

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier: TU2015DY050

Name of Service: Clever Clogs

Address of Service: Central Hall, St Lawrences Road, Dublin 3

Eircode: D03 T448

Name of Registered Provider: Louise O'Hara

Service type: Full Day

Date of Inspection: 26/01/2026

No of pre-school children:	AM	61	PM	51
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Address of the Early Years Inspectorate:	Early Years Inspectorate Area 1 2 nd Floor, Unit 4/5 The Nexus Building Blanchardstown Corporate Park Ballycoolin Dublin 15 D15 CF9K
Inspection undertaken by:	T. Nelson and E. Griffin
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

Clever Cloggs is a full day care service located in a residential area of Clontarf on the north side of Dublin city and is registered to provide early childhood care and education to a maximum of 130 children aged 0 to 6 years old, Monday to Friday. The service operates an Early Childhood Care and Education (ECCE) programme sessional service from 9.00am to 12.00pm and also operates a registered school age service. The service is one of two services operated by the registered provider.

Clever Cloggs operates from the ground and first floor of a converted building and currently has five care rooms to include on the ground floor: ECCE rooms 1 to 3 each catering for children from 3 to 6 years old. On the first floor: the Wobbler Room (currently 1 to 2 years old), and Toddler room (1 to 3 years old). There are sanitary facilities and/or nappy changing facilities located off each of the care rooms, and a cot room located off the Wobbler room. Further sanitary facilities are available for staff.

An outdoor play area is located to the front of the premises, however due to poor weather conditions this was not reviewed on the day of the inspection.

Staffing

There are currently 31 staff employed to work in the service including the registered provider, 20 childcare staff who work directly with the children, two trainee early years practitioners who do not work in ratio, three school aged practitioners and a cook. There are also four staff available to provide cover when needed.

There were 19 adults present throughout the day of the inspection including the registered provider and 18 staff.

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, premises and facilities. The inspection may also focus on other areas as required.

The inspection focused on an examination of compliance under regulations 9, 11, 16, 19, 22 and 23; however, on inspection additional non-compliance was identified under Regulation 29. These findings are outlined within the relevant regulations within this report.

A sampling process was used to assess compliance under

- Regulation 9 (1)(2)(3)(4) – Management and Recruitment
- Regulation 16(1)(j) – Record in relation to Preschool Service
- Regulation 19 (1)(a)-Health, Welfare and Development of child
- Regulation 23 – Safeguarding Health, Safety and Welfare of Child
- Regulation 29 Premises

As a result, the scope of the inspection included ECCE room 2 and 3 and the Toddler Room.

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, 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
- (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) The registered provider ensured that;

- (a) The service had a designated person in charge and named person to deputise as required.
- (b) A review of the roster showed either the person in charge or the deputy person in charge were rostered to be present during the operational hours of the service.
- (c) There was a clear management structure in place, and staff reported being aware of this.

(2) Following a review of previous inspection information, information available on inspection and discussion with the registered provider it was determined that two new staff members had been employed since the previous inspection and these new staff members work directly with the children. A total of two full files were reviewed. In addition, Garda vetting disclosures for five adults were requested for review including an adult facilitating a sport activity who was present on the day and the qualifications for two staff members whose files were reviewed on the last inspection.

The registered provider had completed the following checks:

- (a) Three validated written references were available from recent past employers.
 - (b) One validated written reference was available from a source other than a past employer.
 - (c) Garda vetting disclosures had been obtained for all seven disclosures reviewed. 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) Documentary evidence was available that established that no adults required international police vetting.
- (3) Documentary evidence available showed that all of the checks outlined in (2) had been carried out prior to any of the adults having contact with the children in the service.

Non-Compliance Information

(4) There was no documentary evidence available to show that one of the three staff members who were observed providing direct care to the 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. It is acknowledged that of the four qualifications reviewed, it was established that one staff member does not work directly with the children.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The service has requested documentary evidence of the relevant qualification and commit to monitor their staff files regularly to ensure all paperwork is up to date.

Supporting documentation submitted

No evidence submitted.

Summary Comment

This regulation remains non-compliant as the registered provider's response did not contain any evidence that the staff member holds a relevant qualification.

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 attending the service to meet their care needs. There were 19 staff available to 61 children present on the morning of the inspection.

Non-Compliance Information

(2) The registered provider did not ensure that the minimum ratio of adults to children was maintained. Adults included in ratio must hold a relevant qualification.

Service Type:	Age Range:	Number of children present:	Number of qualified adults proving direct care:	Minimum number of qualified adults required:
Full day care	1-3 years old	14 (7 aged 1-2 years, 7 aged 2-3 years)	2	3

It is acknowledged that there was a third staff member in the care room providing support.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The service has requested documentary evidence to show the staff member holds a relevant qualification and commit to ensure that all rooms will meet the correct adult-child ratios.

Supporting documentation submitted

No evidence submitted.

Summary Comment

This regulation remains non-compliant as the registered provider's response did not contain any evidence that the staff member holds a relevant qualification.

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:

(j) details of any medication administered to a pre-school child attending the service with signed parental consent.

Non-Compliance Information

- (1)
- (j) The registered provider did not ensure a full record in writing for the administration of medication was maintained. From a sample of four records reviewed the following was identified:
- One record did not have the signatures of the following: the person administering the medication, a witness of the administration of the medication, the parents acknowledging the child had received the medication.
 - One record did not have a signature of the parents acknowledging the child had received the medication.
- A full record with the child's full name, details of two staff who administer the medication, and an acknowledgment of the administration by the parent must be maintained in order to accurately account for safe administration practice and prevent miscommunication on the administration of medication.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The service reported they have trained all staff on how to complete the medication administration forms and commit to carrying out a weekly inspection on the forms to ensure compliance.

Supporting documentation submitted

No evidence submitted

Summary Comment

This regulation remains non-compliant as the registered provider's response did not provide evidence that the non-compliance had been rectified.

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-

(a) each child's learning, development and well-being is facilitated within the daily life of the pre-school service through the provision of the appropriate activities, interaction, materials and equipment, having regard to the age and stage of development of the child, and

Compliance Information

- (1)
- (a) The registered provider ensured the following measures were in place to facilitate the children's learning, development and wellbeing:
- Basic Needs**
- Practices such as mealtimes, nappy changing and toileting were observed to be timely and pleasant experiences for the children. Documentary evidence was available that showed mealtimes and nappy changing were regular.
 - Staff were observed to tend to the personal care of the children, for example doing a child's hair so their hair was out of their eyes so they could play comfortably.
- Supporting Relationships**
- The staff interacted with the children in a respectful, warm and sensitive manner. Appropriate verbal and nonverbal communication such as low tones, touch and other strategies were observed to provide comfort when needed to children. These strategies can facilitate emotional and social development in young children.

- Engagement with families and parents was facilitated via conversations at drop off and collection where updates on the children's day was shared. Staff were familiar with parents, siblings and extended family members. This can promote a sense of welcome and identity for young children.

Physical and Material Environment

- Images of the children and their families were displayed throughout the service promoting the child's sense of inclusion in the setting.
- The furniture provided in the rooms was low level and appropriate for children attending, with toys, equipment and play materials easily accessible and visible to the children which nurtured independence and facilitated choice.
- There was a variety of play materials available to the children to support a range of play experiences such as role and imaginary play, small world play, construction and mark making.
- There was an area in the care rooms where the children could take a break from activities and rest.

Programme of Learning

- Children had the freedom to move freely throughout the rooms and engage in activities of their choice.
- Adult led activities were timed and planned according to the age and stage of the children in the care room.
- Children were supported to be active and independent in their play, for example they were encouraged to tidy up the rooms and put away their artwork independently.

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

The service ensured there was adequate and suitable food and drinks available. For example:

- The service followed a four-week menu plan, and the documentary evidence available showed there was a varied selection of food available, with alternative options for children with additional or alternative diets.
- All food, apart from the snack in the ECCE rooms which is provided by parents, was provided by the service and prepared in the onsite kitchen.
- Food offered throughout the day included breakfast on arrival, a snack at 10.00am, a hot meal at 11.30am and a tea at 3.00pm. On the day of the inspection the children were offered cereals for breakfast, mixed chopped fruit for snack and pasta bake for lunch.
- Drinking water was freely available in the care rooms throughout the day.
- Staff reported that parents are given the healthy food policy when the child commences in the service and the menu is shared with parents.

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 to the service was secured on the day of the inspection with an electromagnetic lock system which was managed and monitored by staff. A camera provided visibility of the doorway, and the door release was up high out of reach of children. This restricted unauthorised persons from gaining access to the premises and prevented children from exiting the service unsupervised.
- The stairway was observed to be clear and well-lit with a suitable handrail in place.
- Grapes in children's lunch boxes from home were observed to be cut into appropriate bite sized portions.
- Cleaning products and medication were stored up high out of reach of children.

Infection Control:

- Children's lunches from home were stored appropriately refrigerated.

- Staff were observed to support children to tend to their nasal hygiene.
- Children were supported to hand wash before meals.
- Children’s cups and bottles were individually labelled.
- The rooms appeared to be clean and there was an up-to-date cleaning schedule available.
- Children’s bed linen was laundered on a daily basis.

Safe Sleep:

- A log was maintained where the temperature of the room and the colour, breathing and position of sleeping children was checked every ten minutes.

Fire Safety:

- Emergency exits were observed to be unobstructed.
- Emergency evacuation procedures were displayed in the care rooms.
- Staff were observed to monitor and accurately record and number of children in attendance which can support the safe evacuation of children in an emergency.

Non-Compliance Information

The following posed a potential risk of injury to the children:

General Safety:

1. The kitchen was not adequately secured to prevent access by children. At 1.14pm the door and safety gate were observed to be open to the kitchen which was unattended. This posed a possible risk of children accessing hazardous items present in the kitchen.
2. Garda vetting was available for a staff member whose file was reviewed. However, this vetting disclosure was not dated within the previous three years in adherence with the Early Years Inspectorate Regulatory Notice ‘EYI-RN12.3 Renewal of Garda Vetting’.
3. A press in one of the care rooms was observed to be unsecured and accessible to children. The electric heater with trailing flex and first aid box stored in the press posed a potential risk of injury to the children.
4. The front panel of a storage drawer was broken and unstable. This posed a risk of injury if it should fall on a child.
5. The flooring in the hallway on the ground floor was uneven and posed a potential trip hazard to the children and staff. It is acknowledged that this was included in a risk assessment and was scheduled for works to be completed.

Infection Control:

6. The hot water in in the three sinks in the sanitary area one of the care rooms on the ground floor was not observed to be sufficiently warm to provide for effective hygienic hand washing. Temperatures ranging between 12.5 and 14.5°C were recorded by the inspector.
7. Toilet rolls were observed to be stored in an unhygienic manner in the sanitary area in one of the care rooms on the ground floor. The toilet rolls were observed to be stored adjacent to the sink and the toilet, increasing the risk of cross contamination.

Safe Sleep:

8. Sleep practices were not in line with current safe sleep guidance or the service policy on safe sleep. The following practices were observed:
 - Three children under 2 years old were observed to sleep on stackable low beds. These are not suitable sleep equipment for children under the age of two years. It is acknowledged that four additional children under two years had access to appropriate floor beds.
 - There were no agreed sleep plans available with parental permission and there was no risk assessment in place for those children under the age of two years who did not sleep in a cot.

A sleep plan, incorporating a risk assessment and parental consent, should be completed before moving a child from a cot to a floor bed.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1. Kitchen staff were briefed on the importance of closing the gate when leaving the kitchen and a sign is now displayed as a reminder.
2. Updated Garda Vetting was obtained, and the service commit to ensure all files are up to date.
3. A lock was secured to the press, and the service commit to check this is in place.
4. The storage unit was repaired, and the service commit to checking on a daily basis.
5. The flooring was lifted and works carried out; the service commits to monitor this on a daily basis.

Infection Control:

6. The service report that water temperatures were as a result to local water repairs in the area and that the water temperatures are now adequate.
7. New toilet-roll holders were purchased and are now in use.

Safe Sleep:

8. The registered provider reports that they have received a written plans for the four children under two years old who sleep on low beds.

Supporting documentation submitted

General Safety:

1. Photographic evidence.
2. Documentary evidence.
3. Photographic evidence.
4. Photographic evidence.
5. Photographic evidence.

Infection Control:

6. No evidence submitted.
7. Documentary evidence.

Safe Sleep:

8. No evidence submitted.

Summary Comment

The actions taken by the registered provider address 6 of the 8 non-compliances identified. The findings documented at points 6 and 8 remain non-compliant as the registered provider's response did not provide adequate assurance that the non-compliance had been rectified.

Part VII - Premises and Space Requirements

Regulation 29 - Premises

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

- (c) kept adequately lit, heated and ventilated*
- (d) cleaned, maintained and repaired, as required, and*
- (e) equipped with adequate and suitable sanitary facilities.*

Non-Compliance Information

- (c) The service did not ensure one of the first-floor care rooms was adequately heated. A temperature ranging between 14.8°C to 15.2°C was recorded by the inspector on the morning of the inspection. This was below the recommended ambient temperature of 18-22 °C in a care room. It is acknowledged that a second source of heating was in use for the remainder of the inspection.
- (d) Plaster and paint were observed to be peeling and loose on the ceiling of one of the first-floor care rooms. There was a risk this would fall off and be accessible to children.

- (e) There was no toilet door in a toilet in the sanitary area of one of the care rooms on the ground floor. This did not allow for adequate and suitable privacy for the children.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

- (c) The registered provider reported that the heating issues were as a result of a recent storm and that these issues are now resolved.
- (d) The service plan to replaster the wall within the coming weeks.
- (e) The registered provider is in the process of fitting a door to the toilet cubicle.

Supporting documentation submitted

No evidence was submitted.

Summary Comment

The actions taken by the registered provider address point (c) of the non-compliances identified. The findings documented at points (d) and (e) remain non-compliant as the registered provider's response did not provide adequate assurance that the non-compliance had been rectified.