

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2015DY050
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<b>Name of Service:</b>	Clever Clogs
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<b>Address of Service:</b>	Central Hall, St Lawrences Road, Dublin 3
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<b>Eircode:</b>	D03 T448
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<b>Name of Registered Provider:</b>	Louise O'Hara
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<b>Service type:</b>	Full Day
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<b>Date of Inspection:</b>	20/05/2025
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<b>No of pre-school children:</b>	AM	68	PM	62
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<b>Address of the Early Years Inspectorate:</b>	Early Years Inspectorate Area 1 2 <sup>nd</sup> Floor, Unit 4/5 The Nexus Building Blanchardstown Corporate Park Ballycoolin Dublin 15   D15 CF9K
<b>Inspection undertaken by:</b>	T Nelson and E Griffin
<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

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 has seven 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), Junior Toddler room (2 to 3 years old) and Toddler room (2 to 3 years old). The playschool room on this floor is not currently operational. 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.

### Staffing

There are currently 31 staff employed to work in the service including the registered provider, 18 childcare staff who work directly with the children, three trainee early year practitioners who do not work in ratio, four school aged practitioners and a cook. There are also four staff available to provide cover when needed.

There were 16 adults present on the day of the inspection including the registered provider, the cook, 11 childcare staff who worked directly with the children and three trainee early year practitioners.

### 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 and safety. The inspection may also focus on other areas as required.

A sampling process was used to assess compliance under Regulation 9 (1)(2)(3)(4) – Management and Recruitment and Regulation 16(1)(h)(i)(j)(k) – Record in relation to Preschool Service. As a result, the scope of the inspection included the Toddler room and ECCE 3.

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, deputy 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) The service had a designated person in charge and named person to deputise as required.
- (b) A review of the roster showed that either the person in charge or the deputy person in charge were rostered to be present during the operational hours of the service.
- (2) The staff roster was reviewed and discussed with the registered provider. The full file of a staff member who was new to the service since the last inspection on the 23 October 2024 was reviewed along with Garda Vetting disclosures for three staff members and the qualification of two staff members whose files were reviewed on the last inspection.
- (a) One validated written reference was available from a recent past employer.
  - (b) One validated written reference was available from a source other than a past employer.

(c) Garda vetting disclosures had been obtained for four staff. 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) International police vetting was not required as documentary evidence established that the staff member had not lived outside of Ireland for longer than six months.

(3) Documentary evidence available showed the checks outlined in (2) had been carried out prior to the staff member having contact with the children in the service.

(4) Two of the three staff who worked directly with children attending the service held a major award in Early Childhood Care and Education at Level 5 or above on the National Framework of Qualifications.

### Non-Compliance Information

(4) There was not sufficient documentary evidence to establish that a staff member who worked directly with children attending the service held at least a major award in Early Childhood Care and Education at Level 5 on the National Qualifications Framework. Staff who work directly with children must be qualified to the minimum required standard in order to suitably provide informed practice to meet the needs of children in their care. This was identified as a non-compliance on the previous inspection held on the 23 October 2024 and actions put in place failed to prevent a recurrence.

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

#### Corrective and Preventive Action

The staff member is in the process of attending a Level 5 course.

#### Supporting documentation submitted

Evidence of enrolment on a course.

### Summary Comment

Regulatory compliance remains outstanding as the registered provider did not provide any corrective actions to address the finding. The registered provider must provide evidence of a relevant qualification to the inspectorate when it is received.

## 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.*

*(4) Subject to paragraph (5), where a registered provider contemporaneously provides-*

*(a) a sessional pre-school service, and*

*(b) a full day care service or a part-time day care service, or both, the minimum ratio of adults to children applicable for the duration of the sessional pre-school service in respect of the children attending that service shall be the ratio specified in paragraph (3).*

### Compliance Information

(1) On the day of inspection there were an adequate number of adults available to the children attending the service to meet their care needs.

- There were 15 staff available to 68 children present on the morning of the inspection and 62 children present in the afternoon.
- There were 11 staff to work directly with the children, and three trainee staff and the registered provider were available to provide support when needed.

(4) The adult to child ratios were maintained correctly throughout the inspection. For example:

- The roster allowed for staff available to provide cover for breaks.
- Staff reported they were aware of the required ratios for the age range of children in their room.

### 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:*

- (a) the name, position, qualifications and experience of the person in charge and of every other employee, unpaid worker and contractor;*
- (b) details of the class of service and the age profile of children for which the service is registered to provide services;*
- (c) details of the adult:child ratios in the service;*
- (d) the type of care or programme provided in the service;*
- (e) the facilities available;*
- (f) the opening hours and fees;*
- (g) the policies, procedures and statements the service is required to maintain in accordance with Regulation 10;*
- (h) details of attendance by each pre-school child on a daily basis;*
- (i) details of staff rosters on a daily basis;*
- (j) details of any medication administered to a pre-school child attending the service with signed parental consent;*
- (k) details of any accident, injury or incident involving a pre-school child attending the service.*

#### Compliance Information

(1) The registered ensured the following:

- (a) Details of the name, position, qualifications, and experience of all staff were maintained within the staff files and on display in the hallway.
- (b) The service Tusla certificate detailed the class of service and the age profile of children for which the service is registered to provide services. This was displayed in the hallway.
- (c) The adult: child ratios were displayed in the care rooms.
- (d) The type of care or programme provided was displayed in the hallway.
- (e) The policy document outlined the facilities available within the service.
- (f) The policy document outlined the opening hours and fees of the service.
- (g) The registered provider maintained all the policies required in accordance with Regulation 10.
- (h) Attendance records detailing the daily arrival and departure of the children were maintained.
- (i) A record was maintained of the staff roster which was reflective of the staff present on the day.

(k) Following a review of a sample of 15 records, the registered provider ensured a full record in writing was maintained for accident and incidents.

### Non-Compliance Information

(1) (j) The registered provider did not ensure a full record in writing with signed parental consent for the administration of medication was maintained. Four of the 15 records reviewed did not have a parent's signature or initial acknowledging they were aware the medication had been administered. This posed a risk of miscommunication in the administration of medication.

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

#### Corrective and Preventive Action

The service ensures weekly manager checks will be completed on medication administration books. This check was added to the weekly management risk assessment forms.

#### Supporting documentation submitted

Copy of manager checklist.

### Summary Comment

The inspector has reviewed the action and evidence submitted. The non-compliance identified under Regulation 16(1)(j) has been 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

(1) (b) The following care practices were observed in place to meet the needs of the children in the service:

- The children were provided with regular meals, with snacks provided by the parents. The hot meal on the day provided by the service was mash potato with fish fingers and beans. Additional portions were made available when the children requested they wanted more.
- Children's drinks were visible and accessible in the care rooms.
- Practices such as toileting and toilet training were observed to be respectful. Children in the Toddler room were gently reminded would they like to use the toilet, and the children were encouraged and praised for their efforts.

- The staff interacted with the children in a warm sensitive manner, using the child's name, getting to their level and using other verbal and nonverbal strategies such as modelling, praise, repetition, questioning and song to support children in their activities.
- Daily routines were available and were reflected in practice.
- All of the children had access to outdoor play on the day of the inspection.
- Engagement with families and parents was facilitated through daily conversations at drop off and collection, and through messages and pictures via an online software application.
- There was a plan in place to support a child to communicate using visual displays and indicators.
- The children were observed to have the freedom to move through their care room and choose their own play experiences.
- Transitions were observed to be seamless and timely, with staff familiar with the routine and indicating to the children what will happen next.

### 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

The following measures were observed to safeguard children:

##### General Safety:

- The door to the service was secured on arrival to the service, and throughout the inspection. Entry was managed and monitored by staff. This restricted unauthorised persons from gaining access to the premises and prevented children from exiting the service unsupervised.
- There was secure fencing suitably positioned around the outdoor play area to enclose the children in the play space.

##### Infection Control:

- Thermostatically controlled warm water, liquid soap and single use hand towels were available at all wash hand basins used by the children and the staff members.
- Staff were observed to support children to hand wash before mealtime.
- Although no nappy changes were observed on the day of the inspection, suitable single use aprons and gloves were available.
- Children's snacks from home were suitably refrigerated.

### Safe Sleep:

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

### Fire Safety:

- The children's attendance was recorded in the attendance log, to accurately account for their presence in the premises.
- The attendance log was taken to the outdoor play area to account for the children outside.

### Non-Compliance Information

#### General Safety:

1. A bottle of air-freshener was accessible to the children in the sanitary accommodation on the first floor. This posed a potential risk of injury to children. The inspector moved this out of reach of children to a high shelf.
2. Garda vetting was available for a staff member. 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'. This posed a potential safeguarding risk.
3. Although a garda vetting disclosure was available for a staff member, there was no consideration of the disclosure such as a risk assessment. Any disclosures should be assessed to determine any potential risk to the children.

#### Infection Control:

The following increased the potential risk of infection in the Toddler room:

4. The cable box for some wiring by a skirting board was not secured, and was loose, leaving a surface that could not be effectively cleaned.
5. There was a build-up of dust and dirt throughout the room. The cleaning checklist for the room had not been updated since the 7 May 2025, and the 8 April 2025 previous to this.

### Action submitted by the Registered Provider

#### Corrective & Preventive Action

#### General Safety:

1. Staff were informed of the correct storage procedures for all cleaning products. The daily risk assessment for the sanitary area was updated to ensure – no dangerous substances/ cleaning products are left within reach of children.

2. An updated garda vetting disclosure was submitted for the staff member. The manager checklist was updated to include check that in date garda vetting is available for all staff.
3. The registered provider has considered and assessed the disclosure provides no risk to children and ensures future disclosures will be considered and risk assessed. This has been added to the manager checklist.

### Infection Control:

4. The cable box was secured on the day of the inspection, and the daily risk assessment was updated to include a check for this.
5. The room was deep cleaned the registered provider ensures regular cleaning will be carried out to prevent dust build up.

### Supporting documentation submitted

#### General Safety:

1. Updated daily risk assessment.
2. Garda vetting disclosure
3. Copy of updated manager checklist.

#### Infection Control:

4. Copy of updated manager checklist. Photographic evidence.
5. No evidence submitted.

### Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliances identified under Regulation 23 have been addressed and will be reviewed on the next inspection.

### 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) A review of the roster established that a person trained in First Aid Responder training was available at all times to the children attending the pre-school.
- (2) (a) A well-equipped first aid bag was stored in the hallway of each floor of the premises, and the bags were clearly identifiable.
- (b) The first aid bags were easily accessible and readily available.

### 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 firefighting 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) The registered provider ensured:
- (a) A record of fire drills was available on the premises with the last drill dated as having been carried out on the 17 April 2025.
  - (b) An up-to-date maintenance record was available for the smoke alarms in the premises which were maintained on the 13 August 2024
- (3) Procedures to be followed in the event of a fire was on display in each of the care rooms.

## Non-Compliance Information

(1) (b) There was no up to date documentary evidence available to establish that the fire extinguishers had been maintained. This posed a risk that the fire extinguishers may work effectively in the care of a fire.

## Corrective & Preventive Action submitted by the Registered Provider

### Corrective and Preventive Action

The fire extinguishers had been serviced in May 2025; and did not have the cert available at the time of the inspection. The registered provider ensures the documentation will be available going forward.

### Supporting documentation submitted

Copy of maintenance certificate.

## Summary Comment

The inspector has reviewed the action and evidence submitted. The non-compliance identified under Regulation 26 has been addressed.