

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2015DS008
<b>Name of Service:</b>	Junior Genius Childcare Ltd
<b>Address of Service:</b>	Castle Bagot House, Baldonnell, Co. Dublin
<b>Eircode:</b>	D22 R6A0
<b>Name of Registered Provider:</b>	Andrea Jebb
<b>Service type:</b>	Full Day, Part Time, Sessional
<b>Dates of Inspection:</b>	08/09/2025
<b>Date 2 of Inspection:</b>	09/09/2025

<b>No of pre-school children:</b>	AM	208	PM	150
<b>Day 2</b>	AM	218	PM	N/A

<b>Address of the Early Years Inspectorate:</b>	Early Years Inspectorate, Floor 7 Brunel Building, Heuston South Quarter, St. John's Road West, Kilmainham, Dublin 8
<b>Inspection undertaken by:</b>	H Sutherland, O Quill, S Quigley
<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
---------------------------------	----------------

### Description of service

Junior Genius Childcare Ltd is a full-day-care service located on the grounds of a period house in Baldonnell, Dublin 22. The service provides care and education for children aged between 0 and 6 years and opens Monday to Friday from 8am to 5:30pm. A sessional service is offered between 9:30am and 12:30pm.

A breakdown of the premises is outlined below:

#### **Main House:**

The main house consists of ten pre-school rooms across three floors; Cherry Tree, Maple Tree, Magnolia Tree, Chestnut Tree, Beech Tree, Willow Tree, Palm Tree, Oak Tree, Crann Péine and Elm Tree. Sanitary facilities are available on each floor. The majority of children accommodated in the main house are over two years of age.

#### **Baby Genius:**

Baby Genius operates from a one-storey prefabricated building and accommodates children under two years of age. There are three pre-school rooms: Fairy Room, Forest Room and Rainbow Room. A staff dining room and a number of offices are also located in this building.

#### **Cabins:**

Three cabins located near the main house are allocated for pre-school children; Birch Tree, Fir Tree and Holly Tree. Sanitary facilities are available within each cabin. Children over three years of age are accommodated in this area.

#### **Sunflower:**

The Sunflower room is a sensory room located in a prefabricated building to the rear of the Baby Genius building. This space is used to accommodate preschool children requiring a break away from their main care room.

#### **Alder Tree:**

Alder Tree is a forest school and operates from a woodland area with a prefabricated building situated near the entrance to the grounds. Alder Tree accommodates preschool children over three years of age.

#### **Outdoor Area:**

All care rooms have designated outdoor spaces and have the option of using additional communal spaces if required.

## Staffing

There are currently 91 adults employed to work in the service including the registered provider, 6 managers, 58 early years educators 7 of which are employed under the Access and Inclusion Model (AIM), 4 cooks, 4 maintenance staff, 8 school age staff and 10 adults assigned to assist with domestic duties. On the first day of inspection there were 44 adults working directly with the children including 5 students. On the morning of the second day of the inspection there were 47 adults working directly with the children including 3 students. The registered provider was present on the first day of the inspection and did not work directly with children.

## 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 (2), (3), (4) Management and recruitment

Regulation 11 (1), (2) Staffing levels

Regulation 16 (i), (k) Record in relation to pre-school service

Regulation 19 (1)(a), (3) Health welfare and development of child

Regulation 25 (1), (2), (a), (b) First aid

Regulation 26 (1), (a), (b), (4) Fire safety measures

Additional non-compliances which posed a risk were identified under regulation 23 Safeguarding health, safety and welfare of child. These findings are outlined within the relevant regulation within this report.

A sampling process was used to assess compliance under regulation 16 (k) Record in relation to preschool service and regulation 19 Health welfare and development of child.

As a result, the scope of the inspection included the following rooms:

Maple Tree, Beech Tree, Chestnut Tree, Magnolia Tree, Oak Tree, Rainbow room, Fairy room, Forest room, Holly Tree and Alder Tree.

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

An immediate action notice was issued to the registered provider on the 9 September 2025 during the inspection in respect of Regulation 9 (2)(c), Garda Vetting. A response was received from the service on the 9 September 2025 which adequately mitigated the risk identified.

### Acknowledgments

The inspectors wish to acknowledge the cooperation of the registered provider, persons in charge, staff and children who were present during the inspection.

### Part III – Management and Staff

#### Regulation 9 – Management and recruitment

*(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

Following discussion with the person in charge it was confirmed that 25 adults had commenced employment in the service since Regulation 9 was last inspected on the 30 January 2023. Documentation required under regulation 9(2)(3)(4) was reviewed in respect of the 25 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.

- (2)
- (a) Forty-two written and verified references were available from past employers.
  - (b) Six written and verified references were available from a source other than a past employer.
  - (c) Garda vetting disclosures had been obtained for 90 adults. 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 two adults who had lived outside of the State for a period longer than six months as an adult.

(4) Documentation was available to show that 14 of the 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. One adult who did not have the required qualification had a letter of eligibility to practice from the Department of Children, Disability and Equality (DCDE). Eleven adults did not require a qualification.

## Non-Compliance Information

The registered provider did not ensure the following checks were carried out prior to one adult working in the service.

- (2)
- (a) (b) References were not available and as such could not be validated.
  - (c) There was no Garda vetting disclosure available for the adult.
  - (d) Documentation was unavailable to establish whether the adult had lived outside of the State for a period longer than six months as an adult.
- (3) The procedures specified above under 9(2) had not been carried out prior to the adult commencing employment in the service, as detailed above under 9(2).

## Corrective & Preventive Action submitted by the Registered Provider

### Corrective and Preventive Action

The registered provider has obtained a full file for the adult and has reviewed the recruitment procedures to ensure all required documentation is obtained and verified prior to any new staff member commencing work. A recruitment checklist has been implemented and must be signed off by the person in charge and the registered provider before employment commences.

### Supporting documentation submitted

All required documentation submitted.

Recruitment checklist submitted.

## Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 9 (2) 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 39 adults available to 209 children on day one of the inspection and 44 adults available to 218 children on day 2.
- (2) The minimum adult to child ratio was maintained in accordance with the children's ages and type of service delivered.

Additionally, there were five adults on work placement working directly with children on day one of the inspection and three on day two.

### 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:*

- (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

- (k) A sample of 76 accident and incident forms were reviewed and found to contain the required information.

#### Non-Compliance Information

- (i) A staff roster was not available for review when the inspectors arrived to the service. When the roster was subsequently provided, it did not accurately reflect all of the staff currently working in the service and their accurate hours of work. Ten staff who were present and working in the service and staff on annual

leave or sick leave were not recorded on the staff roster. The hours staff were rostered to work was at variance with the hours staff told the inspectors they were working. Failure to maintain accurate staff rosters impacts the services ability to demonstrate compliance with required ratios.

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

#### **Corrective and Preventive Action**

The staff roster has been amended to accurately reflect all staff employed to work in the service, including those on leave or absent. Responsibility for maintaining the roster has been reassigned to another manager to ensure consistency, accuracy, and accountability. The roster will be reviewed weekly by the person in charge, all changes to staffing or absences will be recorded immediately. The registered provider will conduct monthly audits to ensure the roster remains up to date and fully compliant.

#### **Supporting documentation submitted**

Updated roster submitted

Staff roster management procedure submitted.

### Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 16 (i) has been adequately addressed and will be subject to review on the next inspection.

### 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.*

*(3) A registered provider shall ensure that no practices that are disrespectful, degrading, exploitive, intimidating, emotionally or physically harmful or neglectful are carried out in respect of a pre-school child whilst attending the service.*

### Compliance Information

1 (b)

The inspectors observed appropriate and suitable care practices within the service during the inspection. Mealtimes were observed to be a pleasant social experience for children, and staff advised that the service provides breakfast snacks and a hot meal each day. Children participating in the Early Childhood Care and Education (ECCE) scheme had the option of availing of the meals provided by the service or bringing in their own

snacks. Staff were observed to sit with children at mealtimes and self-feeding was encouraged and supported for younger children. Bibs were provided for younger children to protect their clothing. Drinking water was available to children and staff were observed to offer children drinks of water with their meals and during outdoor play.

Nappy changing and toileting were carried out in a regular and timely manner. Staff were observed to provide children with notice of the transition and use the one-to-one time to engage in gentle and playful conversation with children. Older children were encouraged to use the toilet independently and staff remained close by to provide support if needed.

The lighting was dimmed in rooms where children slept and staff were observed to comfort and reassure children during sleep time. Children under two years of age were placed in cots in accordance with their individual sleep needs and children over two years of age were provided with sleep mats to rest at a designated time after dinner. Areas with rugs and cushions were available in the care rooms for older children to rest if needed. Provision for rest was also accommodated in the outdoor area. Children were observed using the picnic benches provided in the outdoor areas to take a break from activities when needed.

Staff addressed children by their name and adult child interactions were observed to be warm and affectionate. Minor conflicts with children were managed effectively with staff dropping to children's level and supporting them to resolve the conflict in a positive manner. Children's independence was encouraged and supported for example, packing away lunch boxes and tidying up following play. The indoor environments encouraged autonomy, children were observed to move freely between areas following their own interests and engaging in positive interactions with their peers. Staff reported that they try to spend as much time outdoors with the children as possible and all children were observed to have ample time outdoors during the inspection. Each care room had access to their own outdoor space.

(3)

The inspectors did not observe any care practices that were disrespectful, degrading, exploitive, intimidating, emotionally or physically harmful or neglectful to the children in attendance during both days of inspection.

### 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. Garda vetting was available for five staff members. However, these vetting disclosures were not dated within the previous three years in adherence with the Early Years Inspectorate Regulatory Notice 'EYI-RN12.3 Renewal of Garda Vetting'.
2. A trailing cable from an air conditioning unit was observed near a soft play area used by children in the Forest Room. Unsecured electrical cables can pose a risk of entanglement or injury if tampered with by children. The service was found to be non-compliant for trailing cables on the last inspection on 30 January 2023. The corrective actions submitted following this inspection failed to prevent recurrence of this non-compliance.

##### Infection Control:

3. Inspectors observed some handwashing practices were not effective in preventing infection and posed a risk of cross contamination:
  - Children attending the Maple Tree room did not have their hands washed following outdoor play and prior to eating their lunch.
  - Children's hands were not washed before snack time in the Rainbow room.
  - A staff member was observed changing a child's nappy and did not wash their hands or the child's hands following nappy changing.
4. A staff member was observed changing a child who had soiled during toilet training; the staff member did not remove their soiled gloves and apron when redressing the child and subsequently left the changing area still wearing the gloves and apron to retrieve additional clothing. This was at variance with the services toilet/potty training policy.
5. Although staff advised that a system was in place for the effective sterilisation of mouthing toys, the inspector observed toys remaining in circulation after use by babies posing a risk of the spread of infection and cross contamination.

### Action submitted by the Registered Provider

#### Corrective & Preventive Action

##### General Safety:

1. Garda vetting disclosures have been renewed for four of the staff members. An application for a renewed garda vetting disclosure has been submitted for the fifth staff member. Records have been updated to ensure future compliance, and a vetting renewal tracking system has been implemented.
2. The air conditioning unit has been removed from the Forest Room. A risk assessment will be conducted prior to placing the unit back into the room and room leaders will carry out a daily safety walk to identify and report any environmental hazards.

##### Infection Control:

3. The service's handwashing policy and nappy changing policy have been reissued to all staff. The service will incorporate handwashing into daily routines and the curriculum using stories, songs, visual cues and posters. Management will carry out regular checks on hand washing routines and document findings.
4. A new potty-training procedure has been developed, circulated and discussed with all staff to ensure clear understanding and consistent practice. Management will carry out regular checks on potty training practices and document findings.
5. The mouthing toys sterilisation procedure has been refreshed with baby unit staff. The process for immediate removal and sterilisation of mouthed toys has been reinforced and room managers now check daily to confirm compliance.

#### Supporting documentation submitted

##### General Safety:

1. Garda vetting records submitted for four staff members and evidence of an application for Garda vetting for the fifth staff member submitted.
2. No evidence submitted

##### Infection Control:

3. Copy of the nappy changing procedure and checklist submitted.
4. Copy of the updated potty-training procedure and check list submitted.
5. No evidence submitted.

### Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliances identified under Regulation 23 points 2 to 5 have been adequately addressed and will be subject to review on the next inspection. The non-compliance relating to Garda vetting in point 1 remains outstanding as evidence of a Garda vetting disclosure has not been received for the fifth staff member.

### Part VI - Safety

#### Regulation 25 - First aid

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

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

- (a) is safely stored in an easily accessible and conspicuous position on the premises, and*
- (b) is available to the children attending the pre-school service at all times.*

### Compliance Information

(1) There was evidence to show that six adults hold certification in First Aid Responder training, and all six were available on both days of inspection.

- (2)
- (a) Suitably equipped first aid boxes were available and stored safely in an easily accessible and conspicuous positions within the service.
  - (b) The first aid boxes were observed to be easily available to the adults caring for the children attending the service.

### 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.
- (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 25 August 2025.
  - (b) The number, type and maintenance record of firefighting equipment and smoke alarms on the premises was up to date. Fire extinguishers were serviced on 20 March 2025 and smoke alarms were serviced on 10 March 2025.
- (4)
- The procedures to be followed in the event of a fire were displayed in the office, main building and portacabins.