development or make any reference to portion sizes.

Settling in and transitions policies

1. The transition policy described how children are moved between rooms to facilitate ratio requirements at drop off/pick up and how they are signed in and out at these times. The policy did not make any reference to how the children are supported with these or any other transitions within the service.

The absence of the above information in the service policies could lead to inconsistent or unsafe practices and could fail to support children's developmental needs effectively.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

Nutrition Policy

1. & 2. This policy has been amended. All policies will be carefully reread and updated as needed or quarterly.

Settling in and transitions policies

1. The policy has been updated to include all our steps of supporting children's transitions. Policies will be reviewed to ensure all the steps we take in practice are included in the policy

Supporting documentation submitted

Nutrition Policy

Written evidence was presented to demonstrate the corrective and preventive actions submitted by the registered providers.

Summary Comment

The corrective and preventive actions as stated by the registered providers have been deemed to address this non-compliance.

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

11(2)

On both days of inspection on the inspector's initial walkaround of the service, the minimum ratio of adults to children were maintained in all care rooms.

(8)(a)

There were at least two adults on the premises at all times.

Non-Compliance Information

(1)

The registered providers did not ensure that there were an adequate number of adults working directly with the children at all times as outlined below;

1. On the first day of the inspection when the inspector entered the Wobbler 1 room at 10:10 there was one adult present with four children aged one year – two of whom were attending for their first day in the service. All four children were showing signs of distress including high pitched and persistent crying. Two children were clinging to the staff member, one was sitting on the floor sucking their fingers between cries, and one was standing at the side of the room. The staff member was not able to adequately attend

to all the children according to their needs and the level of comfort they required. A manager entered the room at 10:17 to assist.

2. On the second day of the inspection when the inspector entered the Wobbler 1 room at 11:49 there was one adult present with five children aged one year. The first two children were eating a meal in high chairs, the third and fourth children were crying. The fifth child was showing signs of distress including high pitched and persistent crying and clinging to the adult. The adult was not able to adequately attend to all the children according to their needs and the level of comfort they required. Further information regarding this is detailed under regulation 19.

(2)

The registered providers did not ensure the minimum required ratio of adults to children was maintained at all times as outlined below;

1. On the first day of inspection in the Toddler 1 room at 10:43, the inspector observed that there were 2 adults allocated to care for 11 children aged 1 year and 3 children aged 2 years. The minimum adult to child ratio for children aged 1 year is 1:5. The minimum adult to child ratio for children aged 2 years is 1:6. Three adults were required at this time.
2. On the first day of inspection in the Toddler 1 room at 11:20 and at 15:54 the inspector observed that there were 2 adults allocated to care for 9 children aged 1 year and 3 children aged 2 years. The minimum adult to child ratio for children aged 1 year is 1:5. The minimum adult to child ratio for children aged 2 years is 1:6. Three adults were required at this time.
3. On the second day of the inspection at 10:47 there were 2 adults allocated to care for 11 children aged 1 year in the Wobbler 2 room. The minimum adult to child ratio for children aged 1 year is 1:5. Three adults were required at this time. One of the children was on their second day transitioning into the service and was crying persistently. A second child was crying intermittently and displaying signs of over-tiredness. The adults were unable to provide the children with the comfort and care they required as they were preparing the other children for their meal. Further information regarding this is detailed under regulation 19.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

11(1)

1. & 2.

Due to the main care giver being on annual leave on the day, the children were more unsettled than usual. We have spoken to the manager that she must be present in the rooms when staff are on annual leave to comfort the children as they all know her.

The manager or assistant managers will be present during the weeks of new children settling in to ensure they can all be comforted in a timely manner and with one to one attention when required. Staff in the wobbler room will not be permitted to book annual leave during settling in weeks.

11(2)

1. Staff have been retrained to ensure they call for cover as soon as another child enters their room who arrives late to the creche.
2. We have changed the name of this room to wobblers so the staff remember that the ratio is 1:5 only and that majority of the children are under 2 years of age. Staff have been retrained to ensure they call for cover as soon as another child enters their room who arrives late to the creche.
3. Staff have been retrained to ensure they call for cover as soon as another child enters their room who arrives late to the creche.

Supporting documentation submitted

Written evidence was presented to demonstrate the corrective and preventive actions submitted by the registered providers.

Summary Comment

The corrective and preventive actions as stated by the registered providers have been deemed to address these non-compliances.

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

Compliance Information

(1)(f)

A sample of 14 records were reviewed which demonstrated that a record was available in writing which contained the information required in (f) above.

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;

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

Compliance Information

(h)

Details of the attendance of each child in the Wobbler 1, Wobbler 2 and Toddler 1 rooms were recorded at the time of entering and leaving the service.

(i)

The staff roster was available on the day of inspection.

Non-Compliance Information

(k)

It is acknowledged that a sample of thirteen accident and incident records were reviewed and had been completed appropriately, however, practices contrary to the service’s accident and incident policy were observed during the inspection.

On the first day of inspection in the Toddler 1 room at 15:54, an accident was observed by inspectors and a staff member where a child fell and banged their head on the ground. A record of this accident was not completed. The service’s accident and incident policy states that “the person who witnessed the accident will complete an accident form. This will be read and signed by the manager and signed by the child’s parent/guardian.”

Failure to record incidents and to ensure that parents have been informed of an injury to their child may pose a risk to the continuity of care of the child.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(k)

Staff forgot to write an accident report as there was no bruise or cut but they told the manager it happened, and the manager called home to inform them. Staff have been retrained on the accident and incident policy and the forms to use even if there’s no bruise or cut.

Supporting documentation submitted

Written evidence was presented to demonstrate the corrective and preventive actions submitted by the registered providers.

Summary Comment

The corrective and preventive actions as stated by the registered providers have been deemed to address this non-compliance.

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-

(b) appropriate and suitable care practices are in place in the pre-school service, having regard to the number of children attending the service and the nature of their needs.

Compliance Information

Meals and snacks were served to children at regular intervals throughout the day. Younger children were provided with bibs for mealtimes. Children were encouraged to feed themselves.

Children's nappies were changed regularly, and staff were observed engaging warmly with children when providing this care. There was a designated nap time for children attending the Toddler 1 room. Cots were provided appropriate to the children's age and stage of development. All children were made comfortable for sleep; staff removed children's shoes and outer clothing; they provided the children with blankets, and they offered soothers to those who used them. The environments were calm and conducive to sleep, with staff soothing the children as needed during this time.

Staff displayed warmth and sensitivity during interactions with the children throughout the inspection. Staff were observed speaking to children softly. Children were provided with the opportunity to play outdoors and were dressed appropriately to the weather.

Staff described how they communicate with parents daily about their child using an online application detailing information on food, sleep, nappy changes and activities.

Non-Compliance Information

(1)(b)

1. Through observations, review of documents and discussions with staff and parents it was evident that there were inadequate procedures in place to support children's initial transitions into the service. The

initial transition planning process did not adequately consider the individual routines and sleep needs of the children or provide opportunities to foster key relationships as follows;

- a. Children who were settling into the service were scheduled to start their induction at their regular nap time. On the first day of the inspection two children aged 12 months were scheduled to attend the Wobbler 1 room between 09:30 and 10:30. The children were showing signs of distress as documented under regulation 11(1). The parents of both children stated on collection that the time allocated by the service was their children's sleep time. One of the parents had emailed the service with this information beforehand but the timing had not been changed. Disrupting children's schedules and introducing them to a service when they are overtired could further increase anxiety associated with an initial transition into the service.
- b. The service did not provide consistency of staffing in the Wobbler 1 room or support key worker relationships to provide for continuity of care and secure attachments. On the first day of inspection at 11:57 there were two children aged one year showing signs of distress including persistent crying and clinging to the staff member. When the inspector asked the staff member if these children were new or if they were usually this upset the staff member said they did not know as they normally worked in a different room.
- c. On the second day of the inspection at 11:49 a staff member who had started working in the service the previous day was allocated to care for five children in the Wobbler 1 room. The staff member said they were not sure of the children's names and did not know their routines as the staff member had been moved between rooms four times since starting at 08:15. Two of the children were eating a meal. The staff member was unsure if the children had any food allergies. Three of the children were crying, one was crying persistently and clinging to the adult. When the inspector asked if the child had slept or was perhaps tired, the adult told the inspector they did not know. A parent of a child who had spent their second day in the service told the inspector that although they had spoken to management, they had not spoken to any of the staff directly caring for their child and had not been told their names.

Failure to ensure staff are provided with information essential to the children's care could impact negatively on care provision and pose a risk to the health and wellbeing of the children. Failure to provide opportunities for

consistent key relationships to be established could impact on children’s continuity of care and the development of secure attachments with their caregivers.

2. Provisions for children’s sleep requirements were observed to be service led rather than child led in the Wobbler 2 room. On the second day of the inspection inspectors observed a one-year-old child displaying signs of tiredness at 09:47 and again at 10:30. At 10:56 the inspector observed the child lying on the floor sucking a soother and holding a comforter. The child was carried from the floor to sit at the table for a meal. The child cried, rubbed their eyes and sucked on a soother intermittently while the other children ate. Although the adults had acknowledged the child was tired, the child was not placed to sleep until the designated Wobbler 2 room sleep time after the meal at 11.38. Failure to facilitate children to sleep according to their needs can lead to increased irritability and can impact negatively on their emotional and physical development.

Practices and procedures relating to this regulation were found to be non-compliant on the last inspection on 9th December 2024.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(1)(b)

1.
 - a. The manager has been retrained on the inductions and how to organise them around the children’s routine from home. The manager has been retrained and all staff to communicate effectively with the parents about their child’s routine during their settling in week and to amend any times that doesn’t suit.
 - b. The main caregiver was on annual leave, the management team has been informed that they are to be in the classrooms when staff are on annual leave to ensure the children’s routines are followed.
 - c. Management have been retrained on ensuring staff that know the children are in the classrooms with them and ensuring the induction times are readjusted as needs to suit the child’s routine. The staff wall is available to see in reception and when new staff are employed this is sent to

parents via an online application. Management have been reminded to ensure they introduce staff to the parents which normally happens but on the day of inspection this was missed.

- Staff have been reminded of the signs of tiredness for children to observe them more closely. There are enough cots available for children to go to sleep as needed. Retraining for staff on safe sleep policy and the importance of following the children's needs.

Supporting documentation submitted

Written evidence was presented to demonstrate the corrective and preventive actions submitted by the registered providers.

Summary Comment

The corrective and preventive actions as stated by the registered providers have been deemed to address these non-compliances.

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.

Non-Compliance Information

(1)(b)

Appropriate rest facilities were not provided for all children under 2 years in the Toddler 1 room. On the first day of inspection, five children aged 1 year were observed on low stackable beds. On the second day of inspection, eight children aged 1 year were observed on low stackable beds.

These beds were not fitted with firm, flat, waterproof and breathable mattresses. This may impact the safety and quality of sleep for children under 2 years.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(1)(b)

The under 2 beds were ordered in January and were delayed due to an issue in the company. We've gotten these delivered and all children have the correct beds for their age, we also got spare beds from other centres and then

some children have reached 2 years of age and are able to sleep on the over 2 beds now. Managers have been reminded which beds are to be used for under 2 years of age and over 2 years of age.

Supporting documentation submitted

Written evidence was presented to demonstrate the corrective and preventive actions submitted by the registered providers.

Summary Comment

The corrective and preventive actions as stated by the registered providers have been deemed to address this non-compliance.

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.

Compliance Information

Breakfast, lunch and an afternoon snack were prepared and cooked on the premises. Dinner was provided by an external catering company and reheated on site.

Documentation evidenced that breakfast was provided between 07:30 and 09:00. Tea was provided at 11:00 and children were served turkey wraps and vegetable slices. Dinner was served in the care rooms between 14:00 and 14:30 and consisted of turkey mince chilli or vegetarian chilli with potatoes. An afternoon snack was served at 16:00.

Additional portions were available in the care rooms and staff were observed offering extra servings to children during the inspection. Children who did not eat the meals served by the service were provided with an alternative. The service had a menu plan for tea and dinner in place which detailed a range of adequate, suitable, nutritious and varied meals. The plans included a list of allergens in each meal. During the inspection, the meals provided to children were observed to cater for children’s specific dietary requirements.

Water stations were available in the care rooms. All children were given a drink with their meals.

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 inspectors found by observation of practice, review of documentation and discussion with staff that the registered providers had not taken adequate measures to safeguard all children attending.

General Safety:

1. An Immediate Action notice was issued on the second day of inspection as a potential safety risk was observed regarding medication as follows;
 - a. Staff caring for a child with asthma were not aware that the child had asthma and that medication for the child was available in the service. This posed a risk of delaying appropriate medical attention if the child became unwell.
 - b. A review of documentation evidenced that the care plans of three children who were present on inspection stated that they may require medication for mild allergic reactions which was not available during the inspection. Inspectors asked staff if this medication was available, but staff were not aware of the requirement for these medications. This posed a safety risk of delaying appropriate medical attention if they became unwell.
2. An accident form was not completed for an accident which occurred on the first day of inspection as detailed under regulation 16. There was no evidence to demonstrate that parents had been made aware of an injury to their child which had occurred in the service. Failure to record incidents and to ensure that parents have been informed of an injury to their child may pose a risk to the continuity of care of the child.

Safe Sleep:

3. In the Toddler 1 room 11 children aged 1 year were observed on low stackable beds during the inspection. There was no evidence available to demonstrate that consultation with parents had taken place to ensure

safe and agreed sleep plans were in place and that parents had given consent for their child to sleep on a floor bed rather than in a cot.

Practices and procedures relating to safe sleep practices were found to be non-compliant on the last inspection on 9th December 2024.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1.
 - a. Staff have been retrained in all children's care plans to ensure they are aware of everyone and not just those in their primary classrooms. The medication has been moved from the children's bag to the classroom press for the use in the event on an emergency. Staff have been retrained on using an inhaler for the child.

We've implemented a monthly care plan reread like the monthly fire drills to ensure staff are constantly aware of all children's allergies or medical conditions.
 - b. The medication has been moved from the children's bag to the classroom press for the use in the event on an emergency.

We've implemented a monthly care plan reread like the monthly fire drills to ensure staff are constantly aware of all children's allergies or medical conditions.
2. Staff forgot to write an accident report as there was no bruise or cut but they told the manager it happened, and the manager called home to inform them. Staff have been retrained on the accident and incident policy and the forms to use even if there's no bruise or cut.

Safe Sleep:

3. The under 2 beds were ordered in January and were delayed due to an issue in the company. We've gotten these delivered and all children have the correct beds for their age, we also got spare beds from other centres and then some children have reached 2 years of age and are able to sleep on the over 2 beds now. Managers have been reminded which beds are to be used for under 2 years of age and over 2 years of age. All staff have been retrained to ensure they receive the risk assessments back from the parents for permission to use the beds and not to accept verbal confirmation.

Supporting documentation submitted

General Safety:

Written evidence was presented to demonstrate the corrective and preventive actions submitted by the registered providers.

Safe Sleep:

Written evidence was presented to demonstrate the corrective and preventive actions submitted by the registered providers.

Summary Comment

The corrective and preventive actions as stated by the registered providers have been deemed to address these non-compliances.

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

On the first day of inspection in the Toddler 1 room at 11:33, a child aged 18 months was observed to climb on top of a table and to stand on the table. There were two staff present in the care room at this time. One staff member was supporting a child to wash their hands, and the second staff member was speaking to children at the other end of the room. The inspector immediately brought this to the attention of staff, and a staff member promptly lifted the child down from the table.

During this time three adults were required in the care room as detailed under regulation 11. Adequate supervision was not provided during this time to ensure the safety and wellbeing of all children present. This is at variance with the service policy on supervision of children which states that practitioners should ensure the safety and wellbeing of the children at all times.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

Staff have been retrained on the supervision policy to ensure the well-being and safety of the children.

Supporting documentation submitted

Written evidence was presented to demonstrate the corrective and preventive actions submitted by the registered providers.

Summary Comment

The corrective and preventive actions as stated by the registered providers have been deemed to address this non-compliance.

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 complaints policy was available in the service which specified the following:
- (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.
 - (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) The service had a record of complaints made in respect of the service.
- (b) The service had documentary evidence to demonstrate that if a complaint was received it was dealt with according to the service complaints policy.

(3)

A record in writing referred to in paragraph (2)(a) was available which specified the following:

- (a) the nature of the complaint and the manner in which the complaint was dealt with.
- (b) This record was available for inspection on the premises by an authorised person.