

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2015DR057
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<b>Name of Service:</b>	Tigers Leopardstown
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<b>Address of Service:</b>	Leopardstown Centre, Ballyogan Road, Leopardstown, Dublin 18, Co. Dublin
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<b>Eircode:</b>	D18 WD62
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<b>Name of Registered Provider:</b>	Therese Noonan
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<b>Service type:</b>	Full Day, Part Time
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<b>Date of Inspection:</b>	28/11/2024
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<b>No of pre-school children:</b>	AM	80	PM	80
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<b>Address of the Early Years Inspectorate:</b>	The Brunel Building, Heuston South Quarter, St. John's Road West, Dublin 8
<b>Inspection undertaken by:</b>	R. Brien & O. Quill
<b>Title:</b>	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).

<b>Conditions if applicable</b>	Not applicable
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### Description of service

Tigers Leopardstown is a full day care service provided by the registered provider which operates 18 childcare services in Leinster and Cork. The service provides full day and sessional care for children from 0 to 6 years. The service operates from 07:30 to 18:30, Monday to Friday.

The service is located in a purpose-built unit over two floors located within a retail shopping park in a residential area of south Dublin. There are eight care rooms in the service. The Junior Discoveries 1 room caters for children from 10 months to 1 year. The Junior Discoveries 2 and Senior Discoveries 1 rooms cater for children aged 1 year. The Senior Discoveries 2 room caters for children aged 1 to 2 years. The Explorers 1 room caters for children aged 2 years. The Explorers 2 room caters for children aged 2 to 3 years. The Junior Active Cubs and Active Cubs rooms cater for children aged 3 to 5 years.

There are three designated cot rooms and a fully enclosed outdoor space is available to the rear of the premises. The outdoor space was accessible directly from care rooms on the ground floor and was divided into separate areas to cater for the various age groups; enclosed outdoor balconies were also available to children from three care rooms on the first floor.

### Staffing

The service currently employs 25 staff including a manager. There were 22 staff working directly with the children on the day of inspection. The service also employs a chef and a cleaner. A Quality manager employed by the registered provider arrived during the morning of the inspection.

The registered provider does not work directly in the service and was not present during 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/records, safety and premises and facilities. 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)-(d),(3),(4) Management and Recruitment,  
11(1),(2),(8)(a) Staffing Levels,  
15(1) Record of a Pre-school Child,  
29(d) Premises.

However, on inspection additional non-compliance which posed a risk was identified under Regulation 23 Safeguarding, Health, Safety and Welfare of Child.

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

A sampling process was used to assess compliance under regulation 15(1) Record of a Pre-school Child.

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 11 November 2024.

An Immediate Action Notice was issued on 29 November 2024 for non-compliance with regulation 23 as a large crack was observed in the wall in the outdoor area.

The registered provider submitted a response on 02 December 2024 detailing plans to complete repairs to the wall and how use of the outdoor play area by children will be managed until works are complete which was deemed to mitigate the risk observed on the day of inspection.

## Acknowledgments

The inspectors wish to acknowledge the cooperation of the person in charge, staff and children who were present on the day of the inspection.

### Part III – Management and Staff

#### Regulation 9 – Management and recruitment

*(1) A registered provider shall ensure that-*

- (a) the service has a designated person in charge and a named person who is able to deputise as required,*
- (b) at all times during the period when the pre-school service is being carried on, the designated person in charge or the named person referred to in subparagraph (a) is on the premises, and*

*(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.*

*(3) The procedures specified in paragraph (2) shall be carried out prior to any person being appointed, assigned or allowed access to or contact with a child attending the pre-school service.*

*(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)(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 included a review of 16 staff files for adults who had commenced working in the service since the last inspection on 17 October 2023 and included a review of Garda vetting disclosures for all staff. Documentation was reviewed in respect of these adults and met regulatory requirements as follows:

(a)(b)

Of the 32 written and validated references that were required, 30 were available from a past employer and 2 were available from a reputable source.

(c)

Garda vetting disclosures from the National Vetting Bureau of An Garda Síochána were available for the 25 staff members employed to work in the service. 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 15 staff members and was available for these staff members who had lived outside the State for a period exceeding 6 months as an adult.

(4)

Records were available evidencing that 16 staff members who were employed to work directly with the children held the required qualification or equivalent.

## Non-Compliance Information

(3)

The registered provider did not ensure that a police vetting disclosure was obtained for one adult prior to them commencing work in the service. The staff member commenced working in the service on 19 June 2024 and police vetting was obtained on 26 June 2024.

## Corrective & Preventive Action submitted by the Registered Provider

### **Corrective and Preventive Action**

(3)  
Police Vetting is on file for the colleague. This had been applied in advance of starting. Prior to commencement of employment, all Tigers colleagues must apply (and have proof of same) for International Vetting certificates/disclosures. The Recruitment and Vetting Policy was updated in October 2024.

### **Supporting documentation submitted**

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

## Summary Comment

The corrective and preventive actions as stated by the registered provider 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

(1)

An adequate number of adults were working directly with the children at all times during the inspection.

(2)

The minimum ratio of adults to children for full day care services was adhered to at all times during the inspection. There were 80 children attending the service being supervised by 22 adults on the day of inspection.

(8)(a) There were at least two adults on the premises at all times.

## 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:*

- (a) the name and date of birth of the child;*
- (b) the date on which the child first attended the service;*
- (c) the date on which the child ceased to attend the service;*
- (d) the name and address of a parent or guardian of the child and a telephone number where that parent or guardian or a relative or friend of the child can be contacted during the hours of operation of the service;*
- (e) authorisation for the collection of the child;*
- (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;*
- (g) the name and telephone number of the child's registered medical practitioner;*
- (h) record of immunisations, if any, received by the child;*
- (i) written parental consent for appropriate medical treatment of the child in the event of an emergency.*

### Compliance Information

(1)  
A sample of 12 records were reviewed which demonstrated that a record was available in writing which contained the information required in (a) to (i) above.

## 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

##### General Safety:

1. An Immediate Action Notice was issued on the 29 November 2024 as a large crack was observed in the boundary wall in the outdoor area. It was possible to see through the crack to the other side of the wall. Loose plaster was observed on the wall in a number of areas. A small tree was observed growing out of the top of the wall in another area. Children were observed playing in the outdoor area beside the wall on the day of inspection posing a safety risk should the wall become unstable.

#### Action submitted by the Registered Provider

##### Corrective & Preventive Action

##### General Safety:

1. A temporary fence has been purchased to run parallel to the wall to ensure children are not near the wall. The fencing was delivered on Tuesday 3rd of December and will remain in place until the wall has been repaired. Daily risk assessments are being carried out on the area to mitigate any risk. Prior to the inspection, we had been liaising with the building's management company regarding the repairs to the wall. On Tuesday 12th November, they confirmed that having consulted the land registry map, the wall is in the full ownership of our landlord. We immediately engaged a construction company to repair the wall. The works were due to be carried out in November. However, due to the drop in outdoor temperatures, they rescheduled the work until Springtime (February/March). The construction company have advised via phone on 2nd of December they can no longer facilitate the works. Two additional companies have been contacted and quotes received for works. We are awaiting dates of availability to schedule.

##### Supporting documentation submitted

##### General Safety:

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

## Summary Comment

The corrective and preventive actions as stated by the registered provider have been deemed to address this non-compliance once repair works have been carried out. These actions will be assessed on the next inspection.

## Part VII - Premises and Space Requirements

### Regulation 29 - Premises

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

*(d) cleaned, maintained and repaired, as required*

## Non-Compliance Information

- (d)
1. The cleaning schedule for the service was documented as being carried out; however, a build-up of dirt and dust was observed on areas of the flooring and skirting boards throughout the service which required a deep clean.

Areas of the service were observed to require maintenance and repair as follows;

### Care Rooms:

2. The paintwork was chipped in areas throughout the service with plasterboard exposed in places.
3. A hole was observed in the wall in the Explorers 1 room with lumps of plaster exposed. It is acknowledged that staff stated that this had been reported to maintenance.
4. In the Junior Active Cubs room, part of a corner of a pillar was damaged exposing the wire mesh and plaster board within the wall.
5. In the Junior Discoveries 2 and the Senior Discoveries 2 rooms parts of the wall were damaged exposing the sharp wire mesh and plaster board within the wall.
6. In the Junior Active Cubs room a small section of plasterboard and wire mesh were exposed at ground level beside the window.
7. In the Junior Active Cubs room, part of the skirting board at the window was damaged and worn exposing an unfinished wooden surfacing.

8. In the Explorers 1, Explorers 2 and Active Cubs rooms, the wooden cupboards under the children's sinks in the care rooms were water damaged and the laminate had broken away in places exposing an unfinished wooden surface.
9. The wooden frame around the mirrors above the children's sinks in the Explorers 1 and Explorers 2 rooms were water damaged.
10. In the Explorers 1 and Junior Active Cubs rooms the wooden lids of play trays were observed to be worn and water damaged and were unsuitable for use.
11. A sticky residue was observed on the floor in two areas of the Explorers 1 room and in one area of the Active Cubs room.

### Sanitary Areas:

12. In the sanitary area adjacent to the Junior Active Cubs room a small hole was observed where the wall meets the ceiling in one of the toilet cubicles. Damp and black mould were observed on the wall and staff confirmed that there is a leak in the roof. It is acknowledged that staff stated that this had been reported to maintenance and is awaiting repair.
13. In the sanitary area adjacent to the Explorers 1 and Junior Active Cubs rooms, the wooden cupboards under the children's sink were water damaged and the laminate had broken away in places exposing an unfinished wooden surface.
14. In the sanitary area adjacent to the Junior Active Cubs room, a small hole was observed where the wall meets the tiling in one of the toilet cubicles. The plaster was worn away, the concrete was exposed and a small gap was observed above the tiling.
15. In the sanitary area adjacent to the Junior Active Cubs room, the laminate layer of the two toilet cubicle doors had broken away in places exposing an unfinished wooden surfacing.

### Outdoor Area:

16. In the outdoor area the wooden fencing dividing up the play areas was observed to be splintered and broken in places.
17. In the outdoor area, the wooden frame of a blackboard was observed to be water damaged exposing an unfinished wooden surface.
18. In the outdoor area, silver duct tape around a blackboard was torn and peeling away.

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

#### Corrective and Preventive Action

- (d)
1. This was addressed with the cleaner who actioned this and removed the build-up of dust on the flooring areas and skirting boards. The cleaner was briefed on the procedure to complete the cleaning schedule. Manager & deputy will supervise and monitor practice.  
The cleaner's checklist has been updated to reflect this. Manager & deputy will supervise and monitor practice going forward and complete a sign off daily. Colleagues have been reminded to inform management of any issues in relation to cleaning. This has also been added to the January Training agenda. Manager & deputy will supervise and monitor practice going forward.

#### Care Rooms:

The maintenance team visited and assessed the issues to determine the schedule of works. A plan was put in place to action all maintenance issues addresses based on the severity and availability of the team to complete. The works have begun in sections based on priority assigned.

2. The areas have been filled in and all area's exposed covered. The chipped painting has been fixed.
3. The hole in the wall has been repaired and additional door stoppers added.
4. The pillar has been repaired.
5. The parts of the wall & plasterboard have been repaired in Junior Discoveries 2 and the Senior Discoveries 2.
6. The plasterboard has been repaired and mesh covered in Junior Active Cubs room.
7. The skirting board has been replaced in Junior Active Cubs.
8. A schedule has been set for the replacement of the wooden cupboards under the children sinks in the care rooms based on the availability of the team and plumber. The Explorers 1 room has been complete.

The Explorers 2 room is scheduled for weekend 11th of January and the Active Cubs room is scheduled for late January/early February.

9. The wooden frames around the mirrors in Explorers 1 & 2 are scheduled for completion alongside the cupboards.
10. The wooden lids of play trays have been replaced.
11. Sticky residue was removed.

### **Sanitary Areas:**

12. The leak has been addressed with the management company. They are scheduling for the leak to be fixed and we are awaiting confirmation of the dates. The area has temporarily been repaired, mould removed and area covered.
13. A schedule has been set for the replacement of the wooden cupboards under the children sinks in the care rooms based on the availability of the team and plumber. The Explorers 1 room has been complete. The Explorers 2 room is scheduled for weekend 11th of January and the Active Cubs room is scheduled for late January/early February.
14. The gap has been covered temporarily. The wall area will be fully replaced once the source of the leak has been fixed.
15. The cubicle doors have been replaced.

### **Outdoor Area:**

16. The maintenance team visited and assessed the fence. A risk assessment was completed on the fence and the sections identified that require replacing. This has begun in sections.
17. The blackboard has been removed.
18. The blackboard has been removed.

For all maintenance issues a 'Maintenance Request form' is completed on our system and submitted to the operations team. The facilities coordinator arranges our maintenance team or third-party engineer to attend to the issue.

Colleagues were reminded to risk assess and flag any areas of concern during their Daily Risk Assessments and note these on a Maintenance Request Form when required. Manager and deputy will supervise and monitor practice.

### **Supporting documentation submitted**

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

## Summary Comment

The corrective and preventive actions as stated by the registered provider have been deemed to address the following non-compliances; 1-7, 10-11, 15, 17-18.

The corrective and preventive actions as stated by the registered provider have been deemed to address the following non-compliances once repair works have been completed; 8-9, 12-14, 16. These actions will be assessed on the next inspection.