

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015DR065
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Name of Service:	Room To Grow
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Address of Service:	1 Watson Road, Killiney, Co. Dublin
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Eircode:	A96 TR90
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Name of Registered Provider:	Pauline Kelly
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Service type:	Full Day, Part Time
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Date of Inspection:	02/07/2025
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No of pre-school children:	AM	38	PM	41
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Address of the Early Years Inspectorate:	Early Years Inspectorate, Floor 7 Brunel Building, Heuston South Quarter, St. John's Road West, Kilmainham, Dublin 8
Inspection undertaken by:	H Sutherland, S Quigley
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
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Description of service

Room to Grow is a full day care service located in an urban, residential area of Killiney, South County Dublin. Care and education are provided to children aged between 0-6 years between the hours of 8.00am to 5.30pm Monday to Friday. The service operates from a purposely adapted, single storey residential property and comprises of four care rooms within the main building. The children have access to an outdoor play area to the rear of the premises.

Staffing

The service currently employs fourteen adults including the designated person in charge. The registered provider does not work in the service. On the day of inspection, eleven staff members were present working directly with the children, including the designated person in charge. The registered provider arrived subsequent to the inspector's arrival to facilitate 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 records. The inspection may also focus on other areas as required.

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

Regulation 9 (1)(a)-(c),2(a)-(d),3,4-Management and recruitment

Regulation 11(1), (2)-Staffing levels

Regulation 15(1) -Records of a preschool child

Regulation 19(1)(b)-Health welfare and development of children

Regulation 23-Safeguarding health safety and welfare of child

Regulation 26(1), (2), (4) Fire safety measures

On inspection additional non-compliance was identified under Regulation 8 -Notification of change in circumstances. These findings are outlined in the body of the 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 registered provider, person in charge, staff and children who were present on the day of the inspection.

Part II - Registration and Register

Regulation 8 - Notification of change in circumstances

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

Non-Compliance Information

(1)
The registered provider failed to notify the agency of a change in person in charge in 2023 and a change in service opening hours. The agency must be informed of any such change at least sixty days before the proposed change.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

A submission will be made for the change in person in charge and opening hours.

Supporting documentation submitted

No evidence submitted.

Summary Comment

The inspector has reviewed the actions submitted. The non-compliance identified under Regulation 8 (1) has been adequately addressed.

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
 - (c) there is a clear management structure in the service that identifies the lines of authority and accountability in the service and the specific roles and responsibilities of each employee and unpaid worker.
- (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) The service had a designated person in charge and a named person to deputise as required.
 - (b) The person in charge was present when the inspectors arrived unannounced to the service. Conversation with the person in charge and staff demonstrated that a designated person is on the premises at all times during the opening hours of the service.
 - (c) The service had a clear management structure and staff were aware of their own roles and responsibilities.
- (2) Following review of staff files, it was confirmed that seven adults had commenced working in the service since Regulation 9 was last inspected on 23 November 2022. Documentation required under regulation 9(2)(3)(4) was reviewed in respect of the seven adults as detailed below. The requirements of Regulation 9(2)(c) relating to Garda Vetting was reviewed for all adults employed to work in the service.
- (a) Ten written and verified references were available from past employers.
 - (b) Four written and verified references were available from a source other than a past employer.
 - (c) Garda vetting disclosures had been obtained for fifteen adults, fourteen of which were employed to work directly with the children. However, the service did not adhere to the re-vetting timeframes as outlined in the Early Years Inspectorate Regulatory Notice, requiring services to renew Garda vetting every three years. Please refer to the information outlined under Regulation 23 of this report.
 - (d) Police vetting was available in respect of one adult who had lived outside of the State for a period longer than six months as an adult.
- (4) Documentation was available to show that the seven adults who work directly with children attending the service held at least a major award in Early Childhood Care and Education at Level 5 or above on the National Framework of Qualifications or a qualification deemed equivalent by the Department of Children, Disability and Equality (DCDE).

Non-Compliance Information

- (2)
- (d) Documentation was unavailable to establish whether one staff member had lived outside the State for a period of longer than six consecutive months as an adult
- (3) The registered provider did not ensure the following checks were carried out prior to four adults commencing employment in the service.
- Documentary evidence available indicated that two adults did not have their references validated before they commenced employment and one adult did not have a second reference validated.
 - Documentary evidence available indicated that two adults had commenced employment within the service prior to receipt of Garda vetting.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

- (2)
- (d) A curriculum vitae was provided by the staff member establishing that there was no requirement for police vetting.
- (3) The registered provider has obtained a second validated reference for the employee. The registered provider has stated, going forward all timeframes on curriculum vitae's will be inspected to ensure police vetting is not required and all references will be validated prior to the employees start date.

Supporting documentation submitted

- (2)
- (d) Record submitted.
- (3) Record submitted

Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 9 (2) (d) and (3) 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.*

Compliance Information

- (1) On the day of inspection there were an adequate number of adults working directly with the children to meet their care needs. There were eleven adults available to thirty-eight children in the morning and eleven adults available to forty-one children in the afternoon.
- (2) The minimum adult to child ratio requirement was maintained in accordance with the children's ages and type of service delivered.

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.*

(3) A record in writing referred to in paragraph (1) or (2) shall be open to inspection on the premises by-
(c) an authorised person.

Compliance Information

- (1) A sample of twenty-two children's files were reviewed as part of the inspection. The registered provider ensured that the information required under (a), (c), (d), (e), (i) was maintained for each child.
- (3) (c) All records requested by the inspector were available for review.

Non-Compliance Information

- (b) One of the records reviewed did not contain details of the date on which the child first attended the service.
- (f) One record did not specify if there were any details required 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) One record did not detail the name and telephone number of the child's medical practitioner.
- (h) One record did not detail a record of immunisations, if any, received by the child.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The children's files have been updated with the required information. The registered provider has stated that all files belonging to children currently attending the service have been inspected and updated and all files for new children will be thoroughly inspected prior to the child's start date to ensure all information is in place.

Supporting documentation submitted

No evidence submitted.

Summary Comment

The inspector has reviewed the actions submitted. The non-compliance identified under Regulation 16 has been adequately addressed.

Part V - Care of Child in Pre-school Service

Regulation 19 - Health, welfare and development of child

(1) A registered provider shall, in providing a pre-school service, ensure that-

(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

The inspectors observed care practices that were consistent and responsive to children's needs. Staff interacted warmly with the children and were observed to encourage children to positively interact with their peers. Transitions between daily routines such as moving from play to mealtimes or preparing for rest were managed calmly and with appropriate support to help the children adjust with ease. Mealtimes were unhurried and well organised with staff sitting with children and providing support and encouragement to promote independence. Staff reported that the services healthy eating policy is shared with the parents at the start of the year and the parents provide snacks and the service provides breakfast and a hot meal. Drinking water was available to children throughout the day and staff provided children with drinks at mealtimes.

Nappies were changed routinely and as needed and was observed as a positive experience with staff interacting warmly with children. Older children used the toilet independently and staff remained close by to assist if needed. Children had the opportunity to sleep and rest during the day. Rest areas were available in the care rooms for older children to take a break from activities and younger children slept at a designated rest time following lunch. Staff reported that children requiring sleep at other times of the day were accommodated. Music conducive to sleep was played in the background in sleep rooms creating a calm atmosphere and staff were observed to comfort and reassure children during sleep time and remained present until each child was settled.

Play was child led and conversation with staff and observation of practice demonstrated that staff followed children's interests, encouraged exploration and extended their learning experiences by using their observations to inform future plans. Children were observed to move freely around the care rooms playing alone and in small

groups and accessing materials of interest with ease. All children had the opportunity to engage in outdoor play, during which staff were observed to be attentive and responsive.

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 entrance doors into the service were adequately secured to prevent unauthorised persons accessing the service or children exiting unsupervised.
- Cleaning agents were stored out of reach of children.
- Staff demonstrated appropriate safety practices by applying sun cream to children prior to taking them to the garden.

Infection Control:

- Liquid soap, warm water and single use paper towels were available at wash hand basins.
- Children's bed linen was appropriately stored to prevent cross contamination.
- Care rooms were observed to be clean and hygienic and cleaning schedules detailing cleaning tasks were available for review.
- Staff demonstrated knowledge of exclusion periods for common illnesses.

Safe Sleep:

- Staff were observed to carry out physical checks on sleeping children every ten minutes.
- A sleep log was maintained detailing the room temperature, breathing pattern, colour and position of the child.
- Standard cots and low-level beds were available for sleep and were used in accordance with children's developmental needs.
- The temperature of the rooms where children slept were maintained at the required temperature range.

Non-Compliance Information

General Safety:

1. The service did not adhere to the re-vetting timeframes as outlined in the Early Years Inspectorate Regulatory Notice, requiring services to renew Garda vetting every three years for five staff members working in the service.
2. A table in the Playgroup room was covered in torn plastic presenting a potential safety risk for children.
3. Trailing cables from two chargers, two floor fans and an extension lead were accessible to children in the Montessori two room posing a potential safety risk.
4. A number of hazards were observed in the outdoor area used by the children
 - A plastic tunnel was broken in areas exposing sharp edges.
 - Wood on a storage shed was observed to be eroded in areas exposing nail heads which were at children's level.
 - A wire mesh intended to prevent access to the back of the shed had come away from the surface exposing nail heads and creating a gap that children could potentially gain access to.
 - A wooden playhouse containing sandboxes used by the children showed signs of erosion around the base with exposed wood splinters. Inadequate maintenance of the outdoor areas can pose a risk to children's safety.

Infection Control:

A number of practices observed were at variance with the infection control policy in place in the service and posed a risk of cross contamination as follows:

5. A staff member was observed disposing of waste following nappy changing by continuously manually lifting the lid of the bin instead of using the foot pedal provided.
6. Plastic bags were used in children's bathrooms to dispose of waste. This practice required children to have direct hand contact with the bag to dispose of waste.
7. Children's hands were not washed in the playgroup room following outdoor play.
8. The wooden safety ledge on the nappy changing unit in the Playgroup room did not have a lacquered finish exposing porous wood increasing the risk of bacteria absorption and compromising the ability to effectively clean and sanitise the surface.

Administration of Medication:

9. The following information was observed to be missing from a sample of five prescribed medicine records reviewed in the Playgroup room and at variance with the services administration of medication policy. The absence of key information on medicine forms can result in risk of harm to a child.

- No parents signature on one record
- No pre consent obtained on three records
- No witness signature on one record
- Childs name not recorded on two records

Outing:

10. The person in charge and staff reported that there was no risk assessment completed prior to staff taking children attending the Baby room on a trip to a local green space posing a potential safety risk to children.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1. Garda vetting has been submitted for five staff members. Annual vetting checks will be carried out quarterly each year to ensure the service meets the requirement of the re-vetting timeline.
2. The plastic has been removed from the table and furniture coverings will be checked regularly.
3. Trailing cables have been removed, and the floor fan has been put out of reach of children and cables will be regularly checked in all classrooms.
4. The following has been actioned
 - The tunnel has been removed.
 - A new shed is now in place.
 - The mesh wire has been removed as it is no longer necessary.
 - The children's playhouse has been removed.

The garden area will be monitored carefully, and any potential hazards will be addressed promptly.

Infection Control:

5. All staff have been updated on the importance of using the pedal to operate the bin, signage has been put in place as a reminder and regular checks will be carried out when nappy changing is in progress.
6. Plastic bags have been removed, and pedal bins are now in place.

7. All staff have been updated on the importance of washing the children's hands after outdoor play and signage has been put in place to remind staff when leaving the garden. Hand washing checks will be carried out after garden times to ensure the process is followed.
8. The ledge of the changing table has been recovered.

Administration of Medication:

9. All medical records have been inspected and updated. Staff have been instructed as to the procedure regarding medication and the protocols to follow. The medical forms will be checked each week by management to ensure the procedure is adhered to, this will also be reflected on during staff meetings.

Outing:

10. Risk assessments will be carried out and documented prior to any outings.

Supporting documentation submitted

General Safety:

1. Evidence of Garda vetting received for five staff members.
2. Photographic image received.
3. Photographic image received.
4. Photographic images received.

Infection Control:

5. Photographic image received.
6. Photographic image received.
7. Photographic image received.
8. Photographic image received.

Administration of Medication:

9. No evidence submitted.

Outing:

10. No evidence submitted.

Summary Comment

The inspector has reviewed the actions submitted. The non-compliances identified under Regulation 23 have been adequately addressed.

Part VI - Safety

Regulation 26 - Fire safety measures

- (1) A registered provider shall ensure that a record in writing is kept of-
- (a) any fire drill that takes place in the premises, and
 - (b) the number, type and maintenance record of fire fighting equipment and smoke alarms in the premises.
- (2) The record referred to in paragraph (1) shall be open to inspection by-
- (c) an authorised person.
- (4) A notice of the procedures to be followed in the event of fire shall be displayed in a conspicuous position in the premises.

Compliance Information

- (1)
- (a) A written record was available detailing fire drills that had taken place in the service. The record showed that the last fire drill took place on 3 June 2025.
 - (b) The number, type and maintenance record of firefighting equipment and smoke alarms on the premises was up to date. Fire extinguishers were last serviced in November 2024 and smoke alarms were serviced on 21 May 2025.
- (2)(c) The records referred to in paragraph one were open to inspection by an authorised person.
- (4) The procedures to be followed in the event of a fire were displayed in a prominent position in the care rooms.