Our Core Funding Quality Action Plan Report 2023/24

Information entered will be shared with the DCEDIY, and their agents where appropriate.

Our Service Details.

1

Our Service Reference Number:

09CE0112

2

Our Service Name: *

Burren Sonas Kindergarten

3

Our Service Type: *

Early Learning & Care

Early Learning & Care & School Age Childcare Combined

Standalone School Age Childcare Service

Childminder

4

Which option/s did you choose?

Select all that apply.

- 1. Inspection Reports (Tusla or Department of Education)
- 2. Better Start Quality Development Service
- 3. National Síolta Aistear Initiative (NSAI)
- 4. Comprehensive review and development of chosen statements, policies, procedures, and practices
 - 5. Other Quality Improvement Activities

5

Which of the following statements best represents the reason for your choice? *

Select all that apply.

- Our service wanted to focus on recommendations that were outlined in a recent inspection report.
- Our service is already engaged with the Better Start Quality Development Service.
- Our Service felt the time was right to engage with the Better Start Quality Development Service.
- Our service had recently engaged in NSAI training and wished to continue.
- Our service identified the need to review our policies and procedures.
- Our service wanted to enhance the quality of a specific area of practice.
- Other

6

Which of the following statements best represents the support you sought:

Our service worked independently.

| Our service worked independently and accessed resources. |
|--|
| Our service sought support from one or more support agencies. |
| |
| 7 |
| If you accessed support, what type of supports did you avail of? * |
| Select all that apply. |
| Training/CPD |
| Mentoring |
| Written resources |
| Communities of practice |
| Online resources |
| Information and guidance |
| ✓ N/a |
| Other |
| |
| 8 |
| If you sought support, please identify which of the following agencies supported you. * |
| Select all that apply. |
| Better Start |
| Blathú (Irish Steiner Kindergarten Association) |
| Barnardos |
| Childminding Development Officer (CMDO) |
| Childminding Ireland, National Childminding Association of Ireland |
| City/County Childcare Committee |
| Early Childhood Ireland |

| National Childhood Network |
|--|
| St. Nicholas Montessori Teachers Association/ Society of Ireland (SNMSI) |
| ✓ N/a |
| Other |
| |
| |
| 9 |
| ⁹ Did you achieve the actions that you set out to achieve? |
| * |
| |
| Some |
| ○ None |
| |
| 10 |
| Are the actions that you set out to achieve: |
| |
| Completed (2023/2024) |
| Ongoing (2024 +) |
| |
| 11 |
| Briefly outline the steps your service took in implementing your Quality Action Plan. * |
| We reviewed our policies |
| |
| |

12

Briefly outline how your Quality Action Plan has enhanced quality provision in your setting.

We set out to become a better provider

13

What were the main challenges you experienced when engaging in the Quality Action Plan process? (Select all that apply)

Consider all stages of the Quality Action Plan process:

- 1. Reflecting and evaluating current practice
- 2. Identifying actions to improve quality
- 3. Completing the quality action plan template
- 4. Implementing the quality action plan
- 5. Reviewing, assessing and modifying the plan as needed
- 6. Completing this end of year report

| Understanding the proce |
|-------------------------|
|-------------------------|

Time

Finding workshops that were relevant to our chosen option/choice

| \checkmark | Accessing | supports | from | the | agencies |
|--------------|-----------|----------|------|-----|----------|
|--------------|-----------|----------|------|-----|----------|



Choosing the wrong option for our service

Other

14

Can you build on the actions you identified this year in next year's Quality Action Plan (2024/25)?

Yes

🔵 No

15

Please provide a brief explanation for your answer. (to question 14) *

Areas of progress were identified

Finish & Submit

16

*

I would like to:

Finish & Submit



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